



This Court held an initial status conference on March 27, 2014, and, after a second status conference on April 25, 2014, discovery commenced when the Court entered CMO 4, which among other things, set forth an initial discovery plan. (Dkt. No. 101 at 17-24). This plan provided for certain document production by Pfizer (including electronic discovery), interrogatories served by Plaintiffs on Pfizer, and depositions of Pfizer and its current and former employees. (*Id.*) On May 2, 2014, the Court entered CMO 5, which required Plaintiffs to serve Plaintiff Fact Sheets and certain mandatory disclosures on Pfizer. (Dkt. No. 110).

With discovery underway, the Court turned to the process for selecting a bellwether case for trial. Under Amended CMO 6, entered on May 22, 2014, the Plaintiffs' Steering Committee (PSC) and Defendant each selected seven (7) cases for the Discovery Pool in June of 2014. (Dkt. No. 148 at 4). More in depth case specific discovery was taken in these 14 cases in the Fall of 2014, including the propounding of written discovery on Discovery Pool Plaintiffs, depositions of Discovery Pool Plaintiffs, immediate family members and healthcare providers, depositions Pfizer sales representatives, and completion of a Defendant Fact Sheet by Pfizer. (*Id.* at 5).

On January 30, 2015, the Court convened the parties to randomly select the first cases for bellwether trials from the Discovery Pool cases. (Dkt. No. 739). By stipulation, the parties narrowed the fourteen (14) Discovery Pool cases to four (4) cases. The Court then randomly selected the first bellwether trials from these four (4) cases. The first case selected was *Daniels v. Pfizer*, Case No. 2:14-cv-01400, and the second case selected was *Hempstead v. Pfizer*, Case No. 2:14-cv-01879. Thereafter, the parties conducted additional case-specific discovery in these two cases. (*See* CMO 29, Dkt. No. 746; CMO 30, Dkt. No. 790).

From the beginning of this MDL, the parties have agreed that Plaintiffs must prove both general and specific causation as elements of their claims and have litigated this case as if expert testimony is needed to prove both. General causation is whether a substance is capable of causing a particular injury or condition (in this instance, whether Lipitor is capable of causing diabetes); specific causation is whether the substance caused the injury of the particular plaintiff at issue (in this instance, whether Lipitor caused Ms. Hempstead's diabetes). *E.g., Norris v. Baxter Healthcare Corp.*, 397 F.3d 878, 881 (10th Cir. 2005). "Plaintiff[s] must first demonstrate general causation because without general causation, there can be no specific causation." *Id.* Here, if Lipitor is not capable of causing diabetes, it follows that it is not the cause of diabetes in particular plaintiffs.

The parties served common expert disclosures, including general causation experts, in March and April of 2015. (*See* CMO 29, Dkt. No. 746). Over Defendant's objection, the Court allowed Plaintiffs to supplement these disclosures in May of 2015 "to ensure this Court has the best information possible when addressing *Daubert* motions." (CMO 34, Dkt. No. 869 at 2). The parties then served specific causation expert disclosures in the two bellwether cases, in May and June of 2015. (*See* CMO 29, Dkt. No. 746; CMO 34, Dkt. No. 869). The Court allowed Plaintiffs to serve a rebuttal report by one of these case specific experts, again over Defendant's objection. (*See* CMO 38, Dkt. No. 967).

After full discovery, Defendant filed motions to exclude Plaintiffs' general causation expert testimony as well as Plaintiffs' specific causation expert testimony in the two bellwether cases. (Dkt. Nos. 972, 1004, 1006). As more fully explained below, after extensive briefing and oral argument, the Court ultimately excluded Plaintiffs' expert testimony on general causation with respect to dosages of less than 80 mg. (*See* CMO 49, Dkt. No. 1197; CMO 68, Dkt. No.

1469). The Plaintiffs at issue here all ingested dosages of Lipitor less than 80 mg.<sup>3</sup> Thus, the Plaintiffs here do not have admissible expert testimony on general causation.

As explained in more detail below, the Court also excluded the expert testimony of Dr. David Handshoe and Dr. Elizabeth Murphy, the two specific causation experts in the bellwether cases because their opinions were based on nothing more than an increased risk and temporal association. (CMO 55; Dkt. No. 1283; CMO 76, Dkt. No. 1517). However, Plaintiffs noted that in the SPARCL study, patients with certain characteristics and taking 80 mg of Lipitor had a relative risk ratio of developing diabetes greater than 2.0, meaning it was more likely than not that these individuals would not have developed diabetes in the absence of Lipitor.<sup>4</sup> Thus, it was possible that Plaintiffs with such characteristics and taking 80 mg of Lipitor might be able to proffer a specific causation expert opinion that would survive *Daubert*, even if the Court's ruling in CMO 55 was correct, and the Court entered a scheduling order to identify and take to trial such a case. (*See* CMO 61, Dkt. No. 1323).

However, in a hearing on the matter on January 22, 2016, Plaintiffs' Lead Counsel stated that there was no plaintiff in the MDL that met those criteria. (Dkt. No. 1347 at 5). Thus, the Court turned to where that left the MDL proceedings:

THE COURT: Let's talk for just a minute about where that leaves us. . . . let me ask this first from the plaintiffs: Is there any reason to believe that if we picked a 20- or 40- milligram case to try as a bellwether that you would have any

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<sup>3</sup> In most of these cases, the parties agree, for the purposes of this motion only, that these Plaintiffs ingested Lipitor in dosages of less than 80 mg prior to diagnosis of diabetes. (Dkt. Nos. 1658, 1680, 1748). In other cases, the parties agree that Plaintiffs allege pre-existing diabetes, i.e., that Plaintiffs were diagnosed with diabetes prior to taking Lipitor. (Dkt. No. 1680). For the cases where the parties agree that Plaintiffs were diagnosed with diabetes prior to ingesting Lipitor, it is impossible that Lipitor caused their diabetes, and the Court grants summary judgment on this ground as well.

<sup>4</sup> For an in depth discussion of relative risk and its implications, see CMO 55, Dkt. No. 1283.

class of cases or factual presentation or new theory that might survive specific causation, assuming the correctness of the Murphy order? Mr. Hahn?

MR. HAHN: The short answer is no, sir, Your Honor, we don't. Given the Murphy order and the Court's reading of the medicine, we are not going to be able to get a differential diagnosis that's going to survive.

THE COURT: Well, it's not a differential diagnosis, you've got to show specific causation more likely than not. And you have an opinion to that. . . .

But if we assume for a minute that the critical question then is whether the Court is correct regarding the standard, if you are telling me, Mr. Hahn, that if I'm correct, then you're not going to have a case that survives summary judgment?

MR. HAHN: Yes, Sir.

(Dkt. No. 1347 at 9-10). The Court went on to discuss with counsel options for proceeding within the MDL. Defendant's Lead Counsel suggested the Court issue an order to show cause to see if any Plaintiff could differentiate her case and then, if not, grant summary judgment in all cases, and Plaintiffs' Lead Counsel agreed:

MR. CHEFFO [Defendant's Lead Counsel]: . . . So I think what is most efficient for this litigation . . . is to have that ultimately reviewed, right? And I think that what other courts in similar situations have done is they have basically said, just issue an order to show cause and said, look, you know, if anybody thinks that they are differently situated or has some kind of different argument or something else, they can come forward; if not, what we are going to do is we are going to grant judgment on that.

. . . they would then . . . presumably get appealed to the Fourth Circuit and the Circuit Court would do what it's going to do. And I think that's the appropriate . . . remedy in an MDL.

. . . the most efficient way is to expeditiously grant summary judgment for all the cases on that ground, and anything else, get to the Fourth Circuit and have the Court review it.

THE COURT: Mr. Hahn, what your thoughts?

MR. HAHN [Plaintiffs' Lead Counsel]: Judge, I – I believe that Mark was cheating and reading off of my notepad. We basically agree. . . .

(Dkt. No. 1347 at 11-13).

The Court took counsel's suggestion and issued CMO 65, which stated,

**NOTICE: THIS ORDER CONTAINS AN IMPORTANT DEADLINE FOR ALL PLAINTIFFS.**

Lead Plaintiffs' counsel advised the Court in an on the record telephone conference of January 22, 2016, that, if the Court's ruling excluding the expert testimony of Dr. Elizabeth Murphy (CMO 55, Dkt. No. 1283) is correctly decided, then none of the cases now pending in the MDL will be able to survive summary judgment on the issue of specific causation. Notice is hereby given that any Plaintiff who disputes the position taken by Plaintiffs' Lead Counsel and asserts that her case can survive summary judgment on specific causation even if the Court's ruling in CMO 55 is upheld on appeal, such Plaintiff shall provide notice to the Court within 15 days of this order and set forth with specificity how her case is distinguished from the Court's ruling in CMO 55. The Court will then promptly set a schedule in each such case for identifying expert witnesses, submitting expert reports, deposing identified experts, and briefing *Daubert* and dispositive motions.

(Dkt. No. 1352). CMO 65 did not require any Plaintiff to marshal any evidence within 15 days.

The Order only required that Plaintiffs give notice within the 15-day period. The Court explicitly stated that if any Plaintiff came forward, it would then set a pre-trial schedule in those case(s), allowing Plaintiffs time to develop expert testimony. However, not a single Plaintiff came forward. Nor did a single Plaintiff ask for an extension of time to file a notice in response to CMO 65. This Order was issued on January 25, 2016, and now, nearly eleven months later, still not a single Plaintiff has come forward in response to this Order and asked to proceed with her case.

On June 9, 2016, the Court held a Status Conference to discuss proceeding with summary judgment. (Dkt. No. 1550). Plaintiffs, for the first time, had appellate counsel appear in front of the Court. (*Id.*). It was in this conference that Plaintiffs' counsel indicated, for the first time in this litigation, that some plaintiffs may possibly be able to survive summary judgment despite the Court's *Daubert* rulings:

MR. HAHN: . . . And by taking up 10, 20, and 40, your general causation opinions, and then Murphy’s specific causation opinion, I don’t think we can have a summary judgment as to all the other plaintiffs in the litigation, because those other plaintiffs, in some states you don’t have to have [an] expert—New Mexico is one—. . . there may be other plaintiffs that have—haven’t had the opportunity, and plan to put up a specific causation expert that’s going to give an opinion that would get them to a jury.

THE COURT: No, no, I had—I entered an order, Mr. Hahn, in which I said if any of you don’t agree with the lead counsel’s position about specific causation, you need, by a designated date, to identify your case and provide me the names of your experts, so we can get on with discovery.

MR. HAHN: Yes, sir.

THE COURT: So I don’t think we’re out there with other potential cases. Now this issue of states that do not require expert testimony on causation, . . . I wasn’t aware there were such states.

(Dkt. No. 1550 at 7). The Court went on to state: “let’s assume there are. Then the brief in opposition could say all claims from the following—from the State of New Mexico, we oppose it, because there’s not a[n expert] requirement. . . . the plaintiff would still have to make a showing of whatever is required under that law to establish causation, even if you don’t need an expert. . .” (*Id.* at 9). Thus, Court set a scheduling for briefing on summary judgment, (CMO 79, Dkt. No. 1548), and Plaintiffs had an opportunity to come forward with evidence under this new theory in opposition to summary judgment.

However, when the deadline for opposition to summary judgment came a month-and-a-half later, not a single Plaintiff came forward with evidence that she claimed precluded the entry of summary judgment. Instead, Plaintiffs argued that it was theoretically possible that some unidentified Plaintiff(s) may possibly have some unidentified circumstantial, non-expert evidence of specific causation. (Dkt. No. 1586). In this opposition, Plaintiffs readily acknowledged that any Plaintiff “who believed she could adduce a differential diagnosis that could survive *Daubert* notwithstanding the exclusion of Dr. Murphy’s expert testimony in

*Hempstead*” should have come forward in response to CMO 65, (Dkt. No. 1586 at 13), but argued that Plaintiffs should be allowed to present non-expert testimony to transferor courts after remand.

Given this speculative response, the Court gave Plaintiffs a third opportunity to come forward if any thought her case could survive summary judgment. The Court issued CMO 81, which stated in part:

**NOTICE IS HEREBY GIVEN** that any Plaintiff who asserts that her case can survive summary judgment on specific causation even if the Court’s ruling in CMO 55 is upheld on appeal, must file a response to Defendant’s motion for summary judgment (Dkt. No. 1564) within fifteen (15) days of the date of this Order. Any such response must specifically identify the particular Plaintiff opposing summary judgment, identify the substantive state law that she contends applies to her claims, and include all evidence that she asserts precludes the entry of summary judgment in her case.

If any Plaintiff contends that she needs additional case-specific discovery to provide such evidence, she must comply with the requirements of Fed. R. Civ. P. 56(d) and identify the specific facts that are yet to be discovered. Should the claims of any Plaintiff survive summary judgment based on Rule 56(d), the Court will then promptly enter a scheduling order in each such case allowing for appropriate discovery and the filing of dispositive motions after discovery.

(Dkt. No. 1599 at 3-4). Again, not a single Plaintiff came forward with evidence of specific causation. Nor did a single Plaintiff make an individualized Rule 56(d) request.

Instead, Plaintiffs filed an omnibus response arguing that, other than the two bellwether Plaintiffs, no Plaintiff has had an opportunity to develop the facts of her case. (Dkt. No. 1611). Inexplicably, Plaintiffs argued that none of the Plaintiffs (other than the two bellwether Plaintiffs) have had an opportunity to “hire experts” or “prepare expert reports,” (Dkt. No. 1661 at 8), despite the fact that CMO 65 offered any Plaintiff the opportunity to do just that.

In the Rule 56(d) affidavit filed with Plaintiffs’ response, Plaintiffs stated that they needed an opportunity to seek (1) “[e]vidence, testimony, and (if necessary) third-party



discovery from their treating physicians,” (2) “[e]xpert opinions regarding specific causation,” and (3) “their patient records.” (Dkt. No. 1611-1). Plaintiffs did not state any other information that they need to seek to defend against this motion for summary judgment.

Thus, the Court issued CMO 82. First, the Court held that the time for Plaintiffs to come forward and argue that they could produce expert testimony on specific causation had passed:

As an initial matter, the time for a Plaintiff to come forward and argue that she could produce an expert opinion on specific causation that would survive *Daubert* has passed. The Court issued an order to show cause on this *seven months ago*, and explicitly stated that it would allow any such plaintiff to proceed with discovery and pre-trial proceedings, and in the last seven months not a single Plaintiff has come forward. Plaintiffs’ Lead Counsel testifies that he understood his admission at the January 22, 2016 status conference as a confirmation “on the ability of Plaintiffs to survive the evidentiary standards for specific-causation expert evidence set forth in CMO 55” and that he understood CMO 65 to “relate to whether individual Plaintiffs believe their case could survive the Rule 702 expert standards in CMO 55.” (Dkt. No. 1611-1 at 6-7). Whatever the dispute about non-expert evidence, there can be no dispute, and according the Plaintiffs’ Lead Counsel’s affidavit, there is no dispute, that any Plaintiff who believed she could proffer expert evidence on specific causation that would survive Rule 702 and *Daubert* was required to come forward in response to CMO 65. (*See also* Dkt. No. 1611 at 17 (“CMO 65 directed any Plaintiff who thought they could survive summary judgment on specific causation in light of the Court’s exclusion of Dr. Murphy in CMO 55 (Doc. 1283) to come forward with new or additional expert evidence.”); Dkt. No. 1611 at 18 (“Plaintiffs continued to understand the Court’s order to relate to whether individual Plaintiffs believed their case could survive the Rule 702 expert standards in CMO 55, not the separate legal issue of whether the law of their state requires expert evidence.”)). No Plaintiff has done so. Therefore, Plaintiffs’ argument that they have not had an opportunity to seek specific causation expert testimony is meritless. The Court provided that opportunity in CMO 65, not a single Plaintiff came forward, and by not coming forward in response to CMO 65, Plaintiffs have waived that argument.

(Dkt. No. 1616 at 7-8 (emphasis in original)).

The Court went on to provide Plaintiffs with a fourth and final opportunity to come forward with non-expert evidence:

With regard to non-expert evidence, in an abundance of caution, the Court will provide Plaintiffs with a fourth and final opportunity to come forward. Plaintiffs have argued that 15 days is not sufficient time to marshal their evidence. Thus,

the Court will afford them an additional 60 days. The Court notes that the only facts that Plaintiffs have stated they may need to discover (other than expert testimony) to defend against summary judgment is information from their own treating physicians and their own patient records. (Dkt. No. 1611-1 at 5). They have not requested any discovery from Defendants or other third-parties.

Given the nature of the evidence that Plaintiffs claim they need time to marshal, specifically their request to marshal their own medical records and information from their own treating physicians, the Court finds 60 days sufficient.

(*Id.* at 8).<sup>5</sup>

In response to CMO 82, no Plaintiff made a Rule 56(d) motion. Thus, the additional 60 days did prove sufficient. In addition to the omnibus responses to summary judgment filed by the Plaintiffs' Steering Committee, (Dkt. Nos. 1586, 1611, 1684), two sets of Plaintiffs filed responses to CMO 82. Thirty-four Plaintiffs ("the Hayes Law Firm Plaintiffs") submitted their Plaintiff Fact Sheets (PFSs) and certain medical records. (Dkt. Nos. 1670, 1682, 1686, 1687, 1688). They contend that (1) they were not diabetic before taking Lipitor, (2) they were diagnosed with diabetes after taking Lipitor, and (3) they did not have certain risk factors for diabetes, even though they had others. (*See* Dkt. No. 1670 at 17-39). At oral argument counsel stated this was "the best thing I could come up with with nonexpert evidence," that "[t]hey are not diabetic before taking the medication, they took Lipitor and then they became diabetic." (Dkt. No. 1727 at 24).

The Douglas & London Plaintiffs did not initially submit any evidence to the Court and simply argued that summary judgment was precluded by:

- (a) their respective health history and conditions as documented in their medical records, pharmacy records and/or other relevant records;
- (b) their respective Plaintiff Fact Sheets ("PFS's") that have already been served on Defendants and any and all amendments thereto;

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<sup>5</sup> The Court also noted that Plaintiffs had not "stated how long they need to marshal this evidence or suggested any proposed timeline for obtaining it." (*Id.* at 8 n.5).

(c) the general causation evidence identified and discussed in Plaintiffs' Opposition to Defendants' Omnibus Motion for Summary Judgment dated July 22, 2016 [Dkt. 1586]; and

(d) the substantive state law that applies to each D&L Plaintiff's respective claims.

(Dkt. No. 1689 at 5 (footnotes omitted)). The Court entered a text order stating that these Plaintiffs must submit to the Court any evidence that they wished to the Court to consider. (Dkt. No. 1695). In response, Plaintiffs literally dumped boxes upon boxes of documents on the Court, with no discernment or suggestion as to which documents they claimed precluded summary judgment. (Dkt. Nos. 1698, 1700, 1701, 1702, 1703, 1704, 1705, 1706). Nevertheless, the Court reviewed these documents as well, almost all of which were completely irrelevant. For example, the documents include pictures from colonoscopies, EKGs, and pap smear results.

The Court held oral argument on the omnibus motion on November 1, 2016, and the matter is now before the Court for a decision.

## **B. The Court's *Daubert* Rulings**

### 1. General Causation

On September 24-25, 2015, the Court heard extended oral argument on Defendant's motions to exclude common expert witnesses, including Plaintiffs' general causation experts. (Dkt. Nos. 1147, 1148). One of the primary issues raised both in briefing and at oral argument was the importance of dosage.

Lipitor is prescribed in four different doses: 10 mg, 20 mg, 40 mg, and 80 mg. Plaintiffs' general causation experts initially "opine[d] that Lipitor can cause diabetes, without specifying the precise dose at which this effect begins." (Dkt. No. 1159 at 26). If a study suggested an increased risk of diabetes, the experts "ascribe[d] the risk to all doses." (*E.g.*, Dkt. No. 972 at

269). However, Pfizer argued that “[d]ose is critical to proving general causation,” and that Plaintiffs lacked reliable evidence that Lipitor causes diabetes at doses less than 80 mg. (*Id.* at 49).

After reviewing the studies relied on by the experts and their opinions, the Court was concerned about whether Plaintiffs’ experts had sufficient facts and data to support their causation opinions at all doses of Lipitor, and even whether the experts would be willing to offer an opinion at low doses, given the available data. *See In re Seroquel Products Liab. Litig.*, No. 6:06-MD-1769-ORL-22D, 2009 WL 3806434, at \*18 (M.D. Fla. June 18, 2009) (Expert offering a causation opinion “declined to even speculate” about doses of 12.5 and 25 milligrams “because she had not seen any studies evaluating doses that low.”); *In re Bextra & Celebrex Mktg. Sales Practices & Prod. Liab. Litig.*, 524 F. Supp. 2d 1166, 1175-76 (N.D. Cal. 2007) (“It is unsurprising that most of plaintiffs’ experts agree that the available evidence at 200 mg/d [as opposed to higher doses] is inadequate to prove causation.”). The Plaintiffs’ experts agreed, and some even emphatically argued, that there was a dose-response relationship, meaning that any risk of diabetes is higher at higher doses of Lipitor, and the data with regard to 80 mg of Lipitor was starkly different from the data with regard to 10 mg of Lipitor.<sup>6</sup> Thus, the Court ordered supplemental briefing on this issue. (Dkt. No. 1149).

After a thorough review of relevant caselaw and the expert opinions at issue, the Court issued an order on October 22, 2015, holding that “at least where the experts agree that there is a dose-response relationship and where there is evidence that an association no longer holds at low doses, dose certainly matters, and Plaintiffs must have expert testimony that Lipitor causes, or is capable of causing, diabetes at particular dosages.” (CMO 49, Dkt. No. 1197 at 11). Over

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<sup>6</sup> *See* CMO 68, Dkt. No. 1469, for a full description of the data and studies relied upon by Plaintiffs’ experts.

Defendant's strenuous objections, the Court re-opened expert discovery and allowed additional time for Plaintiffs to serve supplemental reports offering opinions as to whether Lipitor causes diabetes at dosages of 10 mg, 20 mg, 40 mg, and 80 mg. (*See id.*). The parties served supplemental expert reports on general causation in December of 2015 and January of 2016, and then filed supplemental briefs on Pfizer's motion to exclude Plaintiffs' general causation expert testimony in February of 2016. (*See* CMO 50, Dkt. No. 1230; CMO 60, Dkt. No. 1318). The Court heard additional oral argument on March 18, 2016. (Dkt. No. 1460).

In a forty-page order issued on March 30, 2016, the Court ultimately excluded Plaintiffs' expert opinions on general causation, except for the opinion of Plaintiffs' epidemiologist, Dr. Singh, that Lipitor 80 mg causes diabetes. (CMO 68, Dkt. No. 1469). The Court found Dr. Singh's 10 mg opinion was not based on sufficient facts and data and that Dr. Singh did not reliably apply the epidemiological/Bradford Hill method because this method requires a statistically significant association be established through studies and such studies do not exist for Lipitor 10 mg. (Dkt. No. 1469 at 15-16). Plaintiffs conceded that Dr. Singh could not offer an opinion at Lipitor 20 mg or Lipitor 40 mg if the Court excluded his opinion regarding Lipitor 10 mg. (*Id.* at 24).

The Court also excluded the opinions of Dr. Quon, an endocrinologist who ostensibly reached his conclusion via a literature review but who admittedly cherry-picked studies to support his conclusion rather than considering the totality of the literature, (*id.* at 27-34); Dr. Roberts, a cardiologist, who claimed in her report to use the Bradford Hill method used by epidemiologists but who seemed to misunderstand the methodology's basic premise in deposition, who cherry-picked studies for consideration and failed to consider contrary evidence, and who failed to provide any analysis of particular dosages as required by CMO 49, (*id.* at 34-

38); and Dr. Gale, who failed to provide any analysis of particular dosages as required by CMO 49 and who ascribed the risk observed at Lipitor 80 mg to all dosages of Lipitor. (*Id.* at 38-39). Thus, the only admissible opinion on general causation is Dr. Singh's opinion regarding Lipitor 80 mg.

## 2. Specific Causation

Diabetes is a complicated and progressive disease, and a number of factors, including genetics, diet, exercise, age, and weight play a significant role in the development of new onset diabetes. (*See, e.g.*, Dkt. No. 972 at 16-22, Dkt. No. 1047 at 9-12; Dkt. No. 1004-3 at 325-26). This makes teasing out the role of Lipitor, if there is one, in the development of a particular patient's diabetes difficult. Interestingly, none of Plaintiffs' general causation experts could think of a method to determine whether a particular patient's diabetes was caused by Lipitor or caused by other risk factors and testified that they themselves could not determine whether a particular patient's diabetes was caused by Lipitor. Plaintiffs' specific causation experts have never diagnosed a patient with Lipitor-induced (or statin-induced) diabetes outside of this litigation, and they could not identify anyone else who applied their methodologies to do so outside of this litigation.

Plaintiffs in this MDL are not the first to grapple with the problems of proving causation where the alleged injury is a complicated, progressive, multi-factor disease like diabetes. In *Guinn v. AstraZeneca Pharm. LP*, 602 F.3d 1245 (11th Cir. 2010), the plaintiff claimed that the drug Seroquel caused her to develop diabetes, and the Eleventh Circuit upheld the exclusion of her expert testimony on causation. The expert first testified that "she knew of no methodology for ruling out alternative causes [of diabetes]" and then later testified that other potential causes were "not solely responsible" because plaintiff developed diabetes after taking Seroquel and

other risk factors remained constant. *Id.* at 1249-50. The Eleventh Circuit held that this reliance on temporal proximity did not “satisfy the requirement that a differential diagnosis consider possible alternative causes.” *Id.* at 1254. The Eleventh Circuit also rejected the expert’s second explanation that all risk factors work together to cause diabetes, holding that “[a]n expert . . . cannot merely conclude that all risk factors for a disease are substantial contributing factors in its development.” *Id.* at 1255.

Similarly, in *Haller v. AstraZeneca Pharm. LP*, 598 F. Supp. 2d 1271 (M.D. Fla. 2009), the plaintiff claimed Seroquel caused her to develop diabetes. Again, plaintiff’s expert could not rule out other possible causes of diabetes or the possibility that these other risk factors were solely to blame. *Id.* at 1278, 1278-79. The court held that temporal connection is legally insufficient and the last additive factor argument was “largely temporal proximity in disguise.” *Id.* at 1297-98. These same issues surfaced with Plaintiffs’ specific causation experts in this MDL.

The first bellwether Plaintiff, Plaintiff Daniels, proffered the testimony of Dr. David Handshoe on the issue of specific causation. The second bellwether Plaintiff, Plaintiff Hempstead proffered the testimony of both Dr. Handshoe and Dr. Murphy on the issue of specific causation. Pfizer moved to exclude the testimony of both experts, (Dkt. Nos. 1004, 1006), and the Court held two separate days of oral argument on these motions in October and December of 2015. (Dkt. Nos. 1196, 1273).

On December 11, 2015, the Court issued CMO 55, excluding the testimony of Dr. Murphy. (Dkt. No. 1283). Dr. Murphy determined that the most reliable data suggested a relative risk ratio of developing diabetes while taking Lipitor to be around 1.6. (Dkt. No. 1006-3 at 49). Using this estimate of relative risk, 63% of the people who take Lipitor and develop

diabetes would have done so *in the absence of Lipitor*, whereas 37% of the people who take Lipitor and develop diabetes did so only because they took Lipitor.<sup>7</sup> Thus, the Court turned to Dr. Murphy's methodology for concluding that Plaintiff Hempstead was in the 37% that developed diabetes due to Lipitor, rather than the 63% that would have done so regardless. (Dkt. No. 1283 at 10).

Dr. Murphy testified that Plaintiff Hempstead's BMI, adult weight gain, family history, age, and hypertension were all significant or substantial contributing factors in Plaintiff Hempstead's development of diabetes. (Dkt. No. 1275-2 at 185, 186, 247). Dr. Murphy's opinion that Lipitor was also a substantial contributing factor to Plaintiff Hempstead's development of diabetes was based on population studies showing that Lipitor increases the risk of diabetes (an element of general causation) and a temporal relationship, i.e., that Ms. Hempstead took Lipitor before developing diabetes.<sup>8</sup> (*See* Dkt. No. 1283 at 11-15). Dr. Murphy failed to offer any explanation as to why Ms. Hempstead's other risk factors for diabetes, alone or in combination, were not solely responsible for Ms. Hempstead's diabetes. (*Id.* at 28). The Court ultimately held this data and methodology insufficient under Rule 702 and excluded the testimony. (*See id.*). The Court later denied Plaintiffs' motion to reconsider its exclusion of Dr. Murphy's testimony in CMO 75, Dkt. No. 1514.

On May 11, 2016, the Court issued CMO 76, excluding the testimony of Dr. Handshoe in both this case and the *Daniels* case. Dr. Handshoe testified that the best estimate of the relative

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<sup>7</sup> For an in depth discussion of relative risk and its implications, see CMO 55, Dkt. No. 1283. For purposes of the motion to exclude Dr. Murphy's testimony, the Court assumed that general causation could be established. (Dkt. No. 1283 at 1).

<sup>8</sup> Ms. Hempstead began taking Lipitor in 1998 and was diagnosed with diabetes in 2004. (Dkt. No. 1004-34 at 4, 5).



risk ratio for diabetes associated with statin use was 1.25. (Dkt. No. 1004-6 at 238-39). Using this estimate of relative risk, 80% of the people who take Lipitor and develop diabetes would have done so *in the absence of Lipitor*, whereas 20% of the people who take Lipitor and develop diabetes did so only because they took Lipitor. Thus, the Court turned to Dr. Handshoe's methodology for concluding that Plaintiffs Daniels and Hempstead were in the 20% that developed diabetes due to Lipitor, rather than the 80% that would have done so regardless. (Dkt. No. 1517 at 7-8). Interestingly, Dr. Handshoe testified that if he walked into a room of 100 patients with diabetes, he could not pick out which ones would have "statin induced diabetes" as opposed to "non-statin induced diabetes." (Dkt. No. 1004-6 at 163). He testified he could not do this with ten people or with two people. (*Id.*). Thus, the Court was curious how he accomplished it in the cases of Ms. Daniels and Ms. Hempstead.

With regard to Ms. Hempstead, Dr. Handshoe stated that he felt her overweight BMI was "not clinically significant given that . . . she had multiple normal blood sugars even with this weight." (Dkt. No. 1004-42 at 109). He testified that he did not know whether adult weight gain increased a patient's risk of diabetes and, therefore, did not consider it. (Dkt. No. 1004-42 at 109, 110). Dr. Handshoe acknowledged that Plaintiff Hempstead's ethnic background and age increased her risk of diabetes but summarily dismissed these as potential causes of her diabetes based on his "clinical judgment." (*Id.* at 142, 144, 206-08). Dr. Handshoe simply did not consider other risk factors that he testified were independent risk factors for diabetes, such as hypertension, elevated triglycerides and low HDL. (*Id.* at 181, 194). In the *Daniels* case, Dr. Handshoe testified that the diabetes risk factors were additive: "you have this risk, you have that risk, I think the risks are additive. I mean, how can you tease out that only one thing caused somebody's diabetes . . ." (Dkt. No. 1004-6 at 134). However, Dr. Handshoe took the opposite

position in his deposition in this case. He testified that Lipitor was “the only factor” in Ms. Hempstead’s development of diabetes, finding that all other factors were “not significant to my clinical judgment.” (*Id.* at 236, 237). He testified that his analysis was based solely on temporal relationship: Ms. Hempstead took Lipitor and developed diabetes after taking Lipitor. (*Id.* at 145-46). The Court excluded Dr. Handshoe’s testimony as unreliable for multiple reasons in CMO 76. (Dkt. No. 1517).

### **C. Summary Judgment Arguments**

In their response to this summary judgment motion and in response to the summary judgment motions filed in the two bellwether cases on the same day in this MDL, Plaintiffs raise for the first time the argument that they can survive summary judgment on both general and specific causation without expert testimony. Plaintiffs argue that Defendant has admitted that Lipitor can cause Type 2 diabetes at doses lower than 80 mg and that these alleged admissions are competent evidence of general causation. (Dkt. No. 1586 at 15-26). With regard to specific causation, Plaintiffs argue that they may be able to survive summary judgment with some evidence other than expert testimony and argue that the Court should remand all of the cases in the MDL back to the transferor courts for those courts to take up the issue on specific causation. The Court addresses each argument in turn.

### **II. Legal Standard**

Summary judgment is appropriate “if the movant shows that there is no genuine dispute as to any material fact and the movant is entitled to judgment as a matter of law.” Fed. R. Civ. P. 56(a). Only material facts—those “that might affect the outcome of the suit under the governing law”—will preclude the entry of summary judgment. *Anderson v. Liberty Lobby, Inc.*, 477 U.S.

242, 248 (1986). A dispute about a material fact is genuine “if the evidence is such that a reasonable jury could return a verdict for the non-moving party.” *Id.*

At the summary judgment stage, the court must “construe the evidence, and all reasonable inferences that may be drawn from such evidence, in the light most favorable to the nonmoving party.” *Dash v. Mayweather*, 731 F.3d 303, 310 (4th Cir. 2013). However, “the nonmoving party must rely on more than conclusory allegations, mere speculation, the building of one inference upon another, or the mere existence of a scintilla of evidence.” *Id.* at 311.

### **III. Discussion**

Here, Defendant has moved for summary judgment on the basis that Plaintiffs have no evidence to support two essential elements of her claims – general and specific causation. “Rule 56(c) mandates the entry of summary judgment . . . against a party who fails to make a showing sufficient to establish the existence of an element essential to that party’s case, and on which that party will bear the burden of proof at trial.” *Celotex Corp. v. Catrett*, 477 U.S. 317, 322 (1986). Thus, to survive summary judgment, Plaintiffs must cite to evidence in the record that would allow a jury to infer that Lipitor is capable of causing diabetes at dosages of less than 80 mg and that it did in fact cause individual Plaintiffs to develop diabetes.

#### **A. General Causation**

As explained above, the Court excluded Plaintiffs’ expert testimony on general causation with respect to dosages of less than 80 mg. (*See* CMO 49, Dkt. No. 1197; CMO 68, Dkt. No. 1469). Because Plaintiffs at issue here were prescribed and ingested Lipitor at dosages of less than 80 mg prior to their diabetes diagnosis, they have no admissible expert testimony regarding general causation. However, Plaintiffs argue that alleged admissions by Defendant are sufficient to survive summary judgment.

Specifically, Plaintiffs argue that four pieces of evidence constitute admissions by Defendant that Lipitor can cause diabetes at dosages less than 80 mg:

- (1) An email from Senior Vice President David DeMicco;
- (2) the U.S. Lipitor label stating that “[i]ncreases in HbA1c and fasting serum glucose levels have been reported with [statins], including LIPITOR”;
- (3) Parke-Davis’s<sup>9</sup> New Drug Application (NDA) data showing that Lipitor was associated with increases in blood glucose levels;
- (4) The official Lipitor website, which states that “[e]levated blood sugar levels have been reported with statins, including LIPITOR.”; and
- (5) Pfizer’s Japanese label insert for Lipitor.

(Dkt. No. 1586 at 16). Plaintiffs argue that these pieces of evidence are admissible under Rule 801(d)(2) for the truth of the matter asserted. Except for the Japanese label, Pfizer does not dispute the admissibility of the evidence put forward by Plaintiffs.<sup>10</sup> Pfizer, however, does dispute that this evidence is sufficient to survive summary judgment in the absence of expert testimony.

### 1. Erie Question

Plaintiffs generally argue that state substantive law controls whether expert evidence of causation is needed to survive summary judgment in products liability cases.<sup>11</sup> (Dkt. No. 1586 at 26-35). However, Plaintiffs also argue that state law does *not* control whether expert evidence of causation is needed to survive summary judgment if the non-expert evidence of causation at

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<sup>9</sup> Parke-Davis is the predecessor of Pfizer.

<sup>10</sup> Pfizer has filed a motion in limine to exclude the Japanese label. (Dkt. No. 1163).

<sup>11</sup> Indeed, one of the reasons Plaintiffs argue that the Court should suggest remand of all cases to their transferor courts for resolution of specific causation issues is that state law controls this question. (Dkt. No. 1586 at 35-43).

issue is a party opponent admission under Rule 801(d)(2). (Dkt. No. 1634 at 32-33). In the specific instance where non-expert testimony of causation consists of a party opponent admission, Plaintiffs argue that Rule 56 supersedes state law and requires denial of summary judgment. (*Id.*). Plaintiffs cannot have it both ways. Either Rule 56 supersedes any state law on what type of evidence is sufficient to survive summary judgment or substantive state law governs whether expert testimony is required to survive summary judgment. Thus, the Court first addresses whether federal or state law controls this question under *Erie*.

“Under the familiar *Erie* doctrine, [courts] apply state substantive law and federal procedural law when reviewing state-law claims.” *Kerr v. Marshall Univ. Bd. of Governors*, 824 F.3d 62, 74 (4th Cir. 2016). To the extent that Plaintiffs argue that the standard of Federal Rule of Civil Procedure 56 applies to the claims at issue, they are clearly correct.<sup>12</sup> *See Jones v. Meat Packers Equip. Co.*, 723 F.2d 370, 372 (4th Cir. 1983) (“A federal standard determines the sufficiency of the evidence for submission of an issue to a jury.”); *Fitzgerald v. Manning*, 679 F.2d 341, 346 (4th Cir. 1982) (“[W]hether there is sufficient evidence to create a jury issue of those essential substantive elements of the action, as defined by state law, is controlled by federal rules.”); *Millers Mut. Ins. Ass’n of Ill. v. S. Ry. Corp.*, 483 F.2d 1044, 1046 (4th Cir. 1973) (“We apply a federal standard to determine whether the plaintiff’s case presented a jury question.”). However, this is not the end of the inquiry.

The substantive elements of a state claim, including the applicable standard of care, whether the standard has been violated, and whether the alleged violation is the cause of a plaintiff’s injury, are all questions determined by state law when a court sits in diversity.

*Fitzgerald*, 679 F.2d at 346. And a number of federal courts sitting in diversity have held that

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<sup>12</sup> Indeed, this is the standard cited by the Court above as the legal standard governing the motion at issue.

whether a plaintiff must offer admissible expert testimony regarding medical causation in complex products liability cases is a matter of substantive state law because such a rule is part of the substantive element of causation. *See, e.g., In re Mirena IUD Prod. Liab. Litig.*, No. 13-MC-2434 (CS), 2016 WL 4059224, at \*8 (S.D.N.Y. July 28, 2016) (“[T]he issue here is not so much whether the alleged admissions are admissible against [defendant] as a matter of the law of evidence, but whether as a matter of substantive products liability law admissions can substitute for expert evidence of causation, given the widely held principle that expert testimony is required in cases involving a complex or technical question outside the ken of the average lay juror.”); *Silverman v. Watson Pharm., Inc.*, No. CIV.A. H-10-1952, 2013 WL 1645771, at \*2 (S.D. Tex. Apr. 16, 2013) (“[Defendant] asks the court to conflate federal procedural law governing the admissibility of expert testimony with Texas substantive law regarding the levels of proof required to demonstrate causation in a toxic tort case.”).

In other words, while the question of whether evidence is sufficient to survive summary judgment is generally a matter of federal procedural law, “the ‘expert testimony’ rule” may be “so closely interrelated with the substantive cause of action . . . that federal courts sitting in diversity cases should apply the state rule in order to fully realize state substantive policy.” *Hemingway v. Ochsner Clinic*, 722 F.2d 1220, 1225 (5th Cir. 1984); *see also Milam v. State Farm Mut. Auto. Ins. Co.*, 972 F.2d 166, 170 (7th Cir. 1992) (“[W]here a state in furtherance of its substantive policy makes it more difficult to prove a particular type of state-law claim, the rule by which it does this, even if denominated a rule of evidence or cast in evidentiary terms, will be given effect in a diversity suit as an expression of state substantive policy.”); *Burke v. Air Serv Int’l, Inc.*, 685 F.3d 1102, 1109 (D.C. Cir. 2012) (“[S]tate law controls where it makes a precondition to recovery in a medical-malpractice action the proffer of expert testimony to prove

an element of the substantive-law claim, such as standard of care or causation.”) (quoting 9 Charles Alan Wright & Victor James Gold, *Federal Practice & Procedure: Evidence* § 6263, at 204 (1997)); *Bryte ex rel. Bryte v. Am. Household, Inc.*, 429 F.3d 469, 476 (4th Cir. 2005) (noting the difference between “a procedural rule governing admissibility” of expert testimony and “substantive state rules on the sufficiency of evidence”). Like other federal courts that have addressed the issue,<sup>13</sup> this Court finds that a state law requirement that expert testimony is necessary to establish a particular element of a cause of action, such as causation, is a statement of state substantive policy, “intimately bound up with the state right or obligation.” *DiAntonio v. Northampton-Accomack Mem’l Hosp.*, 628 F.2d 287, 291 (4th Cir. 1980) (quoting *Szantay v. Beech Aircraft Corp.*, 349 F.2d 60, 63 (4th Cir. 1965)). Because such a rule defines and limits the primary rights and obligations of the parties, it “must be applied under the *Erie* doctrine.” *Mattison v. Dallas Carrier Corp.*, 947 F.2d 95, 109 (4th Cir. 1991).

To the extent that state substantive law requires causation to be established by expert testimony, it is also a question of state substantive law whether party-opponent admissions can substitute for expert evidence of causation. *In re Mirena*, 2016 WL 4059224 at \*8. However, as explained more fully below, the argument that party-opponent admissions can substitute for

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<sup>13</sup> See, e.g., *Lewis v. Johnson & Johnson*, 601 F. App’x 205, 211 (4th Cir. 2015) (per curiam), (holding that under Texas law “expert testimony is necessary to establish causation as to medical conditions outside the common knowledge and experience of jurors.”); *Root v. Tempe St. Luke’s Hosp.*, 368 F. App’x 848, 848–49 (9th Cir. 2010) (applying Arizona law requiring expert testimony to establish causation); *Yih-Ling Shieh Wu v. Home Depot U.S.A., Inc.*, No. C13-955-JPD, 2014 WL 2987338, at \*2 (W.D. Wash. July 2, 2014) (applying Washington requiring expert testimony to establish causation between an accident and an injury); *Duke v. Garcia*, No. 11-CV-784-BRB/RHS, 2014 WL 1333151, at \*1 n.1 (D.N.M. Feb. 28, 2014) (applying New Mexico law requiring expert testimony to establish medical causation); *In re Trasyolol Prod. Liab. Litig.*, No. 08-MD-1928, 2013 WL 1343529, at \*3 (S.D. Fla. Apr. 2, 2013) (applying New York law that requires causation to be established by expert testimony).

expert evidence is a recent and novel one created by plaintiffs in multi-district litigations where expert evidence has been excluded under *Daubert*. Thus, the state courts have not had an opportunity to pass on the specific question, and the Court must “predict what the Supreme Court of [various states] would decide.” *Doe v. Doe*, 973 F.2d 237, 240 (4th Cir. 1992). In doing so, the Court is guided by the Fourth Circuit’s admonition that “a federal court in the exercise of its diversity jurisdiction should act conservatively when asked to predict how a state court would proceed on a novel issue of state law,” *Rhodes v. E.I. du Pont de Nemours & Co.*, 636 F.3d 88, 97–98 (4th Cir. 2011), and the few federal cases that address the issue.<sup>14</sup>

## 2. Expert Testimony is Required Under State Substantive Law.

As an initial matter, Plaintiffs dispute whether state substantive law requires expert testimony in this instance. Plaintiffs argue that state law “reflects a spectrum of subtly varying rules” that ranges from the requirement of expert testimony to no requirement at all. (Dkt. No. 1586 at 27). The variance is not nearly as great as Plaintiffs would have the Court believe.

While the specific language used by courts vary to some degree, all jurisdictions require expert testimony at least where the issues are medically complex and outside common knowledge and lay experience. *See, e.g., Ex parte Trinity Indus., Inc.*, 680 So. 2d 262, 269 (Ala.

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<sup>14</sup> If the Court’s ruling is incorrect, and Plaintiffs are correct that Fed. R. Civ. P. 56 supersedes any state law on what type of evidence is required to survive summary judgment, then that rule would also apply here. Federal law, under Rule 56, would govern whether expert testimony is required to survive summary judgment, and the Court need not engage in the 53 jurisdiction analysis below but simply rely on the ample federal precedent that expert testimony is required when medical causation is outside the common knowledge of lay jurors. *See, e.g., Chapman v. Procter & Gamble Distrib., LLC*, 766 F.3d 1296, 1316 (11th Cir. 2014) (“To prove Fixodent caused [plaintiff’s injury], [plaintiffs] were required to have *Daubert*-qualified, general and specific-causation-expert testimony that would be admissible at trial to avoid summary judgment.”), *cert. denied*, 135 S. Ct. 2312, (2015); *Amorgianos v. Nat’l R.R. Passenger Corp.*, 303 F.3d 256, 268 (2d Cir. 2002) (“[T]o establish causation, they must offer admissible expert testimony regarding both general causation, i.e., that xylene exposure can cause the type of ailments from which [plaintiff] claims to suffer; and specific causation, i.e., that xylene exposure actually caused his alleged neurological problems.”).



1996) (expert testimony required to establish causation where “the nature and origin” of the injury is “beyond the understanding of the average person”); *E.C. ex rel. Crocker v. Child Dev. Sch., Inc.*, No. 3:10-CV-759-WKW, 2011 WL 4501560, at \*9 (M.D. Ala. Sept. 29, 2011) (“[E]xpert medical testimony, and not lay testimony, is required to demonstrate proximate cause, given the complexity of E.C.’s heart condition.”); *Choi v. Anvil*, 32 P.3d 1, 3 (Alaska 2001) (expert testimony required to establish a causal connection “where there is no reasonably apparent . . . causal relationship between the event demonstrated and the result sought to be proved”); *Voyles v. State*, No. A-9377, 2008 WL 4951416, at \*18 (Alaska Ct. App. Nov. 19, 2008) (“The test is whether the basis of the [casual] conclusion (once explained) can be readily understood and assessed by lay jurors.”); *Rasor v. Nw. Hosp., LLC*, 373 P.3d 563, 566 (Ariz. Ct. App. 2016) (expert testimony required to establish causation “unless a causal relationship is readily apparent to the trier of fact”); *Gentry v. Daugherty*, No. CV-13-02136-PHX-ESW, 2015 WL 1346097, at \*3 (D. Ariz. Mar. 24, 2015) (“Unless an injury is obvious to the jury, expert medical testimony is required to establish the nature and extent of the injury as well as its relationship to the accident.”) (citing Arizona cases); *Isham v. Booneville Cmty. Hosp.*, No. 2:14-CV-2018, 2015 WL 4133098, at \*2 (W.D. Ark. July 8, 2015) (“Under Arkansas law, expert witness testimony is required to prove that any negligence of Defendants was a proximate cause of Plaintiff’s injuries, as Plaintiff in this case alleged medical injuries based on a theory that involved complex determinations of medical issues that would not and could not be commonly understood by a lay person.”); *Richardson v. Union Pac. R. Co.*, 386 S.W.3d 77, 80 (Ark. App. Ct. 2011) (“[W]hen there is no obvious origin to an injury and it has multiple potential etiologies, expert testimony is necessary to establish causation.”); *Miranda v. Bomel Const. Co.*, 115 Cal. Rptr. 3d 538, 545–46 (Cal. App. 4th 2010) (“The law is well settled that in a personal injury

action causation must be proven within a reasonable medical probability based upon competent expert testimony.”); *Sclafani v. Air & Liquid Sys. Corp.*, 14 F. Supp. 3d 1351, 1355 (C.D. Cal. 2014) (“Under California law, although juries are normally permitted to decide issues of causation without guidance from experts,” issues of causation “beyond the experience of laymen and can only be explained through expert testimony.”); *Howell v. Centric Grp., LLC*, No. 09-CV-02299-MSK-CBS, 2011 WL 4499372, at \*5 (D. Colo. Sept. 27, 2011) (“Although causation may sometimes be inferred simply from circumstantial evidence, where questions of causation are beyond the knowledge and experience of ordinary persons, expert testimony may be required.”) (applying Colorado law), *aff’d*, 508 F. App’x 834 (10th Cir. 2013); *Xtreme Coil Drilling Corp. v. Encana Oil & Gas (USA), Inc.*, No. CIV.A. 08-CV-02750, 2010 WL 3777303, at \*7 (D. Colo. Sept. 19, 2010) (“Under Colorado law, products liability claims involving matters outside the experience of the average layperson, like negligence claims involving such complex or technical issues, require expert testimony to prove issues such as causation.”); *Metro. Prop. & Cas. Ins. Co. v. Deere & Co.*, 25 A.3d 571, 584 (Conn. 2011) (“If lay witnesses and common experience are not sufficient to remove the case from the realm of speculation, the plaintiff will need to present expert testimony to establish a prima facie case.”); *White v. Mazda Motor of Am., Inc.*, 54 A.3d 643, 650 (Conn. App. 2012) (“[W]e . . . consistently have held that expert testimony is required when the question involved goes beyond the field of the ordinary knowledge and experience of judges or jurors.”) (internal quotations omitted), *aff’d*, 99 A.3d 1079 (Conn. 2014); *Roache v. Charney*, 38 A.3d 281, 286 (Del. 2012) (“When the plaintiff’s claim involves bodily injuries, the causal connection between the defendant’s alleged negligent conduct and the plaintiff’s alleged injury must be proven by the direct testimony of a competent medical expert.”); *Money v. Manville Corp. Asbestos Disease Comp. Trust Fund*, 596 A.2d 1372,

1375 (Del. 1991) (“[I]f the matter in issue is one within the knowledge of experts only and not within the common knowledge of laymen, it is necessary for the plaintiff to introduce expert testimony in order to establish a prima facie case.”) (internal quotations omitted); *Lasley v. Georgetown Univ.*, 688 A.2d 1381, 1385 (D.C. 1997) (“Expert testimony is not required if the issue of causation can be resolved wholly within the realm of ordinary human knowledge and experience . . . or if the proof is so obvious as to lie within the ken of the average lay juror.”) (internal quotations omitted); *Baltimore v. B.F. Goodrich Co.*, 545 A.2d 1228, 1231 (D.C. 1988) (expert testimony required “in cases presenting medically complicated questions due to multiple and/or preexisting causes”); *Benitez v. Joseph Trucking, Inc.*, 68 So. 3d 428, 431 (Fla. Dist. Ct. App. 2011) (expert testimony is necessary “to establish legal causation where the issue is beyond the common knowledge of laymen”); *Gouveia v. Phillips*, 823 So. 2d 215, 227 (Fla. Dist. Ct. App. 2002) (expert testimony required “when the discrete issue to be decided is not within the abilities of lay jurors”); *Cowart v. Widener*, 697 S.E.2d 779, 784 (Ga. 2010) (expert testimony required “where the existence of a causal link between the defendant’s conduct and the plaintiff’s injury cannot be determined from common knowledge and experience and instead requires the assistance of experts with specialized medical knowledge.”); *Gilbert v. R.J. Taylor Mem’l Hosp., Inc.*, 458 S.E.2d 341, 342 n.4 (Ga. 1995) (“Although it is conceded that the cause of action is one for simple negligence, rather than for professional malpractice, medical questions are raised, requiring expert evidence.”); *Barbee v. Queen’s Med. Ctr.*, 194 P.3d 1098, 1121 (Haw. Ct. App. 2008) (“Hawai‘i does recognize a ‘common knowledge’ exception to the requirement that a plaintiff must introduce expert medical testimony on causation. . . . The exception is similar to the doctrine of *res ipsa loquitur*, and . . . rare in application.”) (internal quotations omitted); *Bernard v. Char*, 903 P.2d 676, 682 (Haw. Ct. App.) (expert testimony required where “lay

jurors are ill prepared to evaluate complicated technical data for the purpose of determining . . . whether there is a causal relationship between the violation of a duty and an injury to the patient”), *aff’d*, 903 P.2d 667 (Haw. 1995); *Easterling v. Kendall*, 367 P.3d 1214, 1226 (Idaho 2016) (expert testimony required where “the causative factors are not ordinarily within the knowledge or experience of laymen composing the jury”), *reh’g denied* (Mar. 31, 2016); *Dodge-Farrar v. Am. Cleaning Servs. Co.*, 54 P.3d 954, 959 (Idaho Ct. App. 2002) (expert testimony required where the matter is not within “the usual and ordinary experience of the average person”); *Brown v. Baker*, 672 N.E.2d 69, 71 (Ill. App. 1996) (“[A] plaintiff in a personal injury case must present the testimony of a medical expert to establish causation if the relationship between the claimed injury and the event in question requires special knowledge and training to establish.”); *Willis v. Westerfield*, 839 N.E.2d 1179, 1188 (Ind. 2006) (“[E]xpert testimony is required where the question involves medical factors beyond the common knowledge of the layman.”); *Topp v. Leffers*, 838 N.E.2d 1027, 1035 (Ind. Ct. App. 2005) (expert testimony not required “[w]hen the issue of causation is within the understanding of a lay person.”); *Welte v. Bello*, 482 N.W.2d 437, 441 (Iowa 1992) (expert testimony not required when causation is “within the common experience of laypersons”); *Donovan v. State*, 445 N.W.2d 763, 766 (Iowa 1989) (“[H]ighly technical questions of diagnoses and causation which lie beyond the understanding of a layperson require introduction of expert testimony.”); *Pope By & For Juby v. Ransdell*, 833 P.2d 965, 973 (Kan. 1992) (“Expert testimony is necessary where normal experience and qualifications of lay persons serving as jurors does not permit them to draw proper conclusions from the facts and circumstances of the case.”); *Azmat v. Bauer*, No. 2015-CA-000399-MR, 2016 WL 4709135, at \*3 (Ky. Ct. App. Sept. 9, 2016) (expert testimony required in medical negligence case “in instances where causation is not so obvious as to amount

to res ipsa loquitur”); *Wilson v. Thyssenkrupp Budd Co.*, No. 2005-CA-001567-WC, 2005 WL 3116045, at \*3 (Ky. Ct. App. Nov. 23, 2005) (“When the cause of a condition is not readily apparent to a lay person, medical testimony supporting causation is required.”); *Burgett v. Troy-Bilt LLC*, 970 F. Supp. 2d 676, 683 (E.D. Ky. 2013) (expert testimony required for topics “beyond the ken of ordinary persons”), *aff’d*, 579 F. App’x 372 (6th Cir. 2014); *Johnson v. E.I. DuPont deNemours & Co.*, 7 So. 3d 734, 740 (La. App. 5 Cir. 2009) (“When a conclusion regarding medical causation is not one within common knowledge, expert medical testimony is required in a tort action.”); *Hutchinson v. Shah*, 648 So. 2d 451, 452, (La. App. 1 Cir. 1994) (“When the conclusion regarding medical causation is not one within common knowledge, expert medical testimony is required.”), *writ denied* 653 So. 2d 570 (La. 1995); *Darney v. Dragon Prod. Co., LLC*, 640 F. Supp. 2d 117, 123 (D. Me. 2009) (“[A] jury may not ‘infer causation on complex medical facts without the aid of expert testimony.’”) (quoting *Merriam v. Wanger*, 757 A.2d 778, 782 (Me. 2000)); *Walter v. Wal-Mart Stores, Inc.*, 748 A.2d 961, 972 (Me. 2000) (expert testimony not required where the “harmful results” of a negligent act “are sufficiently obvious as to lie within common knowledge”); *Wood v. Toyota Motor Corp.*, 760 A.2d 315, 319 (Md. Ct. Spec. App. 2000) (“It is well settled that expert testimony is required when the subject of the inference is so particularly related to some science or profession that it is beyond the ken of the average layman.”) (internal quotations omitted); *Miskin v. Baxter Healthcare Corp.*, 107 F. Supp. 2d 669, 672 (D. Md. 1999) (expert testimony is necessary under Maryland law when “the evidence relating to causation involves technical medical questions beyond the common knowledge of laypersons”), *aff’d*, 213 F.3d 632 (4th Cir. 2000) (table decision); *Case of Canavan*, 733 N.E.2d 1042, 1051 (Mass. 2000) (“Because understanding medical causation is beyond the knowledge of the ordinary layman proof of if it must rest upon

expert medical testimony.”) (internal quotations and alterations omitted); *Pitts v. Wingate At Brighton, Inc.*, 972 N.E.2d 74, 78 (Mass. App. Ct. 2012) (“Expert testimony is necessary where proof of medical causation lies outside the ken of lay jurors.”); *Hendrian v. Safety-Kleen Sys., Inc.*, No. 08-CV-14371, 2015 WL 4770966, at \*4 (E.D. Mich. Aug. 13, 2015) (“[E]xpert testimony is often required because the alleged injuries are not immediately obvious and the connection between exposure and injury is not a matter of common sense or everyday experience.”) (internal quotations omitted); *Dow v. Rheem Mfg. Co.*, No. 09-13697-BC, 2011 WL 4484001, at \*22 (E.D. Mich. Sept. 26, 2011) (“Though not always required, expert testimony on causation is necessary, where the claim presents ‘technical issues that are beyond the common experience and understanding of the common juror.’”) (quoting *Schaendorf v. Consumers Energy Co.*, No. 281001, 2009 WL 563904, at \*7–8 (Mich. Ct. App., March 5, 2009)), *aff’d*, 527 F. App’x 434 (6th Cir. 2013); *Gross v. Victoria Station Farms, Inc.*, 578 N.W.2d 757, 762 (Minn. 1998) (“Expert opinion is required to prove causation if the issue is outside the realm of common knowledge.”); *Walton v. Jones*, 286 N.W.2d 710, 715 (Minn. 1979) (“[W]hen the causal relation issue is not one within the common knowledge of laymen, causation in fact cannot be determined without expert testimony.”) (quotation omitted); *Denham v. Holmes ex rel. Holmes*, 60 So. 3d 773, 789 (Miss. 2011) (“Expert testimony is required unless the matter in issue is within the common knowledge of laymen”) (quoting *Palmer v. Biloxi Reg’l Med. Ctr., Inc.*, 564 So. 2d 1346, 1355 (Miss. 1990)); *Berry v. Sw. Airlines Co.*, No. CIV 307CV305TSL-JCS, 2008 WL 3874368, at \*2 (S.D. Miss. Aug. 15, 2008) (“While in less complex cases where causation may be understood with only common sense, causation may be proved by lay testimony alone; however, with injuries that are medically complicated . . . expert testimony is required to prove causation.”); *Wright v. Barr*, 62 S.W.3d 509, 524 (Mo. Ct. App.

2001) (“If there is a sophisticated injury, one that requires surgical intervention or other highly scientific techniques for diagnosis, expert medical testimony is required to prove causation.”); *Pro Serv. Auto., L.L.C. v. Lenan Corp.*, 469 F.3d 1210, 1214 (8th Cir. 2006) (holding that under Missouri law, “expert testimony is necessary where the lay jury does not possess the experience or knowledge of the subject matter sufficient to enable them to reach an intelligent opinion without help”) (internal quotations and alteration omitted); *Hinkle v. Shepherd Sch. Dist. No. 37*, 93 P.3d 1239, 1246 (Mont. 2004) (“[E]xpert testimony is required when the issue presented is sufficiently beyond the common experience of the trier of fact and the expert testimony will assist the trier of fact in determining the issue or understanding the evidence.”); *Moralli v. Lake Cty., Mont.*, 839 P.2d 1287, 1291 (Mont. 1992) (expert testimony required in personal injury cases unless “the nature of the injury is such that laymen can plainly see, or infer from the injury, its cause”); *Bernhardt v. Cty. of Scotts Bluff*, 482 N.W.2d 262, 263 (Neb. 1992) (“Unless its nature and effect are plainly apparent, an injury is a subjective condition requiring an expert opinion to establish a causal relationship between the incident and the injury or disability.”); *Saigen T. by & through Jacynda G. v. Mosaic*, No. A-15-299, 2016 WL 4045204, at \*4–5 (Neb. Ct. App. July 26, 2016) (expert testimony required except where “a causal connection between negligence . . . and the resulting injury [is] apparent,” i.e., “a layperson could clearly conclude that the[] injuries obviously stemmed from [the negligent act]”) (citing cases); *Neal-Lomax v. Las Vegas Metro. Police Dep’t*, 574 F. Supp. 2d 1193, 1199 (D. Nev. 2008) (“Under Nevada law, Plaintiffs must produce medical expert testimony to establish causation, particularly where the cause of death is not immediately apparent.”), *aff’d*, 371 F. App’x 752 (9th Cir. 2010); *Layton v. Yankee Caithness Joint Venture, L.P.*, 774 F. Supp. 576, 580 (D. Nev. 1991) (“[W]here a question of fact is beyond the comprehension of the ordinary lay person, expert testimony is

required to prove that fact.”); *Estate of Sicotte v. Lubin & Meyer, P.C.*, 959 A.2d 236, 239 (N.H. 2008) (“Expert testimony is required where the subject presented is so distinctly related to some science, profession or occupation as to be beyond the ken of the average layperson. Expert testimony is not required where the subject presented is within the realm of common knowledge and everyday experience.”); *Tormenia v. First Inv’rs Realty Co.*, 251 F.3d 128, 132 (3d Cir. 2000) (“New Jersey law *does* require expert testimony . . . in cases where lay jurors confront causation issues that are too complex to be understood without the assistance of specialized expert testimony.”) (emphasis in original); *Kelly v. Borwegen*, 230 A.2d 532, 534 (N.J. Supp. Ct. App. Div. 1967) (“[W]here a claimed disability is the natural result of the injuries sustained, the jury may, without expert opinion, find that the injuries caused such disability. However, when an injury is such as to require skilled men to determine its cause and extent, the question is one of science, and must be established by skilled professional persons.”) (quoting 25A C.J.S. Damages § 162(5)); *Am. Mech. Sols., L.L.C. v. Northland Process Piping, Inc.*, No. CV 13-1062 JB/SCY, 2016 WL 3124633, at \*21 (D.N.M. Apr. 30, 2016) (“New Mexico, along with other jurisdictions, has required expert testimony when the issue of causation is presented in a context which is not a matter of common knowledge.”); *State v. Campbell*, 546, 157 P.3d 722, 725 (N.M. 2007) (noting the distinction between when expert testimony “is *required* to establish an element of a claim or defense [because] it would assist the jury to understand issues in the case that are beyond their knowledge” and expert testimony that is “*helpful* to increase a jury’s existing base of knowledge”); *Folz v. State*, 797 P.2d 246, 260 (N.M. 1990) (“Although in many cases expert testimony will be required to establish causation and damages, such testimony is not always necessary. . . .the use of expert medical testimony should be employed when the trial court reasonably decides that it is necessary to properly inform the jurors on the issues.”) (internal



citations omitted)<sup>15</sup>; *Fane v. Zimmer, Inc.*, 927 F.2d 124, 131 (2d Cir. 1991) (under New York law, expert testimony required when the subject-matter is not “within the common knowledge and experience . . . of the ordinary jurymen”) (quoting *Meiselman v. Crown Heights Hospital*, 34 N.E.2d 367, 370 (N.Y. 1941)); *Amorgianos v. Nat’l R.R. Passenger Corp.*, 137 F. Supp. 2d 147, 160 (E.D.N.Y. 2001) (“Under New York law, when the determination of whether an illness or injury was caused by some event or conduct is presumed not to be within common knowledge and experience, a plaintiff must produce expert opinion evidence based on suitable hypotheses in order to support a finding of causation.”) (internal quotations omitted), *aff’d*, 303 F.3d 256 (2d Cir. 2002); *Young v. Hickory Bus. Furniture*, 538 S.E.2d 912, 915 (N.C. 2000) (“Due to the complexities of medical science, particularly with respect to diagnosis, methodology and determinations of causation, this Court has held that where the exact nature and probable genesis of a particular type of injury involves complicated medical questions far removed from the ordinary experience and knowledge of laymen, only an expert can give competent opinion

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<sup>15</sup> Plaintiffs rely heavily on New Mexico, pointing to one products liability cases that survived summary judgment without direct expert testimony on specific causation. This case, *Carter Farms Co. v. Hoffman-Laroche, Inc.*, 492 P.2d 1000 (N.M. Ct. App. 1971), is not apposite. In *Carter Farms*, the plaintiff, a sheep farmer, brought a products liability action against the manufacturer of a vaccine-type solution he used on his animals. Of the first 1000 lambs injected with the solution, over 40% developed infected abscesses at the point of injection, and 192 died within three weeks of being injected. *Id.* at 1001-02. In the animals that died, the abscesses at the point of injection grew until “the leg literally rotted off the animal.” *Id.* A pathologist expert testified that that the abscesses were caused by bacteria, but there was no expert testimony that the vaccine itself was contaminated with bacteria. *Id.* at 1002. A veterinarian expert testified that if the vaccine had been infected with bacteria, “it was a reasonable medical probability that an abscess would develop and a leg rot off within two weeks after the leg had been injected; that it was not possible for malignant edema or blackleg to be involved; that it was ‘(n)ot a very good possibility at all’ that the feeders (the lambs that were purchased) may have been diseased; that the existence of organisms (bacteria) on the skin of the sheep before they were purchased would be a (v)ery faint’ explanation.” *Id.* at 1002. There was also evidence that the “lambs were in good health prior to the injection” and evidence that “the method of injection did not cause the abscesses.” *Id.* at 1002. The Court found that under these circumstances, it would be reasonable for a jury to conclude that the vaccines were contaminated with bacteria and caused the deaths of the lambs. *Id.* at 1003. These circumstances are not analogous to the ones here.

evidence as to the cause of the injury.”) (internal quotations omitted); *Halvorson v. Sentry Ins.*, 757 N.W.2d 398, 400 (N.D. 2008) (“[W]hen the causal relationship between a condition affecting the human body and a [negligent act] is not a matter within the common knowledge or comprehension of a layperson, the party bearing the burden of proof must present expert medical testimony establishing that relationship.”); *Klimple v. Bahl*, 727 N.W.2d 256, 259 (N.D. 2007) (“[E]xpert testimony is required if the issue is beyond the area of common knowledge or lay comprehension, or the issue is not within the ordinary experience of the jurors.”) (internal quotations and citations omitted); *Terry v. Caputo*, 875 N.E.2d 72, 77 (Ohio 2007) (“Except as to questions of cause and effect which are so apparent as to be matters of common knowledge, the issue of causal connection between an injury and a specific subsequent physical disability involves a scientific inquiry and *must* be established by the opinion of medical witnesses competent to express such opinion.”) (emphasis in original); *Hollander v. Sandoz Pharm. Corp.*, 289 F.3d 1193, 1214 (10th Cir. 2002) (“[U]nder Oklahoma law, a plaintiff must introduce expert testimony if ‘the fact in issue is not within the realm of ordinary experience of mankind.’”) (quoting *Strubhart v. Perry Mem’l Hosp. Trust Auth.*, 903 P.2d 263, 274 (Okla.1995)); *Phelps v. Wyeth, Inc.*, 938 F. Supp. 2d 1055, 1068 (D. Or. 2013) (“Under Oregon law, when the element of causation involves a complex medical question, a plaintiff must present expert testimony that there is a reasonable medical probability of causation.”) (citing *Chouinard v. Health Ventures*, 39 P.3d 951 (Or. Ct. App. 2002)); *Hamil v. Bashline*, 392 A.2d 1280, 1285 (Pa. 1978) (“Although in certain situations involving physical injury, it is possible for a jury reasonably to infer causation from the circumstances of an accident or occurrence, it is generally acknowledged that the complexities of the human body place questions as to the cause of pain or injury beyond the knowledge of the average layperson. For a plaintiff to make out his cause of action in such a

case, therefore, the law requires that expert medical testimony be employed.”) (internal citations omitted); *Soldo v. Sandoz Pharm. Corp.*, 244 F. Supp. 2d 434, 525 (W.D. Pa. 2003) (“In a case such as this one involving complex issues of causation not readily apparent to the finder of fact, plaintiff must present admissible expert testimony to carry her burden.”); *Velazquez v. Abbott Labs.*, 901 F. Supp. 2d 279, 293 (D.P.R. 2012) (“The necessity of expert opinion evidence, however, is whether the question is one of common knowledge such that lay people could reach the conclusion as intelligently as the witness.”) (internal quotations omitted) (applying Puerto Rico law); *In re Bausch & Lomb Inc. Contacts Lens Sol. Prod. Liab. Litig.*, 693 F. Supp. 2d 515, 520 (D.S.C. 2010) (“Regarding expert testimony, to prove causation Puerto Rico law requires an expert’s opinion when the matter is sufficiently beyond common experience.”) (internal quotations omitted), *aff’d sub nom. Fernandez-Pineiro v. Bausch & Lomb, Inc.*, 429 F. App’x 249 (4th Cir. 2011); *Mills v. State Sales, Inc.*, 824 A.2d 461, 468 (R.I. 2003) (“[E]xpert testimony is required to establish any matter that is not obvious to a lay person and thus lies beyond common knowledge.”); *Babb v. Lee Cty. Landfill SC, LLC*, 747 S.E.2d 468, 481 (S.C. 2013) (“The general rule in South Carolina is that where a subject is beyond the common knowledge of the jury, expert testimony is required.”); *Burley v. Kyttec Innovative Sports Equip., Inc.*, 737 N.W.2d 397, 407 (S.D. 2007) (“[E]xpert testimony is required when the issue falls outside the common experience of a jury.”) (citing *Caldwell v. John Morrell & Co.*, 489 N.W.2d 353 (S.D.1992)); *Tomazin v. Lincare, Inc.*, No. 3:13-CV-0875, 2015 WL 4545658, at \*12 (M.D. Tenn. July 27, 2015) (“Under Tennessee law, a plaintiff must provide admissible expert testimony as to both causation and product defect in order to prove liability in a products action. . . . Moreover, under Tennessee law, medical causation must be established by expert testimony.”) (citing cases); *Jastrebski v. Smith & Nephew Richards, Inc.*, No. 02A01-9803-CV-00068, 1999

WL 144935, at \*6 (Tenn. Ct. App. Mar. 18, 1999) (“The product in dispute is a technically complex prescription medical device, and expert testimony is required to establish the causal connection between the alleged defect in the device and Plaintiff’s claimed injuries.”); *Guevara v. Ferrer*, 247 S.W.3d 662, 665 (Tex. 2007) (“The general rule has long been that expert testimony is necessary to establish causation as to medical conditions outside the common knowledge and experience of jurors.”); *Graves v. N. E. Servs., Inc.*, 345 P.3d 619, 627 (Utah 2015) (expert testimony required on “scientific matters beyond the capacity of an ordinary juror”); *Fox v. Brigham Young Univ.*, 176 P.3d 446, 451–52 (Utah App. 2011) (“In Utah, the need for positive expert testimony to establish a causal link between the defendants’ negligent act and the plaintiff’s injury depends on the nature of the injury. . . . Thus, where the injury involves obscure medical factors which are beyond an ordinary lay person’s knowledge, necessitating speculation in making a finding, there must be expert testimony that the negligent act probably caused the injury. . . . It is only in the most obvious cases that a plaintiff may be excepted from the requirement of using expert testimony to prove causation.”) (internal quotations, alterations, and citations omitted); *Egbert v. Book Press*, 477 A.2d 968, 969 (Vt. 1984) (“When the facts to be proved are such that any layman of average intelligence would know from his own knowledge and experience that the accident was the cause of the injury, no expert testimony is needed to establish the causal connection; however, where the causal connection is obscure, expert testimony is required.”); *Zellers v. NexTech Ne., LLC*, 533 F. App’x 192, 200 (4th Cir. 2013) (“To prove causation in a toxic tort action, a plaintiff must offer relevant and reliable expert testimony, as the health effects of toxic exposure to chemicals are beyond the knowledge and experience of the average layperson.”) (applying Virginia law); *Gauthreaux v. United States*, 694 F. Supp. 2d 460, 465 (E.D. Va. 2009) (“[I]n a products liability action, proof

of causation must ordinarily be supported by expert testimony because of the complexity of the causation facts.”) (applying Virginia law); *Washington v. HOVENSA, LLC*, No. CIV.A. 06-97, 2011 WL 6965855, at \*1 (D.V.I. Dec. 13, 2011) (“[E]xpert testimony is required to prove causation in cases where the complexities of the human body place questions as to the cause of pain or injury beyond the knowledge of the average layperson.”) (internal quotations omitted); *Anders v. Puerto Rican Cars, Inc.*, No. CIV.A. 04-0036, 2009 WL 3007367, at \*9 (D.V.I. Sept. 15, 2009) (“Proving that an alleged defect was the legal cause of an injury requires testimony from a qualified expert who can testify about specific causation, just as expert testimony is required to establish the standard of care and causation in medical malpractice cases in the Virgin Islands.”) (internal quotations omitted), *aff’d*, 409 F. App’x 539 (3d Cir. 2011); *Bruns v. PACCAR, Inc.*, 890 P.2d 469, 477 (Wash. App. Div. 1 1995) (“Expert testimony is required to establish causation when an injury involves obscure medical factors that would require an ordinary lay person to speculate or conjecture in making a finding.”); *Strahin v. Cleavenger*, 603 S.E.2d 197, 211 (W.V. 2004) (expert testimony is required “where the injury is obscure, that is, the effects of which are not readily ascertainable, demonstrable or subject of common knowledge”); *Rohrbough v. Wyeth Labs., Inc.*, 916 F.2d 970, 972 (4th Cir. 1990) (holding that under Virginia law, plaintiff had to prove that defendant’s vaccine caused plaintiff’s injuries and had to do so “by expert testimony”); *Kolesar v. United Agri Prod., Inc.*, 246 F. App’x 977, 981 (6th Cir. 2007) (“Under Wisconsin law, [e]xpert testimony is required to prove causation if the matter does not fall within the realm of ordinary experience and lay comprehension.”) (quoting *Menick v. City of Menasha*, 547 N.W.2d 778, 782 (Wis. App. 1996)); *City of Cedarburg Light & Water Comm’n v. Allis-Chalmers Mfg. Co.*, 149 N.W.2d 661, 662 (Wis. 1967) (“There may be cases where the issue of causation, like the issue of negligence, involves technical, scientific or

medical matters which are beyond the common knowledge or experience of jurors and without the aid of expert testimony the jury could only speculate as to what inferences to draw if it were left to determine the issue. The lack of expert testimony in such cases results in an insufficiency of proof.”); *Bodily v. State, ex rel., Wyoming Workers’ Safety & Comp. Div.*, 320 P.3d 240, 250 (Wyo. 2014) (“[E]xpert testimony is required to establish causation unless the injury is immediately and directly or naturally and probably the result of an accident.”) (internal quotations omitted); *Sayer v. Williams*, 962 P.2d 165, 168 (Wyo. 1998) (expert testimony required “[i]f the origin of the injury is obscure and not readily apparent to a layman, or if there are several equally probable causes of the condition”).

To be sure, Plaintiffs are correct that there are instances where expert testimony is not required to prove causation, but those circumstances—where a lay juror can infer causation from common knowledge and lay experience—are not present here. Such circumstances include an immediate onset of symptoms that naturally follow from an accident or a complete lack of any other possible cause. *E.g., Turner v. Iowa Fire Equip. Co.*, 229 F.3d 1202, 1210 (8th Cir. 2000); *Lasley v. Georgetown Univ.*, 688 A.2d 1381, 1385 (D.C. 1997); *see also Galloway v. Horne Concrete Const.*, 524 F. App’x 865, 872 (4th Cir. 2013) (under Maryland law, “a plaintiff was not required to prove causation by expert evidence when she drank from a spigot and developed chemical burns in her mouth immediately thereafter”); *Cowart v. Widener*, 697 S.E.2d 779, 784 (Ga. 2010) (“[I]t does not require expert testimony for a lay jury to determine that a gunshot wound to the head of an otherwise healthy person who died shortly thereafter was the proximate cause of her death.”); *Pagett v. N. Elec. Supply Co.*, 167 N.W.2d 58, 64 (Minn. 1969) (expert testimony on causation was not required where it was “undisputed that plaintiff stepped into the coalhole, did a so-called ‘spread-eagle,’ and received emergency treatment at a hospital;

sustained abrasions of the legs; had accompanying pain in the lower back, left hip, and upper part of the left leg, with other obvious injuries and discomforts”); *Pitts v. Wingate At Brighton, Inc.*, 972 N.E.2d 74, 79 (Mass. App. Ct. 2012) (“No expert testimony is necessary for lay jurors to appreciate that allowing a nursing home patient to fall to the floor could cause a broken bone.”); *Dodge-Farrar v. Am. Cleaning Servs. Co.*, 54 P.3d 954, 959 (Idaho Ct. App. 2002) (“[T]he causal relationship between [plaintiff’s] fall and her immediate symptoms in the ankle, knee and back (the pain, swelling, and the inability to sit, stand or walk without assistance) is within the usual and ordinary experience of the average person.”); *Brown v. Baker*, 672 N.E.2d 69, 71 (Ill. App. 1996) (“[I]f a plaintiff suffers a cut in an accident, the jury can readily determine without expert testimony that the accident caused the cut.”).

On the other hand, the effects of drugs on the human body and the causation of a complicated, progressive diseases like diabetes do require expert testimony. *See, e.g.*, *Hollander*, 289 F.3d at 1214 (“The alleged effect of Parlodel is not within the realm of ordinary experience: in order to assess the arguments regarding the alleged effects of the drug, the factfinder would be required to assess the wide variety of scientific evidence . . . . As a result, the [plaintiffs] cannot prove their claim without expert testimony.”); *Sullivan v. Pfizer, Inc.*, No. 3:14-CV-1374 (MPS), 2016 WL 868155, at \*4 (D. Conn. Mar. 4, 2016) (“[E]xpert testimony is necessary to determine the effect of a prescription drug, Lipitor, on the human body, and to determine whether it caused [plaintiff’s] injuries, including, among others, medical diagnoses . . . .”); *Phelps v. Wyeth, Inc.*, 938 F. Supp. 2d 1055, 1068 (D. Or. 2013) (under Oregon law, plaintiff must present expert testimony on both general and specific causation to survive summary judgment in pharmaceutical product liability case); *In re Baycol Prods. Litig.*, 321 F.Supp.2d 1118, 1126 (D. Minn. 2004) (“Expert testimony is particularly important in personal injury cases

involving pharmaceuticals because they involve complex questions of medical causation beyond the understanding of a lay person.”); *Soldo v. Sandoz Pharm. Corp.*, 244 F. Supp. 2d 434, 525 (W.D. Pa. 2003) (expert testimony required on both general and specific causation in pharmaceutical product liability case); *Blanchard v. Eli Lilly & Co.*, 207 F. Supp. 2d 308, 322 (D. Vt. 2002) (“Without expert testimony that Prozac caused the deaths, it is not possible to show that any inadequacy in warning about Prozac was a substantial factor in bringing about the deaths.”); *Hinkle v. Shepherd Sch. Dist. No. 37*, 93 P.3d 1239, 1246 (Mont. 2004) (development of Type I diabetes is “beyond the common experience and understanding of the trier of fact”); *Swallow v. Emergency Med. of Idaho, P.A.*, 67 P.3d 68, 75 (Idaho 2003) (“Whether or not the Cipro taken by [plaintiff] was a cause of his heart attack is a matter of science that is far removed from the usual and ordinary experience of the average person. A jury, comprised of lay people, is simply not qualified to determine that issue without the assistance of expert testimony establishing that Cipro can cause a myocardial infarction.”); *Mills v. State Sales, Inc.*, 824 A.2d 461, 468 (R.I. 2003) (“[W]e do not hesitate to conclude that the existence of a causal relationship between a particular toxin and its effect on the human body would have to be established through expert testimony.”); *Ellis v. Hartford Run Apartments LLC*, 779 S.E.2d 103, 108 (Ga. App. 2015) (“Because the plaintiffs failed to submit expert medical testimony linking [plaintiff’s] exposure to mold to her medical conditions, the defendants were entitled to summary judgment on the claim for damages for personal injury.”), *reconsideration denied* (Dec. 7, 2015), *cert. denied* (Apr. 4, 2016).

Here, expert testimony is certainly required. Diabetes is a complicated, progressive disease with a number of risk factors. Whether the drug Lipitor is capable of causing diabetes is



a medically complex question outside of a lay jurors knowledge and experience, and Plaintiffs have not pointed any authority that would suggest otherwise.

### 3. Admissions Cannot Substitute for Expert Testimony When Required Under State Law.

The Court can find no state law cases that shed light on the question of whether party opponent admissions can substitute for expert testimony when it is normally required. Thus, the Court turns to few cases in the county to have addressed the issue.

This “novel argument” that party opponent admissions can substitute for expert testimony was raised in the Meridia MDL and “create[d] an issue of first impression” for the Meridia MDL court. *In re Meridia Prod. Liab. Litig.*, 328 F. Supp. 2d 791, 808 (N.D. Ohio 2004), *aff’d sub nom. Meridia Prod. Liab. Litig. v. Abbott Labs.*, 447 F.3d 861 (6th Cir. 2006).<sup>16</sup> The *Meridia* court had to reach the issue because it excluded plaintiffs’ expert testimony on general causation under Rule 702 and *Daubert*. *Id.* at 802-07. The court held that the statement in the drug’s label regarding blood pressure was sufficient to survive summary judgment on the issue of general causation but that statements regarding numerous other medical conditions were not.

With regard to blood pressure, the label stated “MERIDIA SUBSTANTIALLY INCREASES BLOOD PRESSURE IN SOME PATIENTS . . . “ *Id.* at 810. The *Meridia* court held this language constituted “admissions of Meridia’s potential to cause substantial increases in blood pressure *in some patients*” and held this was sufficient to survive summary judgment on general causation. *Id.* (emphasis in original). Importantly, however, the *Meridia* court went on to hold that:

The insert lists the other conditions as being “associated” with Meridia. Such admissions of temporal associations (or reports of temporal associations) are

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<sup>16</sup> In *Meridia*, “[r]ather than undertake an analysis of all fifty states’ laws to determine which do and which do not require expert testimony on the issue of general causation,” the court assumed “*arguendo* that no states’ laws erect such a requirement.” *Id.* at 802.

insufficient to create admissions of causation. Therefore, Plaintiffs have met their burden of showing a genuine issue of material fact only with respect to Meridia’s capacity to cause substantial increases in blood pressure. For all other conditions, Plaintiffs have not met their burden. The Court therefore **GRANTS** Defendants’ motion for summary judgment with regard to all tort claims involving harms not related to increased blood pressure.

*Id.* The *Meridia* court went on to grant summary judgment with regard to the blood pressure claims, holding that the language with regard to increased blood pressure was a sufficient warning as a matter of law. *Id.* at 814.

The Sixth Circuit’s affirmance in the *Meridia* case found “no fault with the district court’s treatment of the causation factor.” *Meridia Prod. Liab. Litig. v. Abbott Labs.*, 447 F.3d 861, 866 (6th Cir. 2006). In doing so, the court noted that (1) the district court “contrasted the strong language of ‘substantially increases’ with milder warning language such as ‘is associated with’”; (2) the district court did not rely “*on the fact* of the warning to find causation” but “instead on the specific wording” (emphasis in original); and (3) “according to several record depositions,” the specific wording was “the product of discussion between the FDA and the regulated party.” *Id.*

The *Mirena* MDL court also addressed this issue and came to the following conclusion:

A review of the cases cited by Plaintiffs—as well as common sense—suggest that if it is conceivable at all that a statement by a party opponent could be used in place of expert testimony to prove causation, the circumstances in which this might occur would be exceedingly rare, especially in the pharmaceutical or medical contexts. . . . the most that can be wrung from the authority cited by Plaintiffs is that if admissions could ever substitute for expert testimony in a complex case that requires expert testimony as to causation under state law, those admissions would have to be clear, unambiguous, and concrete, rather than an invitation to the jury to speculate as to their meaning.

*In re Mirena IUD Prod. Liab. Litig.*, No. 13-MC-2434 (CS), 2016 WL 4059224, at \*8 (S.D.N.Y. July 28, 2016). The *Mirena* court noted that the *Meridia* court assumed no state law

required expert testimony to prove causation. The *Mirena* court, on the other hand, did not “make the same assumption,” as all jurisdictions at issue in *Mirena* did “have such a requirement.” *Id.* at \*9. The *Mirena* court found this distinction “fatal to Plaintiffs’ argument,” *id.*, and ultimately concluded, after a review of case law, that:

no court has held that admissions can substitute for required expert testimony, and this Court will not be the first. Such a ruling would disregard the purpose of the requirement for expert testimony, leaving jurors to speculate, and would chill free and frank discussion by manufacturers of drugs or devices.

*Id.* at 12. Wading into the policy implications of such a holding, the court stated:

there may be myriad reasons, including an abundance of caution or the avoidance of lawsuits, why a manufacturer may warn of a possible phenomenon without being convinced that it is a genuine risk, and permitting the label to substitute for expert testimony here would present a wholly conjectural basis for a jury to determine general causation. And allowing a label to substitute for expert testimony would discourage manufacturers from exercising caution, providing potential users with less information rather than more where the science is debatable, a result inimical to the public health.

*Id.* at 14.<sup>17</sup> The only other courts to have addressed the issue have either done so in a conclusory fashion, *see Meade v. Parsley*, No. 2:09-CV-00388, 2010 WL 4909435, at \*7 (S.D.W. Va. Nov. 24, 2010) (“PLIVA’s drug label, which merely warns of metoclopramide’s potential side-effects without explaining the scientific basis for the warning, is no substitute for expert testimony that establishes causation in terms of reasonable probability.”), or like *Meridia*, relied on the fact that association evidence is not evidence of causation:

Defendants’ labeling changes and notification letters merely relayed information about a possible association between their drug and optic neuropathy. Spontaneous reporting by a pharmaceutical company should be encouraged; it serves “as a signaling system for adverse drug reactions that may not have been

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<sup>17</sup> Such substantive policy implications reinforces the Court’s conclusion that to the extent substantive state law requires expert testimony to prove a particular element of claim, state law also determines whether alleged admissions can substitute for such expert testimony.

detected during pre-market testing.” *Haggerty v. Upjohn Co.*, 950 F.Supp. 1160, 1164 (S.D.Fla.1996). Such reporting does not, however, indicate causation.

*Nelson v. Am. Home Prod. Corp.*, 92 F. Supp. 2d 954, 969 (W.D. Mo. 2000); *see also In re Zolofit (Sertralinehydrochloride) Prod. Liab. Litig.*, No. 12-MD-2342, 2016 WL 1320799, at \*9 (E.D. Pa. Apr. 5, 2016) (“Neither these [internal] documents, nor draft product documents or foreign product labels containing language that advises use of birth control by a woman taking Zolofit constitute an admission of causation, as opposed to acknowledging a possible association.”).<sup>18</sup>

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<sup>18</sup> The other two cases cited by Plaintiffs are inapposite. In *Westberry v. Gislaved Gummi AB*, 178 F.3d 257 (4th Cir. 1999), the Fourth Circuit considered the admissibility of expert testimony under *Daubert*. One of the pieces of evidence considered by the expert was a Material Safety Data Sheet (MSDS) for talc provided by the defendant, which stated “[i]nhalation of dust in high concentrations irritates mucous membranes.” *Id.* at 264. As the *Merina* court noted: the issue was not whether the MSDS statement could substitute for expert testimony. Rather, the comment regarding the MSDS was made in the context of evaluating whether the plaintiffs’ expert had a sufficient basis for his specific causation opinion. The *Westberry* court’s discussion shows no more than that an MSDS is properly considered by an expert. Nothing in *Westberry* suggests that a manufacturer’s statement suffices to defeat summary judgment in the absence of expert testimony.

*Mirena*, 2016 WL 4059224, at \*9.

In *Lewis v. Johnson & Johnson*, 601 F. App’x 205 (4th Cir. 2015) (per curiam), the Fourth Circuit held that under Texas law, “expert testimony is necessary to establish causation as to medical conditions outside the common knowledge and experience of jurors.” *Id.* at 211. The court went on to hold that “whether any of these defects [at issue] caused [plaintiff’s] pain involves complex and technical medical issues beyond common knowledge and experience” and, therefore, her “failure to present . . . expert testimony doomed her design defect claim.” *Id.* In the last paragraph of the opinion, the panel noted “plaintiff does not argue that the remaining testimony—by, for instance, employees of the defendant—establishes causation.” *Id.* at 212. Plaintiffs have apparently interpreted this sentence to mean that “the court in *Lewis* accepted that admissions by defendant’s employees could prove general causation as a matter of law.” (Dkt. No. 1586 at 19). However, *Lewis* did not pass on the issue, but simply noted that the plaintiff had not raised it so it need not be addressed.

#### 4. DeMicco Email

The primary piece of evidence relied on Plaintiffs is a one-sentence email by Pfizer VP, Dr. DeMicco sent on September 27, 2009. On September 25, 2009, Dr. DeMicco sent an earlier email to Dr. David Waters at the University of California, San Francisco, with the statistical analysis for the occurrence of diabetes in SPARCL.<sup>19</sup> Dr. Waters replied via email that SPARCL data “dovetail nicely with the TNT results,” and stated:

I would draw these conclusions based on this data:

1. Atorvastatin increases the risk of developing diabetes.
2. The risks of 10 and 80 mg are similar.
3. Fasting blood sugar and features of the metabolic syndrome are strong predictors of the development of diabetes in both populations.

(Dkt. No. 1591-1 at 2). Dr. DeMicco then replied, in the email at issue, that “[a]s far as the conclusions, I concur with your assessment below.” (*Id.*).

First, this email is, at best, evidence of an association, not causation. An association does not equal causation, and epidemiologists engage in a rigorous analysis of multiple factors to determine whether an association is causal.<sup>20</sup> *E.g., In re Lipitor (Atorvastatin Calcium) Mktg., Sales Practices & Prod. Liab. Litig.*, 174 F. Supp. 3d 911, 916 (D.S.C. 2016); *Henricksen v.*

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<sup>19</sup> SPARCL was a randomized clinical trial that tested whether Lipitor was effective for reducing the incidence of stroke in patients who had previously had a stroke or TIA. (Dkt. No. 972-28). Participants were randomly assigned to 80 mg of Lipitor or a placebo. (*Id.* at 2). Diabetes was not an endpoint in this study, but adverse event information was collected, and Pfizer conducted a post hoc analysis of the data. (Dkt. No. 972 at 24). A post hoc analysis of data from the clinical trial found a statistically significant increase in the risk of diabetes for patients randomized to 80 mg of Lipitor versus those on placebo. (Dkt. No. 972-29 at 2).

<sup>20</sup> These factors are (1) strength of the association, (2) replication of the findings, (3) specificity of the association, (4) temporal relationship, (5) dose-response relationship (aka biological gradient), (6) biological plausibility, (7) consistency with other knowledge (aka coherence), (8) consideration of alternative explanations, and (9) cessation of exposure. Reference Manual on Scientific Evidence 600 (3d. ed. 2011); *see also* Sir Austin Bradford Hill, *The Environment and Disease: Association or Causation?*, 58 Proc. Royal Soc’y Med. 295, 295-300 (1965)), *available at* Dkt. No. 972-32.

*ConocoPhillips Co.*, 605 F. Supp. 2d 1142, 1175 (E.D. Wash. 2009); *In re Neurontin Mktg., Sales Practices, & Prod. Liab. Litig.*, 612 F. Supp. 2d 116, 125 (D. Mass. 2009) (citing the Reference Manual on Scientific Evidence (2d. ed. 2000) at 336, 374); *see also Allison v. McGhan Med. Corp.*, 184 F.3d 1300, 1315 (11th Cir. 1999) (“[S]howing association is far removed from proving causation.”); Reference Manual on Scientific Evidence (RMSE) 218 (3d ed. 2011) (“[W]ork is needed to bridge the gap between association and causation.”). Thus, evidence of an association does not create a genuine issue of material fact as to causation.

Plaintiffs argue that the statement “increases the risk” is synonymous with “causes,” and thus, they argue, Dr. DeMicco’s statement, “I concur with your assessment” is an admission that Lipitor causes diabetes. Plaintiffs are “follow[ing] human nature, which is to confuse association and causation.” *Siharath v. Sandoz Pharm. Corp.*, 131 F. Supp. 2d 1347, 1372 (N.D. Ga. 2001), *aff’d sub nom. Rider v. Sandoz Pharm. Corp.*, 295 F.3d 1194 (11th Cir. 2002). An increase in statistical risk, like the one acknowledged by Dr. DeMicco here, is evidence of association, not causation.

These emails discuss a statistical analysis that, as the later published article on the data states, found that the 80 mg dose of Lipitor “is *associated* with a slightly increased risk of new-onset [type 2 diabetes].” (Dkt. No. 972-29 at 2) (emphasis added). This increased statistical risk was shown by a hazard ratio of 1.37, with a 95% confidence interval of 1.08 to 1.75. (*Id.*). A hazard ratio, like a relative risk ratio or odds ratio, is a “measure of *association* used in epidemiology.” RSME at 295 (defining relative risk) (emphasis added); *see also* RSME at 291 (defining odds ratio and describing it as a “measure of association, often used in epidemiology”). As a statistical analysis comparing two groups, all it can show is an association, i.e. a correlation or increased risk; it cannot show causation. *See In re Neurontin Mktg., Sales Practices, & Prod.*

*Liab. Litig.*, 612 F. Supp. 2d 116, 125 (D. Mass. 2009) (“‘An association is not equivalent to causation,’ and so epidemiological studies, on their own, ‘cannot objectively prove causation.’”) (quoting RMSE 336, 374 (2d. ed. 2000)).

Explained in another way, “risk” is “[a] probability that an event will occur.” RSME at 627. An “increased risk” is an “increased probability that an event will occur.” Here, diabetes is more probable, more likely to occur, in the group taking Lipitor. This is the very definition of an association, and says nothing about causation. See *In re Lipitor (Atorvastatin Calcium) Mktg., Sales Practices & Prod. Liab. Litig.*, 150 F. Supp. 3d 644, 649 (D.S.C. 2015) (“[E]ven if Plaintiffs establish that there is an association between Lipitor and diabetes (*i.e., that Lipitor increases the risk of diabetes*) and that Lipitor is capable of causing diabetes, it does not necessarily follow the Lipitor caused the development of diabetes in a particular plaintiff.”)<sup>21</sup> (emphasis added). As the Reference Manual on Scientific Evidence explains, an association is

[t]he degree of statistical relationship between two or more events or variables. Events are said to be associated when they occur more or less frequently together than one would expect by chance. Association does not necessarily imply a causal relationship.

RMSE at 619.

The Reference Manual on Scientific Evidence provides an analogous example. Studies found that women with herpes were more likely to develop cervical cancer than other women. RMSE at 219. In other words, herpes *increased the risk* of cervical cancer; having herpes increased the probability that women would develop cervical cancer. Some assumed this

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<sup>21</sup> Later in this opinion, the Court stated that Dr. Murphy’s opinion was “based only on (1) the fact that Lipitor increases the risk of diabetes (general causation) and (2) that Ms. Hempstead developed diabetes after taking Lipitor.” *Id.* at 652. With this parenthetical, the Court was emphasizing that information regarding an increase in risk went to the matter of general causation, not specific causation. It was not equating the phrase “increased risk” with general causation.

association was causal. However, “[l]ater research showed that the primary cause of cervical cancer was a human papilloma virus (HPV),” and that herpes was simply a marker of sexual activity, not the cause of cervical cancer. *Id.*

Here, viewing the evidence in the light most favorable to Plaintiffs,<sup>22</sup> Dr. DeMicco is agreeing with Dr. Waters’ assessment that, according to the SPARCL data, Lipitor increases the risk of diabetes, i.e., that the probability of developing diabetes in the Lipitor group was higher, i.e., that taking 80 mg of Lipitor is associated with higher rates of diabetes. This statement speaks to association and does not create a genuine issue of material fact as to causation.<sup>23</sup>

Furthermore, even if the one-sentence email indicated that Dr. DeMicco thought Lipitor caused diabetes, the Court finds such an email could not replace expert testimony when expert testimony is required by substantive state law. A single statement by a single employee (even a Vice President) in a single email about a single study is not the type of clear declaration made in

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<sup>22</sup> Viewing the evidence in the light most favorable to Plaintiff does not require the Court to conflate association and causation. *See Llewellyn v. Allstate Home Loans, Inc.*, 711 F.3d 1173, 1187 (10th Cir. 2013) (“Although our summary judgment standard requires us to view the facts in the light most favorable to the non-moving party, it does not require us to make unreasonable inferences in favor of the non-moving party.”); *Scalisi v. Fund Asset Mgmt., L.P.*, 380 F.3d 133, 137 (2d Cir. 2004) (“[W]e are not required to accept as true . . . unwarranted deductions of fact drawn by the non-moving party.”).

<sup>23</sup> Courts have occasionally used “increased risk” as shorthand for general causation when differentiating general causation from specific causation. *See Jenkins v. Slidella L.L.C.*, No. CIV.A.05-370, 2008 WL 2649510, at \*4 (E.D. La. June 27, 2008) (“Defendants state that where a plaintiff claims that a substance caused his injury, he must show not merely general causation (i.e., that exposure to the substance at issue increases the risk of a particular injury), but specific causation (i.e., that the substance in question did, in fact, cause a particular individual’s injury.”)). Establishing an association is the first, threshold step in establishing general causation, and it is not surprising that courts may invoke this language to help differentiate the inquiries of general and specific causation. However, this fact does not change voluminous and well-established precedent that association, alone, is not sufficient to establish causation and does not change the simple factual truth that association is not causation. The parties have always agreed that establishing association is just the first step of a two-step process for establishing general causation. (*See* Dkt. No. 972 at 27-28; Dkt. No. 1053 at 13).



the *Meridia* case, where the label stated that “MERIDIA SUBSTANTIALLY INCREASES BLOOD PRESSURE IN SOME PATIENTS . . .” 328 F. Supp. 2d at 810. *Meridia* is the only case where a statement by a party has been held sufficient to survive summary judgment on general causation. In affirming the *Meridia* case, the Sixth Circuit specifically noted the district court’s contrast of this “strong language,” reliance on the “specific wording.” 447 F.3d at 866. The *Meridia* court reached the opposite conclusion when weaker wording, like that in the DeMicco email, was at issue. 328 F. Supp. 2d at 810. The wording in *Meridia* was also “the product of discussion between the FDA and the regulated party,” not a statement by one employee shot off in an email. 447 F.3d at 866.

Finally, in *Meridia*, the court assumed state law did not require expert testimony. *Id.* at 802. By contrast this Court has found that state substantive state law requires expert testimony to prove general causation in this case. “[A] federal court in the exercise of its diversity jurisdiction should act conservatively when asked to predict how a state court would proceed on a novel issue of state law.” *Rhodes*, 636 F.3d at 97–98. Allowing a single sentence email to replace expert testimony that is required by substantive state law is novel and would dramatically change the substantive rights of parties. The Court declines to so dramatically change expert testimony requirements under substantive state law without any indication the they would do so. Therefore, the Court finds this email cannot create a genuine issue of material fact as to general causation.

#### 5. Evidence Regarding Blood Glucose

The next three pieces of evidence are (1) statements of association only and (2) statements regarding blood glucose, not diabetes. The U.S. Lipitor label states that “[i]ncreases in HbA1c and fasting serum glucose levels have been reported with [statins], including

LIPITOR.” (Dkt. No. 1586-9). This statement never mentions diabetes, only blood glucose levels, and the two are not synonymous. (*See* Dkt. No. 1159 at 12 stating that “diagnosis of diabetes requires more than a single elevated plasma glucose level”). Furthermore, the language “have been reported” indicates temporal association, not causation. For both reasons, it fails to create a genuine issue of material fact as to whether Lipitor causes diabetes in dosages less than 80 mg.<sup>24</sup>

Next, Plaintiffs point to the NDA data allegedly showing that Lipitor was associated with increases in blood glucose levels. Again, increased blood glucose levels are not synonymous with full blown diabetes, and the data only indicates, at best, an association, not causation.<sup>25</sup> For both reasons, it fails to create a genuine issue of material fact as with whether Lipitor causes diabetes in dosages less than 80 mg.

Next, Plaintiffs point to the official Lipitor website, which states that “[e]levated blood sugar levels have been reported with statins, including LIPITOR.” Again, this fails to create a genuine issue of material fact for the same reasons. It does not mention or say anything about diabetes, and it is, at best, evidence of an association. Thus, it does not create a genuine issue of material fact as to causation.

#### 6. Japanese Label

Finally, Plaintiffs point to the Japanese label insert for Lipitor. The Japanese label states that “[h]yper-glycemia and diabetes melitis may occur. . . .” (Dkt. No. 1586-5 at 4). Again, this is not a clear statement that Lipitor causes diabetes, like in *Meridia*, but an acknowledgement of

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<sup>24</sup> Plaintiffs acknowledge that the U.S. label’s language “is not as supportive of our position” and may not be sufficient alone to survive summary judgment. (Dkt. No. 1634 at 47).

<sup>25</sup> Whether the data even indicates this is disputed by the parties. However, for the purposes of this motion, the Court assumes the NDA data does indicate an association between Lipitor usage and increased blood glucose levels.

a possible association. *See In re Zoloft*, 2016 WL 1320799, at \*9 (“Neither these [internal] documents, nor . . . foreign product labels containing language that advises use of birth control by a woman taking Zoloft constitute an admission of causation, as opposed to acknowledging a possible association.”). The label change was based on 30 adverse event reports, (Dkt. No. 1163-3 at 174-77, Dkt. No. 1762-4 at 2, Dkt. No. 1762 at 3), which “are not even sufficient to show association, because there is no comparison group.” RSME at 218.

Regardless, it cannot be used to replace state substantive law requiring expert testimony. Unlike the U.S. label in *Meridia*, the Japanese label change at issue here was ordered by Japanese officials, specifically Japan’s Ministry of Health Labor, and Welfare (MHLW), “without even discussing it with [the Japanese licensee/distributor of Lipitor].” (Dkt. No. 1761-3 at 193). There is no evidence in the record that Pfizer had any input regarding the inclusion, or wording of, the statement placed on the Japanese label or that Pfizer manifested a belief in its accuracy. Indeed, as Plaintiffs point out, Pfizer *disagreed* with the label change, but it went into effect anyway. (Dkt. No. 1181 at 5; Dkt. No. 1761-2 at 9-10). In short, the statement is one by MHLW, not Pfizer, and is not an admission by Pfizer.

While such a label change may have relevance to Pfizer’s knowledge of adverse events, the purpose for which Plaintiffs’ originally intended to introduce it,<sup>26</sup> it does not create a genuine issue of material fact as to whether Lipitor is capable of causing diabetes. The Court finds that even if the state courts were to allow certain types of party opponent admissions to replace expert testimony when it is substantively required by state law, they would not find a statement placed on a foreign label by a foreign agency without any input from, or discussion with, the defendant to constitute an acceptable admission to replace expert testimony. Therefore, the Court grants

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<sup>26</sup> See Dkt. No. 1181.

summary judgment on the ground that Plaintiff has failed to create a genuine issue of material fact as to general causation.

## **B. Specific Causation**

### 1. Expert Testimony is Required.

As explained above, all jurisdictions at issue here require expert testimony at least where the issues are medically complex and outside common knowledge and lay experience. Courts have held that effects of drugs on the human body and the causation of a complicated, progressive diseases like diabetes do require expert testimony.<sup>27</sup> *See, e.g., Hollander*, 289 F.3d at 1214 (“The alleged effect of Parlodel is not within the realm of ordinary experience: in order to assess the arguments regarding the alleged effects of the drug, the factfinder would be required to assess the wide variety of scientific evidence . . . . As a result, the [plaintiffs] cannot prove their claim without expert testimony.”); *Sullivan*, 2016 WL 868155, at \*4 (“[E]xpert testimony is necessary to determine the effect of a prescription drug, Lipitor, on the human body, and to determine whether it caused [plaintiff’s] injuries, including, among others, medical diagnoses . . . .”); *In re Baycol Prods. Litig.*, 321 F.Supp.2d at 1126 (“Expert testimony is particularly important in personal injury cases involving pharmaceuticals because they involve complex questions of medical causation beyond the understanding of a lay person.”); *Hinkle*, 93 P.3d at 1246 (development of Type I diabetes is “beyond the common experience and understanding of the trier of fact”).

Here, expert testimony is certainly required. Diabetes is a complicated, progressive disease with a number of risk factors. Plaintiff’s general causation experts cannot even figure

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<sup>27</sup> If the mythic state existed that allowed pharmaceutical products liability cases to go to a jury without any expert testimony on causation, it would be a black hole for all such cases. Plaintiffs have not cited a single case in any jurisdiction that has allowed a case to survive summary judgment in circumstances analogous to the ones here.

out how to determine whether an individual's diabetes was caused by Lipitor or other factors, and Plaintiff's specific causation expert cannot determine which people in a room of 100 people or 10 people had "statin-induced" diabetes as opposed non-statin-induced diabetes. (Dkt. No. 1004-1 at 210-11; Dkt. No. 1004-4 at 162; Dkt. No. 1004-5 at 71; Dkt. No. 1004-6 at 163). If these experts cannot make this determination, it is certainly not within the common knowledge of a lay person. A jury's finding of causation in the absence of any expert testimony would be based on impermissible speculation or conjecture. *Dash*, 731 F.3d at 311.

## 2. Expert Testimony on General Causation Combined with Non-expert Evidence

Plaintiffs next argue that in some jurisdictions, a plaintiff can survive summary judgment with a combination of (1) specific causation expert testimony that a substance is a possible cause of a plaintiff's injury and (2) "non-expert evidence." (Dkt. No. 1586 at 29). Again, this statement is true as far as it goes, but is not applicable here. *See, e.g., Benkendorf v. Advanced Cardiac Specialists Chartered*, 269 P.3d 704, 706 n.4 (Ariz. Ct. App. 2012) ("Under some circumstances, a plaintiff's expert may opine as to possible causes of an injury if other evidence supports a causal connection."); *Rodrigues v. Georgia-Pac. Corp.*, 661 S.E.2d 141, 143 (Ga. App. 2008) ("[M]edical testimony stated only in terms of a 'possible' cause *may* be sufficient when supplemented by probative non expert testimony on causation.") (emphasis in original).

The non-expert evidence present in these cases is probative of causation and, at least in combination with expert testimony on a "possible causes," is sufficient for a jury to infer causation without engaging in speculation; indeed, this non-expert evidence often consists of the same type of evidence that is sufficient to get to a jury without *any* expert testimony, such as in the case of immediate onset of symptoms. *See, e.g., Smith v. Hines*, 261 P.3d 1129, 1135 (Okla. 2011 ) (expert testimony that accident could have caused curvature of the spine combined with

evidence “that there was no curvature of the spine before, but was shortly after, the accident” and plaintiff’s evidence that “reasonably tended to exclude every other possible cause” was sufficient); *Ketcham v. Thomas*, 283 S.W.2d 642, 649–50 (Mo. 1955) (expert opinion that collision was a “possible” cause of plaintiff’s constant menstrual bleeding combined with evidence “that immediately after the accident her condition changed to constant bleeding which could not be controlled and that this constant bleeding was not common and was not a symptom . . . before the collision” was sufficient to survive summary judgment on whether “the accident was the cause of the constant bleeding”); *Ideal Food Prod. Co. v. Rupe*, 261 P.2d 992, 993, 994 (Ariz. 1953) (evidence sufficient to survive summary judgment where plaintiff put forward expert testimony that her injury, which was diagnosed after the fall at issue, was “caused by a fall or some injury”; there was “no evidence of a prior trauma or injury that could have been the cause”; and plaintiff testified “to extreme pain after the accident and that prior to this fall she had never experienced any pain in and about her left hip”); *Rodrigues*, 661 S.E.2d at 144 (holding that expert testimony “unequivocally stated” that chlorine substantially contributed to plaintiff’s pneumonia but noting that “even if the physician’s testimony here were expressed only in terms of the chlorine being a ‘possible’ cause of [plaintiff’s] injuries, other nonexpert evidence . . . [that] he was in apparent good health, he immediately became ill upon his exposure to the chlorine, which continuously worsened into the pneumonia he suffered when he presented at the emergency room” was sufficient to survive summary judgment.).<sup>28</sup>

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<sup>28</sup> Plaintiffs point to one jurisdiction—Pennsylvania—that has found in medical malpractice cases that expert evidence of an “increased risk of harm” along with evidence that the harm in fact occurred is sufficient to warrant a jury trial. (Dkt. No. 1586 at 33). The Pennsylvania Supreme Court first found such evidence sufficient in a medical malpractice case in *Hamil v. Bashline*, relying on Section 323 of the Restatement of Torts, a.k.a., the Good Samaritan Rule. 392 A.2d 1280, 1286–87 (Pa. 1978); see also *Oxford Presbyterian Church v. Hindman Plumbing, Heating & Air Conditioning*, 35 Pa. D. & C.4th 289, 294 (Pa. Ct. Com. Pl. 1998)

However, for the cases at issue here, Plaintiff have not produced *any* expert evidence at all, not even expert evidence that Lipitor is a possible cause of diabetes. To the extent Plaintiffs attempt to rely on relative risk estimates of Dr. Murphy and Dr. Handshoe, Plaintiffs never disclosed either of these experts as general causation experts, and the Court has excluded the testimony of both in any event.

Furthermore, even if Plaintiffs had such expert testimony, they have not pointed to any probative, non-expert evidence to combine with it. Plaintiffs first state that “the MDL includes numerous patients with no history of diabetes prior to their initial Lipitor exposures.” (Dkt. No. 1586 at 39). This is undoubtedly true. It is impossible that Lipitor would have caused a Plaintiff’s diabetes if she developed the disease prior to ever taking the drug. However, the converse of this statement is not true. Plaintiffs may have developed diabetes after taking Lipitor, after having a grandchild, after tasting creme brulee for the first time, or after she turned

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(“Ever since the case of *Hamil v. Bashline*, 481 Pa. 256, 392 A.2d 1280 (1978), liability has been imposed upon medical care providers under section 323 of the Restatement . . . for failing to take steps which would have prevented injury, thus increasing the ‘risk’ of harm.”). However, “[t]he Pennsylvania Supreme Court limited its holding in *Hamil* to cases where the issue is ‘the adequacy of medical services rendered in a fact situation to which section 323(a) applies, . . . .’” *Gans v. Gray*, 612 F. Supp. 608, 614 (E.D. Pa. 1985). Thus, for *Hamil* to be applicable, a case must “involve circumstances where one party undertook ‘gratuitously or for consideration, to render services to another which he should recognize as necessary for the protection of the other’s person or things.’” *Cooper v. Frankford Health Care Sys., Inc.*, 960 A.2d 134, 146 (Pa. Super. Ct. 2008) (quoting Restatement (Second) of Torts § 323); *see also Gans*, 612 F. Supp. at 614 (“The language of the Restatement indicates that a plaintiff under this section must have suffered a physical injury resulting from the negligent rendition of services, whether gratuitous or contracted for.”); *Ettinger v. Triangle-Pac. Corp.*, 799 A.2d 95, 107 (Pa. Super. Ct. 2002) (upholding trial court’s finding that “[t]he doctrine of increased risk of harm is inapplicable absent the undertaking of a service either gratuitously or for consideration”). While Section 323 is “often applied in medical malpractice suits,” Pennsylvania courts have never invoked the section “in the context of a negligence-based products liability case.” *Lempke v. Gen. Elec. Co.*, No. CIV.A. 11-1237, 2012 WL 94547, at \*4 (W.D. Pa. Jan. 11, 2012). Such cases do not involve the rendition of services directly to a person, and attempting to apply the theory in such a case “stretches Section 323 beyond its plain meaning and beyond the cases decided by the Supreme Court of Pennsylvania.” *Id.* This Court agrees and declines to extend *Hamil* and its progeny to products liability cases such as this one.

65. However, the fact that Plaintiff developed diabetes after these events does allow a reasonable jury to infer causation, without speculation and conjecture. *See Westberry v. Gislaved Gummi AB*, 178 F.3d 257, 264 (4th Cir. 1999) (“[T]he mere fact that two events correspond in time does not mean that the two necessarily are related in any causative fashion.”); *McClain v. Metabolife Int’l, Inc.*, 401 F.3d 1233, 1243 (11th Cir. 2005) (“[S]imply because a person takes drugs and then suffers an injury does not show causation. Drawing such a conclusion from temporal relationships leads to the blunder of the post hoc ergo propter hoc fallacy.”).

“[D]epending on the circumstances, a temporal relationship between exposure to a substance and the onset of a disease or a worsening of symptoms can provide compelling evidence of causation.” *Westberry*, 178 F.3d at 264 (finding expert testimony admissible). Indeed, the examples of immediate onset of symptoms cited above are such examples. *See Bonner v. ISP Techs., Inc.*, 259 F.3d 924, 931 (8th Cir. 2001) (“Under some circumstances, a strong temporal connection is powerful evidence of causation . . . if a person were doused with chemical X and immediately thereafter developed symptom Y, the need for published literature showing a correlation between the two may be lessened”); *Westberry*, 178 F.3d at 265 (temporal relationship compelling where it was “undisputed that inhalation of high levels of talc irritate[d] mucous membranes,” plaintiff “worked in clouds of talc . . . that covered him and his clothes,” and every time the plaintiff stayed out of work, his sinuses improved, whereas every time plaintiff returned to work, they worsened).



But such circumstances are not present here. Plaintiffs here developed diabetes months or years after taking Lipitor and while they had other substantial risk factors for the disease.<sup>29</sup> The Court has already found that the temporal relationship at issue here is insufficient to form the basis of a reliable causation opinion under *Daubert*. (See CMO 55, Dkt. No. 1283 at 20-27). Therefore, it is necessarily insufficient to create an issue of fact as to causation. See *Hollander*, 289 F.3d at 1214 (“We have already ruled that five of the eight categories of evidence on which they rely did not constitute sufficiently reliable grounds under *Daubert* for their experts’ opinions. As a result, these categories of evidence do not raise questions of fact on issues of causation.”). The attenuated temporal relationship at issue here simply leaves a jury to speculate.

### 3. Hayes Law Firm Plaintiffs

These Plaintiffs submitted their Plaintiff Fact Sheets (PFSs) and certain medical records. (Dkt. Nos. 1670, 1682, 1686, 1687, 1688).<sup>30</sup> They contend that (1) they were not diabetic before taking Lipitor, (2) they were diagnosed with diabetes after taking Lipitor, and (3) they did not have certain risk factors. (See Dkt. No. 1670 at 17-39). At oral argument counsel stated this was “the best thing I could come up with, with nonexpert evidence,” that “[t]hey are not diabetic before taking the medication, they took Lipitor and then they became diabetic.” (Dkt. No. 1727 at 24). As explained above, the fact that Plaintiffs took Lipitor and sometime thereafter developed diabetes is not enough to create a genuine issue of material fact as to whether Lipitor did in fact cause their diabetes. *E.g.*, *McClain*, 401 F.3d at 1243. Any finding would be mere

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<sup>29</sup> Every Plaintiff who submitted case-specific evidence in response to Pfizer’s omnibus motion has at least one other, and often multiple other, risk factors for diabetes according to the evidence submitted by her.

<sup>30</sup> The facts listed in Plaintiff’s brief do not always correspond to the information in the PFS, and the facts in the PFSs (such as Plaintiff’s weight) are often contradicted by Plaintiff’s medical records.

speculation by the jury. Therefore, the Court grants summary judgment as to these plaintiffs as well.

#### 4. Douglas & London Plaintiffs

These Plaintiffs did not initially submit any evidence to the Court and simply submitted a separate brief that argued that summary judgment was precluded by:

- (a) their respective health history and conditions as documented in their medical records, pharmacy records and/or other relevant records;
- (b) their respective Plaintiff Fact Sheets (“PFS’s”) that have already been served on Defendants and any and all amendments thereto;
- (c) the general causation evidence identified and discussed in Plaintiffs’ Opposition to Defendants’ Omnibus Motion for Summary Judgment dated July 22, 2016 [Dkt. 1586]; and
- (d) the substantive state law that applies to each D&L Plaintiff’s respective claims.

(Dkt. No. 1689 at 5 (footnotes omitted)). The Court entered a text order stating that these Plaintiffs must file any evidence that they wished to the Court to consider. (Dkt. No. 1695). In response, Plaintiffs literally dumped boxes upon boxes of documents on the Court, with no discernment or suggestion as to which documents they claimed precluded summary judgment. (Dkt. Nos. 1698, 1700, 1701, 1702, 1703, 1704, 1705, 1706). Nevertheless, the Court reviewed these documents as well, almost all of which were completely irrelevant. The Court has found nothing in these records that would create an issue of fact as to causation, and Plaintiffs have pointed to none. Therefore, the Court enters summary judgment as to these Plaintiffs as well.

#### **C. The Court Need Not Suggest Remand**

The PSC and the specific Plaintiffs who responded to CMO 82, complain that the Court has overstepped its role as an MDL court by addressing specific causation. Plaintiffs cite MDL courts that have declined to address “cumbersome, case-specific legal issues.” *In re*

*Phenylpropanolamine Prod. Liab. Litig.*, No. MDL 1407, 2004 WL 2034587, at \*2 (W.D. Wash. Sept. 3, 2004). Certainly if case-specific causation issues are cumbersome, MDL courts have the discretion to suggest remand prior to resolving case-specific issues.<sup>31</sup> See *In re Evergreen Valley Project Litig.*, 435 F. Supp. 923, 924 (J.P.M.L. 1977) (“It is not contemplated that a Section 1407 transferee judge will necessarily complete all pretrial proceedings in all actions transferred and assigned to him by the Panel, but rather that the transferee judge in his discretion will conduct the common pretrial proceedings with respect to the actions and any additional pretrial proceedings as he deems otherwise appropriate.”).

However, it is equally clear that “[a]n MDL transferee judge has authority to dispose of cases on the merits—for example, by ruling on motions for summary judgment.” Manual for Complex Litigation, § 22.36 (4th ed. 2004); accord *In re Temporomandibular Joint (TMJ) Implants Prods. Liab. Litig.*, 113 F.3d 484, 1488 (8th Cir. 1997) (holding that “transferee court in federal multidistrict proceedings has the authority to enter dispositive orders terminating cases consolidated under 28 U.S.C. § 1407” and affirming summary judgment); see also *In re Food Lion, Inc., Fair Labor Standards Act Effective Scheduling Litig.*, 73 F.3d 528, 532 (4th Cir. 1996) (“In practice, however, the vast majority of transferred cases are disposed of completely in the transferee court, either through pretrial dispositions such as summary judgment, or by trial.”); *In re Norplant Contraceptive Prod. Litig.*, 165 F.3d 374, 376 (5th Cir. 1999) (affirming MDL

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<sup>31</sup> This decision is in the court’s discretion. Some MDL courts have chosen to address case specific causation issues with regard to motions for summary judgment and suggest remand only after a case has survived a motion for summary judgment. In *In re: Asbestos Products Liability Litigation (No. VI)*, MDL No. 875, the MDL court has addressed at least 791 separate motions for summary judgment in individual cases from a variety of jurisdictions. (See <http://www.paed.uscourts.gov/documents/MDL/MDL875/MASTER%20Robreno%20MDL-875%20Decisions%20Chart%20-%20Updated%2011-6-15.xls>).

court's entry of summary judgment based on the learned intermediary doctrine—a state law doctrine).

As the United States Supreme Court recently noted in a unanimous decision, “Congress anticipated that, during the pendency of pretrial proceedings, final decisions might be rendered in one or more of the actions consolidated pursuant to § 1407,” by specifying that “‘at or before the conclusion of ... pretrial proceedings,’ each of the transferred actions must be remanded to the originating district ‘*unless [the action] shall have been previously terminated.*’” *Gelboim v. Bank of Am. Corp.*, 135 S. Ct. 897, 904 (2015) (quoting 28 U.S.C. § 1407(a)) (emphasis in original). *Lexecon*'s holding that Section 1407 requires transfer back to the original court when “pretrial proceedings have run their course,” *Lexecon Inc. v. Milberg Weiss Bershad Hynes & Lerach*, 523 U.S. 26, 34 (1998), does not limit the ability of an MDL court to conduct pretrial proceedings, including ruling on dispositive motions, before suggesting remand.


In considering whether the Court should rule on such motions prior to transfer, the Court considers the “aims” of Section 1407 to “eliminate duplication in discovery, avoid conflicting rulings and schedules, reduce litigation cost, and save the time and effort of the parties, the attorneys, the witnesses, and the courts.” *Gelboim*, 135 S. Ct. at 903 (quoting Manual for Complex Litigation § 20.131, p. 220 (4th ed. 2004)). Ruling on an omnibus motion for summary judgment that involve issues common to all cases, such as whether a claim can survive summary judgment without expert testimony on specific causation, “will promote the just and efficient conduct” of these actions and, thus, is the type of “coordinated or consolidated pretrial proceedings” envisioned by Section 1407. *See* Manual for Complex Litigation § 22.36 (4th ed. 2004) (“If the summary judgment motions involve issues common to all the cases centralized before the MDL court, . . . the transferee judge may be in the best position to rule.”); *see also In*

*re Activated Carbon-Based Hunting Clothing Mktg. & Sales Practices Litig.*, 840 F. Supp. 2d 1193, 1198 (D. Minn. 2012) (“Generally speaking, whether to remand ‘turns on ... whether the case will benefit from further coordinated proceedings as part of the MDL.’”) (quoting *In re Air Crash Disaster at Tenerife, Canary Islands*, 461 F.Supp. 671, 672-73 (J.P.M.L.1978)). In this case, where no Plaintiff claims that she can produce an expert on specific causation that will survive *Daubert* if the Court’s ruling in CMO 55 is correctly decided, it is inefficient, costly, and contrary to the purposes of the statute to suggest remand without ruling on summary judgment. This Court is familiar with the science and issues present and can dispose of the issues far more quickly and efficiently than dozens of courts spread across the country. The Court will have to consider the law of multiple jurisdictions, but it is competent to do so. Therefore, the Court declines Plaintiffs’ invitation to essentially “disregard the entire course of the MDL proceedings” and suggest remand of these cases so Plaintiffs can avoid the writing on the wall. *See In re Zolofit (Sertralinehydrochloride) Prod. Liab. Litig.*, No. 12-MD-2342, 2016 WL 1320799, at \*10 (E.D. Pa. Apr. 5, 2016).

#### **IV. Conclusion**

For the reasons stated above, Defendant’s Omnibus Motion for Summary Judgment, (Dkt. No. 1564), is **GRANTED IN PART**. The Court GRANTS Defendant’s motion as to Plaintiffs’ claims listed in Appendix 1, and these claims are **DISMISSED WITH PREJUDICE**.

**AND IT IS SO ORDERED.**




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Richard Mark Gergel  
United States District Court Judge

January 3, 2017  
Charleston, South Carolina

# Appendix 1

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Knight	Bonnie	0:13-cv-01375	10, 20	10, 20	Agree
Johnson	Virgie	0:13-cv-03054	10	10	Agree
Jones	Marguerite W.	1:13-cv-01786	40	40	Agree
Hammond	Daisy	1:13-cv-02765-RMG	40	40	Agree
Kane	Gina (Waltraud)	2:13-cv-01012-RMG	10, 20	10, 20	Agree
Turner	Susan Marie	2:13-cv-01108	40	40	Agree
Clark	Margaret	2:13-cv-01164	10	10	Agree
Jones	Joyce	2:13-cv-01785	40	40	Agree
Gadsden	Waltina	2:13-cv-01921	10mg; 20mg	10mg; 20mg	Agree
Dantzler	Saradell (Saradelle)	2:13-cv-02766	10, 20	10, 20	Agree
Veronee	Connie	2:14-cv-00052	10mg	10mg	Agree
Guillory	Jennie	2:14-cv-00461-RMG	10, 20	10, 20	Agree
Davis	Kathleen	2:14-cv-00462-RMG	10, 40	10, 40	Agree
Padilla	Maria Rosa	2:14-cv-00463	Alleges Pre-existing Diabetes then 40, 80	Alleges Pre-existing Diabetes then 40, 80	Agree Plaintiff Alleges Pre-existing Diabetes;
Caston	Pamela (Estate of)	2:14-cv-00465	20	20	Agree
Strader	Diane	2:14-cv-00469	10	10	Agree
Peevy	Martha	2:14-cv-00470-RMG	20	20	Agree
Allen	Ethel	2:14-cv-00471	20	20	Agree
Pauley	Betty	2:14-cv-00473-RMG	40	40	Agree
Shivers	Alice F.	2:14-cv-00474-RMG	10, 20	10, 20	Agree
MATTHEWS	PEARL	2:14-CV-00475-RMG	10, 20	10, 20	Agree
Calamese	Ruthie M.	2:14-cv-00476-RMG	10, 20	10, 20	Agree
Lewis	Gwendolyn (Estate of)	2:14-cv-00477-RMG	10, 20	10, 20	Agree
Holbrook	Joyce	2:14-cv-00478-RMG	40	40	Agree
Murphy	Michele	2:14-cv-00479	20	20	Agree
Lumar	Jessie	2:14-cv-00481-RMG	10	10	Agree
Miller	Ruby	2:14-cv-00486-RMG	10	10	Agree
Olson	Josette	2:14-cv-00487-RMG	10	10	Agree
Tipton	Jeannie	2:14-cv-00490-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Johnson	Faith	2:14-cv-00492	40	40	Agree
Jefferson	Kimberley	2:14-cv-00494-RMG	20	20	Agree
House	Earlene	2:14-cv-00496-RMG	10, 20, 40	10, 20, 40	Agree
Diaz	Feliza	2:14-cv-00497-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Hines	Kimberly	2:14-cv-00502	10	10	Agree
Isom	Aubrey	2:14-cv-00504-RMG	40	40	Agree
Conner	Rhonda	2:14-cv-00505	10	10	Agree
Butler	Gladys	2:14-cv-00514	20	20	Agree
Ehlers	Carla	2:14-cv-00516	10, 20	10, 20	Agree
Gremillion	Alberta	2:14-cv-00519-RMG	10, 20, 40	10, 20, 40	Agree
Christopher	Dianne	2:14-cv-00521	20,40	20,40	Agree
Smith	Vera	2:14-cv-00522	40	40	Agree
Morales	Christine	2:14-cv-00524-RMG	40	40	Agree
McCraw	Shirley	2:14-cv-00532	10	10	Agree
Pryor	Joyce	2:14-cv-00533	10	10	Agree
Euyoque	Celina	2:14-cv-00553	10, 20, 40	10, 20, 40	Agree
Smith	Janie	2:14-cv-00554	10, 20	10, 20	Agree
Feather	Helen M.	2:14-cv-00558	20	20	Agree
Streetman	Juanita	2:14-cv-00561	10	10	Agree
Knutson	Mary	2:14-cv-00564	40mg	40mg	Agree
Baker	Kristie W.	2:14-cv-00565	40	40	Agree
Hatton	Gloria	2:14-cv-00566-RMG	10, 20	10, 20	Agree
Lopez	Linda	2:14-cv-00567	20, 40	20, 40	Agree
Lowe	Faustine	2:14-cv-00568-RMG	40	40	Agree
Conger	Carole	2:14-cv-00570	20, 40	20, 40	Agree
Hernandez-Lopez	Elizabeth	2:14-cv-00571-RMG	10	10	Agree
Jones	Cliffy	2:14-cv-00572-RMG	20	20	Agree
Petersen	Mary	2:14-cv-00573	10mg	10mg	Agree
Rhoades	Nancy	2:14-cv-00580-RMG	20	20	Agree
Brooks	Thelma	2:14-cv-00581-RMG	20	20	Agree
Morgan	Lillian	2:14-cv-00582	20, 40	20, 40	Agree
Drains	Beatrice	2:14-cv-00583	10	10	Agree
Tull	Carolyn	2:14-cv-00584	10, 40	10, 40	Agree
Kearnes	Charlotte	2:14-cv-00585	20mg	20mg	Agree
Day	Zerita	2:14-cv-00586-RMG	10	10	Agree
Hilbert	Colleen	2:14-cv-00587	20, 40	20, 40	Agree
Graham	Nancy	2:14-cv-00588	20, 40	20, 40	Agree
Jones	Judy	2:14-cv-00589	10	10	Agree
Howard	Wanda	2:14-cv-00590	40mg	40mg	Agree
Sloan	Marguerite	2:14-cv-00591	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Berry	Bonita	2:14-cv-00592-RMG	10	10	Agree
Garrett	Rebecca	2:14-cv-00593	20	20	Agree
Parsons	Mary	2:14-cv-00595	10mg; 20mg	10mg; 20mg	Agree
Triplett	Jessie	2:14-cv-00596	10	10	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Dubuisson	Susan	2:14-cv-00597-RMG	10, 20, 40	10, 20, 40	Agree
Strattan	Sandra	2:14-cv-00598	10mg	10mg	Agree
Moore	Edna	2:14-cv-00599	20mg	20mg	Agree
Cole	Annette	2:14-cv-00600	10,20	10, 20	Agree
Magee	Mary	2:14-cv-00601-RMG	10, 20	10, 20	Agree
Burrow	Edna	2:14-cv-00603	40	40	Agree
Compton	Cherie	2:14-cv-00604	10mg	10mg	Agree
Baldwin	Seona	2:14-cv-00605-RMG	10, 20	10, 20	Agree
Berkheiser	Melody	2:14-cv-00606-RMG	20	20	Agree
Baugh	Marlon A.	2:14-cv-00607	10, 20	10, 20	Agree
Williams	Ruth	2:14-cv-00609-RMG	10	10	Agree
Bossart	Norma	2:14-cv-00610-RMG	20	20	Agree
Brown	Shirley	2:14-cv-00612-RMG	10, 20, 40	10, 20, 40	Agree
McLeod	Vallinda	2:14-cv-00615	20, 40	20, 40	Agree
Hollandsworth	Sharon	2:14-cv-00616	20mg	20mg	Agree*
Chatman	Peggy	2:14-cv-00617-RMG	10	10	Agree
Bennett	Marilyn	2:14-cv-00626	20	20	Agree
Wentz	Constance	2:14-cv-00627	10, 20	10, 20	Agree
Buckley	Katie	2:14-cv-00629	10,20	10,20	Agree
Renner	Yvonitha Gail	2:14-cv-00633	10	10	Agree
Smith	Brenda J.	2:14-cv-00634-RMG	10	10	Agree
Stephens	Annie	2:14-CV-00635	10	10	Agree
Plume	Marite	2:14-cv-00636-RMG	10, 20, 40	10, 20, 40	Agree
Fields	Brenda	2:14-cv-00637-RMG	10	10	Agree
Cawfield	Deborah	2:14-cv-00638	10mg; 40mg	10mg; 40mg	Agree
Rincon	Estela	2:14-cv-00641-RMG	10	10	Agree
Corner	Cassandra	2:14-cv-00642-RMG	10	10	Agree
Lastoria	Barbara	2:14-cv-00653-RMG	10, 20, 40	10, 20, 40	Agree
Jones	Rene J.	2:14-cv-00654	20	20	Agree
Drusbasky	Martha	2:14-cv-00655	40mg	40mg	Agree
Bryant	De'Borah	2:14-cv-00656	20	20	Agree
Pitchford	Georgia	2:14-cv-00657-RMG	40	40	Agree
Chadwick	Catherine L.	2:14-cv-00660	10	10	Agree
Feemster	Sharon	2:14-cv-00661	20, 40	20, 40	Agree
Grass	Sandra	2:14-cv-00662-RMG	10, 20	10, 20	Agree
Jackson	Yevone	2:14-cv-00663-RMG	10, 20	10, 20	Agree
Shurley	Nancy	2:14-cv-00664	20mg	20mg	Agree
Hockensmith	Louise	2:14-cv-00675-RMG	10	10	Agree
Karolak	Jane (Estate of)	2:14-cv-00676	20	20	Agree
Mathis	Rosie	2:14-cv-00678-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
DiCenzi	Patricia	2:14-cv-00680	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Hawkins	Mary	2:14-cv-00681	20	20	Agree
Van Deusen	Margaret Ann	2:14-cv-00683	10, 20, 40	10, 20, 40	Agree
Jenkins	Michelle	2:14-cv-00685-RMG	20	20	Agree
Gipson	Rosemary	2:14-cv-00686-rmg	20	20	Agree
Amolsch	Patricia	2:14-cv-00687	20	20	Agree
Bellon	Martha	2:14-cv-00688	20mg; 40mg	20mg; 40mg	Agree
Lee	Carol	2:14-cv-00689-RMG	20	20	Agree
Baker	Sandra	2:14-cv-00690	10	10	Agree
Henderson	Lois	2:14-cv-00691	10, 40	10, 40	Agree
Woods	Linda	2:14-cv-00692	40	40	Agree
Kimbrough	Marilyn	2:14-cv-00697-RMG	20, 40	20, 40	Agree
Starnes	Martha C.	2:14-cv-00698-RMG	10, 20	10, 20	Agree
Carreker	Doris	2:14-cv-00700-RMG	20	20	Agree
Chance	Patricia	2:14-cv-00702-RMG	40	40	Agree
Story	Royce	2:14-cv-00703-RMG	10, 20	10, 20	Agree*
Smith	Denise	2:14-cv-00711-RMG	40	40	Agree
Holman	Christine	2:14-cv-00713-RMG	10, 20	10, 20	Agree
Krone	Janice	2:14-cv-00716	10mg	10mg	Agree
Maisonet	Amina	2:14-cv-00723-RMG	10, 20	10, 20	Agree
Taylor	Anne G.	2:14-cv-00724-RMG	20	20	Agree
Robinson	Jannie Mitchell	2:14-cv-00725-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Jennings	Joyce	2:14-cv-00727-RMG	10	10	Agree
Robinson	Helen	2:14-cv-00730-RMG	10, 20, 40	10, 20, 40	Agree
Griffith-Gills	Jacqueline	2:14-cv-00731	10	10	Agree
Johnson	Sheba B.	2:14-cv-00732	40	40	Agree
Little	Effie	2:14-cv-00733-RMG	10	10	Agree
Grimes	Barbara	2:14-cv-00740-RMG	10	10	Agree
Austin	Bessie	2:14-cv-00753-RMG	40	40	Agree
Baham	Deborah	2:14-cv-00772	10mg; 40mg	10mg; 40mg	Agree
Johnson	Ruth	2:14-cv-00782	10mg	10mg	Agree
Anderson	Judy	2:14-cv-00794-RMG	20	20	Agree
Calvin	Desiree	2:14-cv-00795	40mg; 60mg	40mg; 60mg	Agree*
Crow	Dorothy	2:14-cv-00798	20mg; 40mg	20mg; 40mg	Agree
Banas	Kathleen	2:14-cv-00799	10mg; 20mg	10mg; 20mg	Agree
Smith	Joyce	2:14-cv-00802	20, 40	20, 40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Greenwood	Bettye	2:14-cv-00805-RMG	10	10	Agree
Bates	Vesta M.	2:14-cv-00806	10	10	Agree
Jones	Lelia	2:14-cv-00807-RMG	10	10	Agree
McCall	Mary	2:14-cv-00808	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Smith	Jean	2:14-cv-00809-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Tennant	Dorothy	2:14-cv-00811-RMG	20	20	Agree
Dangerfield	Nancy	2:14-cv-00820-RMG	10, 20	10, 20	Agree
Hicks	Esther	2:14-cv-00821-RMG	40	40	Agree
Zumfelde	Dianne	2:14-cv-00822-RMG	10	10	Agree
Yoder	Celia	2:14-cv-00823-RMG	40	40	Agree
Halfhill	Janet	2:14-cv-00824-RMG	10	10	Agree
Philip	Aleyamma	2:14-cv-00825-RMG	10	10	Agree
Pitts	Sarah	2:14-cv-00827	10	10	Agree
Corrales	Millie	2:14-cv-00828-RMG	20, 40	20, 40	Agree
Kirkland	Mary	2:14-cv-00833-RMG	20	20	Agree
Woltcheck	Yvonne	2:14-cv-00834	10mg	10mg	Agree
Frazier	Reather Ann	2:14-cv-00843-RMG	20	20	Agree
Baker	Surekha	2:14-cv-00844	10	10	Agree
Lott-Person	Sharon	2:14-cv-00845-RMG	20,40	20, 40	Agree
Valenti	Micheline J.	2:14-cv-00846-RMG	60	60	Agree
Jackson	Marsha	2:14-cv-00848	20mg	20mg	Agree
Rumph	Dorothy	2:14-cv-00849-RMG	10	10	Agree
Schulte	Marjorie E.	2:14-cv-00850-RMG	10, 20	10, 20	Agree
Williams	Karlene	2:14-cv-00851	40	40	Agree
Cook	Cindy	2:14-cv-00852-RMG	10	10	Plaintiffs Advised They Will Dismiss with Prejudice
Heesen	Cheryl	2:14-cv-00853-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Manning	Johnette	2:14-cv-00854-RMG	10	10	Plaintiffs Advised They Will Dismiss with Prejudice
Wingett	Denise	2:14-cv-00856-RMG	10	10	Agree
Gonzalez	Barbara	2:14-cv-00857	10	10	Agree
Davis	Deeana	2:14-cv-00861	10mg	10mg	Agree*
Hunt-Harkin	Roseanne	2:14-cv-00864-RMG	10, 20, 40	10, 20, 40	Agree
Walsh	Diane	2:14-cv-00872	20	20	Agree
Gordon	Bonnie	2:14-cv-00879	10mg	10mg	Agree
Giusto	Sandra	2:14-cv-00880	10, 20	10, 20	Agree
Davis	Jennie M.	2:14-cv-00881	10	10	Agree
Reynolds	Etta	2:14-cv-00882	40	40	Agree
Whitener	Melinda	2:14-cv-00883	20mg	20mg	Agree
Saddler	Sharon	2:14-cv-00884	10mg	10mg	Agree
Delseno	Judith	2:14-cv-00886	10mg	10mg	Agree
Gossett	Ella	2:14-cv-00899-RMG	10, 20	10, 20	Agree
Shepherd	June	2:14-cv-00900-RMG	20	20	Agree
Bedi	Manjeekaur	2:14-cv-00904	10mg; 20mg	10mg; 20mg	Agree
Parris	Betty	2:14-cv-00908	10	10	Agree
Bailey	Tamala G.	2:14-cv-00909	10	10	Agree
Wyks	Pamela	2:14-cv-00910	10mg; 20mg	10mg; 20mg	Agree
Jordan	Jean	2:14-cv-00912	20	20	Agree
Phan	Kim Ren	2:14-cv-00913	40	40	Agree
Chandler	Olivene	2:14-cv-00914	10	10	Agree
Unger	Alice	2:14-cv-00915	10	10	Agree
Pham	Nghiep	2:14-cv-00916	10	10	Agree
Nguyen	Phung Thi	2:14-cv-00917	20	20	Agree
Williams	Patricia A.	2:14-cv-00919-RMG	10	10	Agree
Kaplan	Susan	2:14-cv-00920	20	20	Agree
Nguyen	Chinh	2:14-cv-00922	20	20	Agree
Hudson	Otelia	2:14-cv-00933	40	40	Agree
Zdunek	Lynn	2:14-cv-00935-RMG	10, 40	10, 40	Agree
Grubb	Linda	2:14-cv-00937	20mg	20mg	Agree
Schrader	Sally	2:14-cv-00938-RMG	20	20	Agree
DiCicco	Maria	2:14-cv-00939	5, 10, 20	5, 10, 20	Agree
Dotson	Donna F.	2:14-cv-00940-RMG	10	10	Agree
Sledz	Alice	2:14-cv-00941-RMG	10	10	Agree
Wood	Crystal	2:14-cv-00953	40	40	Agree
Lutvi	Zelije	2:14-cv-00955-RMG	10, 20	10, 20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Pritchard	Bernice	2:14-cv-00956-RMG	20, 40	20, 40	Agree
Gaiton	Kim	2:14-cv-00962	10mg	10mg	Agree
Larimer	Rebecca	2:14-cv-00963	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Maloney	Carla	2:14-cv-00964	20mg	20mg	Agree
Rayford	Kim	2:14-cv-00965	20mg; 40mg	20mg; 40mg	Agree
Trujillo	Yukimi	2:14-cv-00966	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Barker	Sue	2:14-cv-00976	20mg	20mg	Agree
Catlin	Averdella	2:14-cv-00977	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Anderson	Beverly	2:14-cv-00978	10mg	10mg	Agree
Culbreth	Jacqueline	2:14-cv-00980	40mg	40mg	Agree
Dawson	Elaine	2:14-cv-00982	10mg; 20mg	10mg; 20mg	Agree
Brucciani	Paula	2:14-cv-00983	20mg	20mg	Agree
Sheneman	Patsy	2:14-cv-00985	10mg; 20mg	10mg; 20mg	Agree
Drew	Cynthia	2:14-cv-00988	40mg	40mg	Agree
Cravens	Marque	2:14-cv-00990	40mg	40mg	Agree
Montoya	Pamela	2:14-cv-00992	40mg	40mg	Agree*
Fowler	Kathy	2:14-cv-00997	10mg	10mg	Agree
Jackson	Marina	2:14-cv-00999	40mg	40mg	Agree
Joyce	Mitchelle	2:14-cv-01001	20mg; 40mg	20mg; 40mg	Agree
Bishop	Virginia	2:14-cv-01002	10mg; 20mg	10mg; 20mg	Agree
Orrell	Rosalie	2:14-cv-01003	10mg; 20mg	10mg; 20mg	Agree
Lumley	Barbara	2:14-cv-01004	20mg	20mg	Agree
Fillmore	Wanda	2:14-cv-01007	40mg	40mg	Agree*
Wyrick	Pamela	2:14-cv-01010-RMG	10	10	Agree
Hamilton	Ella	2:14-cv-01011	20	20	Agree
Beems	Alice	2:14-cv-01012	20mg	20mg	Agree
Firmin	Rosemary	2:14-cv-01013	20, 40	20, 40	Agree
Hammerschmidt	Nora	2:14-cv-01014	20mg	20mg	Agree
Lemaire	Rebecca	2:14-cv-01015	10mg	10mg	Agree
Stoneking	Carolyn	2:14-cv-01017	20	20	Agree
Sayre	Cheryl	2:14-cv-01018	20	20	Agree
Good-Montgomery	Nancy	2:14-cv-01019-RMG	10	10	Agree
Wright	Melva	2:14-cv-01020	20	20	Agree
Given	Virginia Ann	2:14-cv-01021	20	20	Agree
Porter	Dorothy	2:14-cv-01026-RMG	20	20	Agree
Richeson	Joyce	2:14-cv-01027	10	10	Agree
Goodson	Lillian A.	2:14-cv-01028	10, 20	10, 20	Agree
Harris	Bonita	2:14-cv-01031	20mg; 40mg	20mg; 40mg	Agree
Martin	Mary-Lynn	2:14-cv-01034	10mg	10mg	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Dario	Cathy	2:14-cv-01036	10mg	10mg	Agree
Banks	Katie	2:14-cv-01037	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Croom	Janet	2:14-cv-01038	10mg	10mg	Agree
Wallace	Lisa	2:14-cv-01043-RMG	10	10	Agree
Bass	Bonnie	2:14-cv-01045-RMG	10, 20, 40	10, 20, 40	Agree
Casanas	Linda	2:14-cv-01051-RMG	20, 40	20, 40	Agree
Calvin	Phyllis	2:14-cv-01054	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges pre-existing Diabetes; Reserves Rights
Spivey	Francese	2:14-cv-01071	40	40	Agree
Castillo	Manuela	2:14-cv-01072	20mg	20mg	Agree
Turpin	Kathy	2:14-cv-01074	10mg; 20mg	10mg; 20mg	Agree
Froug	Mona	2:14-cv-01077	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Fountain	Patricia	2:14-cv-01085	10mg	10mg	Agree
Lawton	Diane	2:14-cv-01086	10mg	10mg	Agree
Trueluck-Hardin	Alberta	2:14-cv-01087	20mg	20mg	Agree
Pace	Peggy	2:14-cv-01088-RMG	20	20	Agree
Means	Sharon	2:14-cv-01121	10mg	10mg	Agree
Alker	Cheryl	2:14-cv-01122	20mg	20mg	Agree
Moffett	Louise	2:14-cv-01123	10mg; 20mg	10mg; 20mg	Agree
Brown-Freddie	Loretta	2:14-cv-01125	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Cook	Marie	2:14-cv-01128	20	20	Agree
Rabak	Georgetta	2:14-cv-01129-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Waller	Debra	2:14-cv-01130-RMG	20	20	Agree
Carter	Gardeen	2:14-cv-01131-RMG	20	20	Agree
Kimbrough	Charlene	2:14-cv-01168	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Johnson	Janet	2:14-cv-01233	10, 20, 40	10, 20, 40	Agree*
Hervey	Marlene	2:14-cv-01256-RMG	10	10	Agree
Jenkins	Rutha	2:14-cv-01260	20	20	Agree
Frame	Janelle	2:14-cv-01276-RMG	10	10	Agree
Copen	Edna	2:14-cv-01279-RMG	10	10	Agree
Savley	Nora	2:14-cv-01282-RMG	10	10	Agree
Wills	Ginger	2:14-cv-01283-RMG	40	40	Agree
Fisher	Laura	2:14-cv-01284-RMG	10, 40	10, 40	Agree
Nunn	Leona	2:14-cv-01286	10, 40	10, 40	Agree
Green	Dorothy	2:14-cv-01304-RMG	40	40	Agree
Norfleet	Lorraine	2:14-cv-01309	10, 20	10, 20	Agree
Stack	Wilma	2:14-cv-01321	10, 20	10, 20	Agree
Mack	Stella	2:14-cv-01322-RMG	20	20	Agree
Maldonado	Judy	2:14-cv-01330-RMG	20	20	Agree
Andolsek	Susan	2:14-cv-01331	10	10	Agree
Pierce	Brenda	2:14-cv-01334	10	10	Agree
Green	Lonzetta	2:14-cv-01335-RMG	10, 20	10, 20	Agree
Landry	Linda	2:14-cv-01336	10	10	Agree
Moye	Mable	2:14-cv-01337-RMG	20	20	Agree
Rivas	Rosie	2:14-cv-01338	10,40	10,40	Agree
Christy	Irene	2:14-cv-01340	20	20	Agree
Clack	Nadine	2:14-cv-01341-RMG	40	40	Agree
Higginbottom	Pamela	2:14-cv-01342-RMG	10	10	Agree
Dorries	Freda	2:14-cv-01343-RMG	20	20	Agree
Lopez	Ramona	2:14-cv-01345	10, 20	10, 20	Agree
Hart	Priscilla	2:14-cv-01347	10	10	Agree
Tromp	Marianne	2:14-cv-01348	5, 10, 20, 40	5, 10, 20, 40	Agree
Oberding	Gail	2:14-cv-01351	40mg	40mg	Agree
Jackson	Valesca	2:14-cv-01352	20	20	Agree
Wright	Victorine	2:14-cv-01352	10,20,40	10,20,40	Agree
McCulloch	Derita	2:14-cv-01353-RMG	20	20	Agree
Taylor	LaQuisha	2:14-cv-01358-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Burton	Ida Joyce	2:14-cv-01359-RMG	20, 40	20, 40	Agree
Coon	Gloral J.	2:14-cv-01359-RMG	10	10	Agree
Eversen	Florence	2:14-cv-01359-RMG	20	20	Agree
Leraaen	Myra	2:14-cv-01359-RMG	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Moore	Margaret	2:14-cv-01359-RMG	10	10	Agree
Oldewurtel	Pamela	2:14-cv-01359-RMG	20	20	Agree
Perez	Olivia	2:14-cv-01359-RMG	10	10	Agree
Pierzynski	Kathleen	2:14-cv-01359-RMG	10	10	Agree
Tatum	Nancy	2:14-cv-01359-RMG	10	10	Agree
Waddell	Carol A.	2:14-cv-01359-RMG	10	10	Agree
Alderman	Dorothy	2:14-cv-01359-RMG	20	20	Agree
Backes	Vicki	2:14-cv-01359-RMG	40	40	Agree
Blair	Estate of Minnie	2:14-cv-01359-RMG	20, 40	20, 40	Agree
Ellis	Carla	2:14-cv-01359-RMG	10	10	Agree
Hinson	Felicia	2:14-cv-01359-RMG	20	20	Agree
Marks	Gladys	2:14-cv-01359-RMG	10	10	Agree
Miller	Anne	2:14-cv-01359-RMG	10	10	Agree
Miller	Ellen	2:14-cv-01359-RMG	40	40	Agree
Cook	Alice	2:14-cv-01370-RMG	40	40	Agree
Pfau	Roberta Jean	2:14-cv-01377-RMG	10, 20	10, 20	Agree
Martin	Bette	2:14-cv-01378	40	40	Agree
Hernandez	Maria	2:14-cv-01379	20	20	Agree
Thompson	Carole	2:14-cv-01380-RMG	20	20	Agree
Stankos	Judy	2:14-cv-01384-RMG	10	10	Agree
Robertson	Gladys	2:14-cv-01387-RMG	10	10	Agree
Talton	Marty	2:14-cv-01388-RMG	10, 20, 40	10, 20, 40	Agree
Williams-Callaway	Willie Mae	2:14-cv-01390-RMG	20	20	Agree
Allen	Helga	2:14-cv-01391-RMG	10	10	Agree
Yancey	Florela S.	2:14-cv-01392-RMG	20	20	Agree
Bobo	Janice	2:14-cv-01393-RMG	10, 20, 40	10, 20, 40	Agree
Anderson	Karen M.	2:14-cv-01394-RMG	20, 40	20, 40	Agree
Rivera	Edna M.	2:14-cv-01395-RMG	10, 40	10, 40	Agree
Bertram	Pamela	2:14-cv-01396-RMG	10, 20	10, 20	Agree
Black	Joyce E.	2:14-cv-01397-RMG	10, 20, 40	10, 20, 40	Agree
Bowens	Vickie L.	2:14-cv-01398-RMG	20	20	Agree
DelRio	Herminia	2:14-cv-01402-RMG	10, 20	10, 20	Agree
Cox	Marline	2:14-cv-01403-RMG	40	40	Agree
Fenex	Patricia	2:14-cv-01405-RMG	40	40	Agree
Gonzales	Treva	2:14-cv-01406-RMG	40	40	Agree
Orr	Marjorie	2:14-cv-01407	10	10	Agree
Duffey	Jo Ann	2:14-cv-01408-RMG	10	10	Agree
Thompson	Ella	2:14-cv-01412-RMG	20	20	Agree
Harris	Louise	2:14-cv-01413-RMG	10, 20	10, 20	Agree
Ames	Katherine P.	2:14-cv-01415-RMG	20, 40	20, 40	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Ellis-Johnson	Joyce	2:14-cv-01418	10	10	Agree
Arnold	Bonnie	2:14-cv-01419-RMG	10	10	Agree
Jones	Dianna	2:14-cv-01420-RMG	20	20	Agree
Baker	Evelyn D.	2:14-cv-01421-RMG	20	20	Agree
Whitley	Leila	2:14-cv-01422-RMG	10, 40	10, 40	Agree
Barrera	Manuela	2:14-cv-01423-RMG	20	20	Agree
Arnold	Pamela J.	2:14-cv-01425-RMG	10	10	Agree
Behnfield	Deborah S.	2:14-cv-01428-RMG	20	20	Agree
Cleland	Rita	2:14-cv-01430-RMG	40	40	Agree
Rockel	Doris	2:14-cv-01431	10	10	Agree
Berstrom	Jeri	2:14-cv-01432-RMG	20, 40	20, 40	Agree
Federico	Rita	2:14-cv-01434-RMG	20	20	Agree
Gallagher	Verna M.	2:14-cv-01435-RMG	20	20	Agree
Fowler	Carol	2:14-cv-01436-RMG	20, 40	20, 40	Agree
Stephens	Patricia	2:14-cv-01438-RMG	40	40	Agree
Traylor	Patricia	2:14-cv-01439-RMG	10, 20	10, 20	Agree
Gallegos	Lucy L.	2:14-cv-01442-RMG	20	20	Agree
Gomez	Renate	2:14-cv-01444-RMG	40	40	Agree
Waring	Rebecca Hyon	2:14-cv-01445-RMG	10, 20	10, 20	Agree
Waters	Cheryl	2:14-cv-01446-RMG	20, 40	20, 40	Agree
Watts	Herminigilda	2:14-cv-01447-RMG	40	40	Agree
Gougler	Leila	2:14-cv-01448-RMG	10	10	Agree
Wedin	Sundie	2:14-cv-01449-RMG	10	10	Agree
Wilhite	Adrienne	2:14-cv-01450-RMG	40	40	Agree
Wilson-Clark	Cynthia	2:14-cv-01451-RMG	10, 20	10, 20	Agree
Blankenship	Esther	2:14-cv-01452-RMG	20	20	Agree
Hernandez	Christine	2:14-cv-01453-RMG	20, 40	20, 40	Agree
Gray	Edith A.	2:14-cv-01455-RMG	20	20	Agree
Hand	Yvette C.	2:14-cv-01458-RMG	40	40	Agree
King	Linda	2:14-cv-01459-RMG	40	40	Agree
Krakowski	Leah	2:14-cv-01460-RMG	40	40	Agree
Howell	Sharon	2:14-cv-01461-RMG	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Righs
McLaughlin	Jean M.	2:14-cv-01462-RMG	10, 20	10, 20	Agree
Crowley	Rena	2:14-cv-01463-RMG	10	10	Agree
Flake	Peggy A.	2:14-cv-01465-RMG	20	20	Agree
Jungles	Melanie L.	2:14-cv-01467-RMG	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Norris	Marilyn D.	2:14-cv-01468-RMG	20	20	Agree
Martinez	Vivian	2:14-cv-01470-RMG	10	10	Agree
Horton	Wilma	2:14-cv-01471-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Gramm	Grace	2:14-cv-01472-RMG	20	20	Agree
Lucero	Elvira L.	2:14-cv-01473-RMG	20	20	Agree
Marshall-Coray	Susan	2:14-cv-01474-RMG	10	10	Agree
Harrison Rupp	Gertrude Ann	2:14-cv-01475-RMG	40	40	Agree
Craven	Diana L.	2:14-cv-01476-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Jones	Shirley	2:14-cv-01478-RMG	20	20	Agree
Hernandez	Rita	2:14-cv-01479-RMG	40	40	Agree
Duran	Lillian M.	2:14-cv-01480-RMG	20	20	Agree
Nicolau	Alice J.	2:14-cv-01481-RMG	40	40	Agree
Gaccetta	Carol M.	2:14-cv-01483-RMG	40	40	Agree
Tolhurst	Linda	2:14-cv-01484-RMG	20, 40	20, 40	Agree
Pigford	Jane	2:14-cv-01485-RMG	10	10	Agree
Ristoff	Joan	2:14-cv-01487-RMG	10, 20	10, 20	Agree
Olivas	Nancy	2:14-cv-01489-RMG	10	10	Agree
Wait	Sandra	2:14-cv-01490-RMG	40	40	Agree
Pollok	Christine R.	2:14-cv-01491-RMG	10, 20	10, 20	Agree
Quillin	Barbara	2:14-cv-01492-RMG	10	10	Agree
Victorian	Patricia	2:14-cv-01493-RMG	40	40	Agree*
Reyes	Delfina	2:14-cv-01494-RMG	40	40	Agree
Sailas	Barbara M.	2:14-cv-01496-RMG	40	40	Agree
Packwood	Deborah	2:14-cv-01497-RMG	10, 40	10, 40	Agree*
Sambrano	Maryann	2:14-cv-01498-RMG	10	10	Agree
Altaro	Kathleen	2:14-cv-01499-RMG	10	10	Agree
Amadon	Sharon	2:14-cv-01499-RMG	10, 20	10, 20	Agree
Ammons	Johnnie	2:14-cv-01499-RMG	10	10	Agree
Aronson	Judie	2:14-cv-01499-RMG	10	10	Agree
Bagley	Shelia	2:14-cv-01499-RMG	40	40	Agree
Barrett	Linda	2:14-cv-01499-RMG	10	10	Agree
Bethune	Glenda	2:14-cv-01499-RMG	10, 20, 40	10, 20, 40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Bishop	Virginia	2:14-cv-01499-RMG	10	10	Agree
Bray-McDole	Debra J.	2:14-cv-01499-RMG	40	40	Agree
Bruce	Sylvia	2:14-cv-01499-RMG	20	20	Agree
Castaneda	Maria	2:14-cv-01499-RMG	40	40	Agree
Charleville	Patsy	2:14-cv-01499-RMG	10	10	Agree
Corallo	Joanne	2:14-cv-01499-RMG	10	10	Agree
Day	Betty	2:14-cv-01499-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Dixon	Martha	2:14-cv-01499-RMG	20	20	Agree
Franks	Shirley	2:14-cv-01499-RMG	20	20	Agree
Friedland	Dorothy	2:14-cv-01499-RMG	20	20	Agree
Galbraith	Betty	2:14-cv-01499-RMG	40	40	Agree
Gravitte	Retha	2:14-cv-01499-RMG	10	10	Agree
Hendrix	Mary	2:14-cv-01499-RMG	40	40	Agree
Joyce	Lois A.	2:14-cv-01499-RMG	20	20	Agree
Lowery	Peggy	2:14-cv-01499-RMG	40	40	Agree
McDonald	Skye	2:14-cv-01499-RMG	20	20	Agree
McKelvey	Dianna	2:14-cv-01499-RMG	20	20	Agree
Pitkin	Judy	2:14-cv-01499-RMG	10	10	Agree*
Banks	Nancy	2:14-cv-01500-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Bennett	Margaret	2:14-cv-01500-RMG	10	10	Agree
Diaz	Providencia	2:14-cv-01500-RMG	10	10	Agree
Fuchs	Ellen	2:14-cv-01500-RMG	10, 20, 40	10, 20, 40	Agree
Garcia	Magdalena	2:14-cv-01500-RMG	20	20	Agree
Giddings	Paulene	2:14-cv-01500-RMG	10	10	Agree
Gunawan	Fenny	2:14-cv-01500-RMG	20	20	Agree
Harris	Earlene	2:14-cv-01500-RMG	20	20	Agree
Lee	Marietta	2:14-cv-01500-RMG	20	20	Agree
Lester	Patricia	2:14-cv-01500-RMG	40	40	Agree
Martinez	Olga	2:14-cv-01500-RMG	10	10	Agree
McGee	Shirley	2:14-cv-01500-RMG	10	10	Agree
Nelson	Victoria	2:14-cv-01500-RMG	10	10	Agree
Orsello	Jean	2:14-cv-01500-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Pitak	Florence	2:14-cv-01500-RMG	10	10	Agree
Schiffman	Edith (deceased)	2:14-cv-01500-RMG	20	20	Agree
Steele	Pauline	2:14-cv-01500-RMG	20	20	Agree
Sterback	Lucille E. (deceased)	2:14-cv-01500-RMG	10	10	Agree
Street	Zeffar	2:14-cv-01500-RMG	10	10	Agree
Sukhoo	Binwattie	2:14-cv-01500-RMG	10	10	Agree
Summers	Sandra	2:14-cv-01500-RMG	20	20	Agree
Tagle	Maria Elena	2:14-cv-01500-RMG	10, 40	10, 40	Agree
Traylor	Fannie	2:14-cv-01500-RMG	20	20	Agree
Trolman	Hillary	2:14-cv-01500-RMG	40	40	Agree
Tukes	Margaret Lee	2:14-cv-01500-RMG	20	20	Agree
Turk	Eloise O.	2:14-cv-01500-RMG	20	20	Agree
Walker	Theresa W.	2:14-cv-01500-RMG	20	20	Agree
Ward	Carnelia K.	2:14-cv-01500-RMG	20	20	Agree*
Washington	Oheila	2:14-cv-01500-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Wehling	Helen J.	2:14-cv-01500-RMG	40	40	Agree
Whitehead	Dorothy	2:14-cv-01500-RMG	10	10	Agree
Wilder	Robbie Nell	2:14-cv-01500-RMG	10	10	Agree
Willis	Teresa T.	2:14-cv-01500-RMG	10	10	Agree
Wilson	Karen Ann	2:14-cv-01500-RMG	80	20	Agree
Young	Shirley A.	2:14-cv-01500-RMG	10	10	Agree
Case	Brenda	2:14-cv-01501	10, 20	10, 20	Agree
Walker	Eloise	2:14-cv-01501	10	10	Agree
Rawdon	Elizabeth	2:14-cv-01502-RMG	20	20	Agree
Martin	Jean	2:14-cv-01503-RMG	10, 20	10, 20	Agree
Romero	Debra Leann	2:14-cv-01504-RMG	10	10	Agree
Tinius	Mary L.	2:14-cv-01505-RMG	20	20	Agree
Souturas	Rosemary	2:14-cv-01508-RMG	10, 20	10, 20	Agree
Ross	Debra	2:14-cv-01509-RMG	10	10	Agree
Routt	Beverly J.	2:14-cv-01511-RMG	10	10	Agree
Smiley	Beverly	2:14-cv-01512-RMG	10, 20	10, 20	Agree
Stone	Lois W.	2:14-cv-01513-RMG	20	20	Agree
Lesker	Brandy	2:14-cv-01514-RMG	20	20	Agree
Ridder	Viola E.	2:14-cv-01515-RMG	10	10	Agree
Nash	Yvonne	2:14-cv-01516-RMG	40	40	Agree*

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Maes	Marita	2:14-cv-01517-RMG	20	20	Agree
Leon	Martha E.	2:14-cv-01520-RMG	40	40	Agree
Sebben	Coralynne	2:14-cv-01521-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserve Rights
Smith	Lydia M.	2:14-cv-01522-RMG	40	40	Agree
Snyder	Benetta B.	2:14-cv-01526-RMG	20, 40	20, 40	Agree
Spackman	Gillian M.	2:14-cv-01528-RMG	40	40	Agree
Marshall	Gloria Jean	2:14-cv-01529-RMG	20	20	Agree
Coleman	Jackie	2:14-cv-01550-RMG	10	10	Agree
Copeland	Gail	2:14-cv-01551-RMG	40	40	Agree
Cooperstein	Ann	2:14-cv-01554-RMG	10, 20	10, 20	Agree
Neves	Nanette	2:14-cv-01555-RMG	10	10	Agree
Failla	Lynda	2:14-cv-01556-RMG	10, 20, 40	10, 20, 40	Agree
Zappardino	Jennie	2:14-cv-01557-RMG	10	10	Agree
Jackson	Diane	2:14-cv-01558-RMG	40	40	Agree
Pierson	Faith	2:14-cv-01559-RMG	10	10	Agree
Ahladianakis	Argiro	2:14-cv-01560-RMG	20	20	Agree
Demming	Annette	2:14-cv-01561-RMG	20	20	Agree
Kroll	Sharon	2:14-cv-01562-RMG	10, 20	10, 20	Agree
Honoken	Mary	2:14-cv-01563	10	10	Agree
Bryant	Georgia	2:14-cv-01564	20mg; 40mg	20mg; 40mg	Agree
Rumph	Annie	2:14-cv-01570-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Silmon	Charlotte	2:14-cv-01571-RMG	10	10	Agree
Gagante	Merli	2:14-cv-01575	10,20	10,20	Agree
Hammack	Joyce	2:14-cv-01576-RMG	20	20	Agree
Mayavski	Margaret E.	2:14-cv-01581-RMG	20	20	Agree
Payne	Barbara	2:14-cv-01582-RMG	20	20	Agree
Smith	Connie	2:14-cv-01587-RMG	20	20	Agree
Hand	Carolyn	2:14-cv-01590-RMG	20, 40	20., 40	Agree
Finley	Lela	2:14-cv-01591-RMG	10, 20	10, 20	Agree
Brown	Ella	2:14-cv-01592-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Eddy	Barbara	2:14-cv-01594-RMG	20	20	Plaintiffs Advised They Will Dismiss with Prejudice
Gerber	Dorothy	2:14-cv-01595-RMG	10	10	Agree
Bier	Davida	2:14-cv-01596-RMG	10	10	Agree
Kiter	Marty	2:14-cv-01597-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Stage	Sandra	2:14-cv-01598-RMG	10, 20, 40	10, 20, 40	Agree
Martino	Francene	2:14-cv-01599-RMG	20	20	Agree
Georgeson	Lorraine	2:14-cv-01600-RMG	40	40	Agree
Soule	Heather	2:14-cv-01601-RMG	10, 20	10, 20	Agree
Leonard	Kathie	2:14-cv-01604-RMG	20, 40	20, 40	Agree
Katarzynski	Margaret	2:14-cv-01605-RMG	10	10	Agree
Green	Josephine	2:14-cv-01608-RMG	10, 20	10, 20	Agree
Ogline	Virginia	2:14-cv-01609-RMG	20, 40	20, 40	Agree
Watkins	Dorothy	2:14-cv-01611-RMG	20	20	Agree
Lang	Regina	2:14-cv-01612-RMG	10	10	Agree
Murtiff	Margaret	2:14-cv-01613-RMG	20	20	Agree
Bosma	Doris	2:14-cv-01614-RMG	10	10	Agree
Miller	Bonnie	2:14-cv-01617-RMG	20	20	Agree
Tomlin	Marlynn	2:14-cv-01618-RMG	40	40	Agree
Hill	Elizabeth	2:14-cv-01619	40	40	Agree
Cole	Patricia	2:14-cv-01620	40	40	Agree
Zaffuto	Judith	2:14-cv-01624-RMG	20	20	Agree
Evans	Clara	2:14-cv-01625-RMG	20	20	Agree
Mather	Barbara	2:14-cv-01627-RMG	20	20	Agree
Reed	Cheryl	2:14-cv-01628-RMG	10	10	Agree
Balentine	Linda	2:14-cv-01629-RMG	20	20	Agree
Steele	Brenda	2:14-cv-01631-RMG	10	10	Agree
Parks	Pamela	2:14-cv-01632-RMG	10	10	Agree
Diaz	Celia	2:14-cv-01635	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Kelley	Brenda	2:14-cv-01637-RMG	10, 20	10, 20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Roberts	Brenda	2:14-cv-01661	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Acevedo	Yadira D.	2:14-cv-01691	10, 20, 40	10, 20, 40	Agree
Angangan	Dorothy	2:14-cv-01705	20, 40	20, 40	Agree
Blair	Mildred	2:14-cv-01707	10	10	Agree
Capone	Angela	2:14-cv-01708	10	10	Agree
Clements	Nancy S.	2:14-cv-01709	20	20	Agree
Cline	Frances	2:14-cv-01710	10, 20	10, 20	Agree
Elliott	Vivian	2:14-cv-01712	10, 20	10, 20	Agree
Johnson	Barbara	2:14-cv-01713	10, 20	10, 20	Agree
Lisker	Carol	2:14-cv-01714	10	10	Agree
Hubbard	Dinah Kaye	2:14-cv-01715-RMG	20	20	Agree
McCoy	Marieellanna	2:14-cv-01717	20	20	Agree
Stanford	Helen	2:14-cv-01719	10, 40	10, 40	Agree
Thomas	Patricia	2:14-cv-01720	20, 40	20, 40	Agree
Walsh	Janet	2:14-cv-01721	10	10	Agree
Lindsay	Helen	2:14-cv-01722-RMG	20	20	Agree
Newsom	Brenda	2:14-cv-01723-RMG	10, 20	10, 20	Agree
Johnson	Velma	2:14-cv-01724-RMG	10, 40	10, 40	Agree
Harfield	Mary K.	2:14-cv-01726	10, 20, 40	10, 20, 40	Agree
McAuliffe	Linda	2:14-cv-01728	20	20	Agree
McLean	Lola	2:14-cv-01730	10, 20, 40	10, 20, 40	Agree
Roberts	Mary	2:14-cv-01734	10	10	Agree
Winkelman	Kelly	2:14-cv-01737	20	20	Agree
Weiman	Janice	2:14-cv-01738	10	10	Agree
Zwicker	Barbara	2:14-cv-01739	10, 20	10, 20	Agree
Savolt	Jessie	2:14-cv-01740	10	10	Agree
Hughes	Mattie M.	2:14-cv-01741	20	20	Agree
Holmes	Vernestine	2:14-cv-01742	10, 20	10, 20	Agree
Ford	Susan	2:14-cv-01752-RMG	40	40	Agree
Shuster	Arlene	2:14-cv-01753-RMG	10, 20	10, 20	Agree
Wiley	Lori	2:14-cv-01754-RMG	10, 20	10, 20	Agree
Shaw	Sandra J.	2:14-cv-01755-RMG	10	10	Agree
Williams	Kimberli	2:14-cv-01781	10	10	Agree
Whipple	Julia	2:14-cv-01782	40	40	Agree
Thomas	Johmann	2:14-cv-01786	10, 20	10, 20	Agree
Davis	Barbara A.	2:14-cv-01798	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Foerch	Donna	2:14-cv-01813-RMG	40	40	Agree
Allen	Rosezel	2:14-cv-01817-RMG	20	20	Agree
Parker	Dorothy	2:14-cv-01820	10,20,40	10,20,40	Agree
Carter	Beverly	2:14-cv-01821	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Chinn	Kay C.	2:14-cv-01826	20, 40	20, 40	Agree
Wiegard	Judy	2:14-cv-01827	10, 20	10, 20	Agree
Williams	Vivian	2:14-cv-01828	10, 20	10, 20	Agree
Conner	Gielsa	2:14-cv-01847-RMG	10	10	Agree
Jones	Pamela	2:14-cv-01848-RMG	10	10	Agree
Barnes	Gloria	2:14-cv-01850	20, 40	20, 40	Agree
Barnett	Arnesta	2:14-cv-01851	20	20, 40	Agree
Honeycutt	Kathy	2:14-cv-01853	10	10	Agree
Wright	Doris	2:14-cv-01854	10	10	Agree
Dickson	Betty	2:14-cv-01882-RMG	10	10	Agree
Smith	Karen	2:14-cv-01884	10mg; 40mg	10mg; 40mg	Agree
Slaughter	Debra	2:14-cv-01895	10	10	Agree
Evans	Delores	2:14-cv-01899-RMG	20	20	Agree
Jenkins	Cheryl	2:14-cv-01917-RMG	10	10	Agree
Lavender	Olivia	2:14-cv-01923-RMG	10	10	Agree
Nickels	Patty	2:14-cv-01924-RMG	10	10	Agree
Combs	Rosalee	2:14-cv-01926-RMG	Alleges Pre-existing Diabetes then 10	Alleges Pre-existing Diabetes then 10	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Martin	Charlene	2:14-cv-01929-RMG	40	40	Agree
Ayala	Elaine	2:14-cv-01934-RMG	20	20	Agree
LeBlanc	Katherine	2:14-cv-01939	10	10	Agree
Wright	Henrie Joyce	2:14-cv-01940	10	10	Agree
Adams-Dodson	Mary C.	2:14-cv-01941	10	10	Agree
Chavez	Carmen	2:14-cv-01942	20	20	Agree
Cloud	Ruth Ann	2:14-cv-01943	10, 20	10, 20	Agree
Coffey	Barbara J.	2:14-cv-01945	10	10	Agree
Knierien	Christine M.	2:14-cv-01952	10	10	Agree
Cogswell	Sherry M.	2:14-cv-01960	20	20	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Thompson	Suzanne	2:14-cv-01968-RMG	20, 40	20, 40	Agree
Hoover	Mary	2:14-cv-01975-RMG	20, 40	20, 40	Agree
Block	Theresa	2:14-cv-01991	10	10	Agree
Benavides	Josefina	2:14-cv-01998	10,20	10,20	Agree
Glaser	Karen	2:14-cv-02005	40	40	Agree
Pearson	Irene	2:14-cv-02030-RMG	20	20	Agree
Key	Joanne	2:14-cv-02040-RMG	20	20	Agree
Bennett	Gail	2:14-cv-02055-RMG	10	10	Agree
Ackroyd	Carolyn	2:14-cv-02079	40	40	Agree
Brooks	Marcella	2:14-cv-02079	20	20	Agree
Henson	Lydia	2:14-cv-02079	10	10	Agree
Ingram	Levira	2:14-cv-02079	20, 40	20, 40	Agree
Jones	Eletta	2:14-cv-02079	20, 40	20, 40	Agree
Little	Christine	2:14-cv-02079	10, 20	10, 20	Agree
Polley	Norma	2:14-cv-02079	10, 40	10, 40	Agree
Turner	Perita	2:14-cv-02079	10, 20	10, 20	Agree
Warren	Kim	2:14-cv-02079	10, 20, 40	10, 20, 40	Agree
Westbrook	Sandra	2:14-cv-02079	20	20	Agree
Wilkinson	Jennifer	2:14-cv-02079	20	20	Agree
Buggage	Yvonne	2:14-cv-02090-RMG	40	40	Agree
Roundtree	Margaret	2:14-cv-02108-RMG	10, 20	10, 20	Agree
Schweitzer	Joyce	2:14-cv-02109-RMG	40	40	Agree
Gottlieb	Joan	2:14-cv-02111	10mg	10mg	Agree
West	Kimberly	2:14-cv-02112-RMG	20	20	Agree
Bennett	Glenda	2:14-cv-02113-RMG	40	40	Agree
Francis	Linda	2:14-cv-02114-RMG	10	10	Agree
Welch	Carolyn	2:14-cv-02116	10mg	10mg	Agree
Turley	Mildred	2:14-cv-02159-RMG	10, 20	10, 20	Agree
House	Anita A.	2:14-cv-02169-RMG	10,20,40,60	10,20,40,60	Agree
Howes	Elaine D.	2:14-cv-02170-RMG	20	20	Agree
Beckner	Lucy M	2:14-cv-02172-RMG	20	20	Agree
Humphrey	Doris A	2:14-cv-02173-RMG	40	40	Agree
Boudreau	Elizabeth	2:14-cv-02174-RMG	20	20	Agree
Dingle	Elizabeth S.	2:14-cv-02175-RMG	20	20	Agree
Crupie	Barbara S.	2:14-cv-02176-RMG	10	10	Agree
Mallory	Naomi	2:14-cv-02177-RMG	10,20	10,20	Agree
Norris	Karen D.	2:14-cv-02178-RMG	40	40	Agree
Ortega	Domitila	2:14-cv-02180-RMG	20	20	Agree
Methvin	Loretta J	2:14-cv-02181-RMG	10,20	10,20	Agree
Perez	Anita D.	2:14-cv-02182-RMG	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Maga	Lucille	2:14-cv-02190-RMG	20	20	Agree
Cannon	Lucille	2:14-cv-02216-RMG	10, 20	10, 20	Agree
Serrano	Maria	2:14-cv-02217-RMG	20	20	Agree
Cain	Minnie	2:14-cv-02237-RMG	40	40	Agree
Pruitt-Smith	Etta	2:14-cv-02239-RMG	40	40	Agree
Rone	Katherine	2:14-cv-02240-RMG	10, 20	10, 20	Agree
Williams	Marilyn	2:14-cv-02259	10, 20	10, 20	Agree
Beckum	Patty	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Davis	Marilyn	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Fullylove	Rhoda	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Granado	Christine	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Gutierrez	Jesusa	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Hernandez	Rosa	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Johnson	Joann	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Kay	Patricia	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Kiester	Vicki	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Kutach	Nona	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Legg	Elsie	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Mahoney	Eva	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
McCoy	Carolyn	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Mendoza	Susanna	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Moore	Pamela	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Newman	Monica	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Pierson	Lana	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Richardson	Deloise	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Robertson	Deidra	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Ryan	Amporn	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Schulz	Myrtis	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Sindrey	Janet	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Sisney	Georgia	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Starrett	Terry	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Stewart	Vera	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Thompson	Ida	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice
Virden	Kelly	2:14-cv-02272			Plaintiffs Advised They Will Dismiss with Prejudice

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Ellisor	Mary	2:14-cv-02295-RMG	Alleges Pre-existing Diabetes then 80	Alleges Pre-existing Diabetes then 80	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Beasley	Brenda	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Bermudez	Carmen	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Blue	Joyce	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Bockelmann	Patricia	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Colello	Rosa	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Hardman	Rechilda	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Jennings	Janet	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Kinsler	Gloria	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Leonardo	Aura	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Pegram	Gloria	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Rodriguez	Patricia	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Stroud	Sharon	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Thompson	Dorothy	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Townsend	Patricia	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Wonderling	Verna	2:14-cv-02319			Plaintiffs Advised They Will Dismiss with Prejudice
Standifer	Heather	2:14-cv-02338-RMG	20	20	Agree
McDowell	Viveca	2:14-cv-02422	40	40	Agree
Austill	Dorothy	2:14-cv-02432-RMG	40	40	Agree
Shelton	Rosie	2:14-cv-02433-RMG	10	10	Agree
Alldredge	Linda L.	2:14-cv-02447-RMG	10, 20, 40	10, 20, 40	Agree
Edwards	Linda M.	2:14-cv-02449	20	20	Agree
Fontenot	Rosie	2:14-cv-02451-RMG	40	40	Agree
Hoffman	Joan B	2:14-cv-02452-RMG	10	10	Agree
Doyle	Sandra M.	2:14-cv-02453-RMG	10	10	Agree
Howard	Virginia A.	2:14-cv-02454	10	10	Agree
Johnston	Bonnie	2:14-cv-02455-RMG	10	10	Agree
Lozowski	Millie	2:14-cv-02456-RMG	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Leonard	Janie	2:14-cv-02457-RMG	20	20	Agree
Meneley	Marilyn	2:14-cv-02459-RMG	20	20	Agree
Ogletree	Jane	2:14-cv-02460-RMG	10, 20	10, 20	Agree
Springer	Linda Jane	2:14-cv-02461-RMG	20	20	Agree
Smith	Janelle	2:14-cv-02462-RMG	20	20	Agree
Thornton	Rosie	2:14-cv-02465-RMG	40	40	Agree
Shaw	Ernestine Ann	2:14-cv-02476-RMG	10, 40	10, 40	Agree
Rawlings	Deborah	2:14-cv-02477-RMG	20	20	Agree
Wortham	Bertha	2:14-cv-02478-RMG	10	10	Agree
Wengert	Linda Faye	2:14-cv-02479-RMG	20	20	Agree
Sherman	Bonette	2:14-cv-02480-RMG	40	40	Agree
Keyne	Simone R.	2:14-cv-02481-RMG	20, 40	20, 40	Agree
Fine	Lilly	2:14-cv-02482-RMG	10, 20, 40	10, 20, 40	Agree
Bruner	Linda C.	2:14-cv-02485-RMG	40	40	Agree
Cain	Jane	2:14-cv-02486-RMG	40	40	Agree
Lasater	Sherry	2:14-cv-02488-RMG	20	20	Agree
Taylor	Joanne	2:14-cv-02489-RMG	10	10	Agree
Carr	Zenobia	2:14-cv-02490	40	40	Agree
Swaim	Sharon	2:14-cv-02492-RMG	40	40	Agree
Colbert	Ora Lee	2:14-cv-02495-RMG	10	10	Agree
Banks	Lottie	2:14-cv-02497-RMG	10	10	Agree
Bradshaw	Betty	2:14-cv-02498-RMG	20	20	Agree
Mohr	Kathy S.	2:14-cv-02499-RMG	20	20	Agree
Curtis	Betty A.	2:14-cv-02500-RMG	20	20	Agree
Hastings	Sharon K.	2:14-cv-02501-RMG	40	40	Agree
Hollin	Vicki	2:14-cv-02504-RMG	10	10	Agree
Giles	Gloria	2:14-cv-02505-RMG	10	10	Agree
Vancas	Florence	2:14-cv-02506-RMG	40	40	Agree
Johnson	Sybil	2:14-cv-02507-RMG	20	20	Agree
Alexander	Denise	2:14-cv-02508-RMG	10, 20, 40	10, 20, 40	Agree
McGinty	Betty L	2:14-cv-02509-RMG	40	40	Agree
Bailey	Barbara	2:14-cv-02510-RMG	10	10	Agree
Barksdale	Clara	2:14-cv-02514	10,40	10,40	Agree
Berger	Maureen	2:14-cv-02514	40	40	Agree
Calabro	Ida	2:14-cv-02514	40	40	Agree
Curtis	Bettye	2:14-cv-02514	40	40	Agree
Lenger	Judith	2:14-cv-02514	40	40	Agree
Mandola	Frances	2:14-cv-02514	10	20	Agree
Pearce	Lilliam	2:14-cv-02514	20	20	Agree
Robinson	Rose	2:14-cv-02514	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Woolfork	Alma	2:14-cv-02514	20	20	Agree
Persells	Mary	2:14-cv-02525	10	10	Agree
Nabors	JoAnn	2:14-cv-02526	5,10,20	5,10,20	Agree
Lankin	Dorothy	2:14-cv-02529-RMG	10, 20, 40	10, 20, 40	Agree
Brothers	Judy R.	2:14-cv-02560	10	10	Agree
Holzapfel	Veronica L.	2:14-cv-02566	10	10	Agree
Battiste	Delores K.	2:14-cv-02590	10	10	Agree
Bridges	Juliaette P.	2:14-cv-02591	10, 20	10, 20	Agree
Lemaster	Martha	2:14-cv-02600-RMG	20, 40	20, 40	Agree
Jones	Charlandra	2:14-cv-02601-RMG	40	40	Agree
Smith	Christine	2:14-cv-02602-RMG	10	10	Agree
Langdon	Regina	2:14-cv-02603-RMG	20, 40	20, 40	Agree
Coleman	Dorothy	2:14-cv-02608-RMG	20, 40	20, 40	Agree
Weston	Diana	2:14-cv-02609-RMG	20, 40	20, 40	Agree
Ralph	Amelia	2:14-cv-02610	10, 20	10, 20	Agree
Slone	Judith Ann	2:14-cv-02627	10	10	Agree
Staggs	Joyce M.	2:14-cv-02628	20	20	Agree
Vaca	Rosa M.	2:14-cv-02629-RMG	40	40	Agree
Taylor	Ophelia	2:14-cv-02631-RMG	20	20	Agree
Holloway	Alice	2:14-cv-02642	20	20	Agree
Ledet	Barbara	2:14-cv-02643-RMG	10, 20	10, 20	Agree
Kelly	Janet	2:14-cv-02647	10mg	10mg	Agree
Hill	Gloria	2:14-cv-02648	10mg	10mg	Agree
Jones	Mae	2:14-cv-02649	10mg; 20mg	10mg; 20mg	Agree
Prosser	Geneva	2:14-cv-02650	10mg	10mg	Agree
Wright	Edwina	2:14-cv-02651-RMG	10, 20	10, 20	Agree
Jones	Agnes	2:14-cv-02652-RMG	40	40	Plaintiffs Advised They Will Dismiss with Prejudice
Chase	Beverly	2:14-cv-02653	10, 20	10, 20	Agree
Kennedy	Judith	2:14-cv-02657-RMG	40	40	Agree
Hull	Patricia	2:14-cv-02681-RMG	10	10	Agree
Krumrey	Eileen	2:14-cv-02682-RMG	10	10	Agree
Allen	Polly	2:14-cv-02688	20, 40	20, 40	Agree
Jones	Janice	2:14-cv-02690	20,40	20,40	Agree
Austin	Sue	2:14-cv-02699	10, 40	10, 40	Agree
Dale	Carol	2:14-cv-02701-RMG	10	10	Agree
Garza	Cynthia	2:14-cv-02702-RMG	10	10	Agree
Larry-Stapleton	Hallie	2:14-cv-02719-RMG	10, 20	10, 20	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Lyle	Florence	2:14-cv-02720-RMG	20	20	Agree
Shepherd	Glenda	2:14-cv-02721-RMG	10, 20, 40	10, 20, 40	Agree
Weir	Saran L.	2:14-cv-02722-RMG	10, 20	10, 20	Agree
Wetta	Janet E. (Estate of)	2:14-cv-02723-RMG	10, 20, 40	10, 20, 40	Agree
Brockelmeyer	Patricia	2:14-cv-02725-RMG	20, 40	20, 40	Agree
Lair	Kathleen	2:14-cv-02727	10, 20, 40	10, 20, 40	Agree
Thornton	Virginia	2:14-cv-02753-RMG	10, 20, 40	10, 20, 40	Agree
Bourgeois	Vera	2:14-cv-02756-RMG	10	10	Agree
Smith	Antonia C.	2:14-cv-02760-RMG	10	10	Agree
Brinson	Velma Lee	2:14-cv-02763-RMG	10,20	10,20	Agree
Flanery	Hildreth	2:14-cv-02764-RMG	10, 20	10, 20	Agree
Robinson	Addie M.	2:14-cv-02768-RMG	10, 20, 40	10, 20, 40	Agree
Clewis	Marian R.	2:14-cv-02769-RMG	20	20	Agree
Olabi	Safaa	2:14-cv-02776-RMG	10	10	Agree
Black	Edith	2:14-cv-02780	20, 40	20, 40	Agree
Boggs	Blondina	2:14-cv-02793	20	20	Agree
Chester	Roslyn	2:14-cv-02794	20	20	Agree
Goldberg	Tanya	2:14-cv-02795	40	40	Agree
Harris	Carol T.	2:14-cv-02796	10	10	Agree
Hart	Judy E.	2:14-cv-02797	20, 40	20, 40	Agree
Johnston	Patricia A.	2:14-cv-02799	20, 40	20, 40	Agree
Journigan	Bettye	2:14-cv-02802	10	10	Agree
Kelly	Kay F.	2:14-cv-02803	10, 20	10, 20	Agree
King	Terry L.	2:14-cv-02804	10	10	Agree
Lesko	Marsha	2:14-cv-02805	10, 20, 40	10, 20, 40	Agree
Seals	Lynette	2:14-cv-02809	40	40	Agree
Vellone	So Y	2:14-cv-02811	20, 40	20, 40	Agree
West	Joyce	2:14-cv-02812	40	40	Agree
Barker	Elizabeth	2:14-cv-02816	10, 20	10, 20	Agree
Metheney	Judy	2:14-cv-02825-RMG	20,40	20,40	Agree
Gibson	Lovie N.	2:14-cv-02826	40	40	Agree
White	Rebecca	2:14-cv-02831-RMG	10	10	Agree
Setler	Gwendolyn	2:14-cv-02837-RMG	10, 20	10, 20	Agree
Strazzante	Eleanor	2:14-cv-02838-RMG	40	40	Agree
Baker	Francene	2:14-cv-02840	10	10	Agree
Paris	Michele L.	2:14-cv-02870-RMG	20	20	Agree
Scherf	Ellen	2:14-cv-02871-RMG	10, 20	10, 20	Agree
Bowman	Dorothy	2:14-cv-02877	20	20	Agree
Overdier	Penny	2:14-cv-02886-RMG	10, 20	10, 20	Agree
Williams	Beverlee	2:14-cv-02887	10, 20	10, 20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Mowry	Tammy	2:14-cv-02888	40	40	Agree
Frankie	Thomas	2:14-cv-02889-RMG	40	40	Agree
Babb	Debby A.	2:14-cv-02901	20, 40	20, 40	Agree
Byas	Grace R.	2:14-cv-02903	10, 20, 40	10, 20, 40	Agree
Graham	Barbara A.	2:14-cv-02904	40	40	Agree
Griffin	Rosie J.	2:14-cv-02905	10, 20	10, 20	Agree
Haley	Gladys V.	2:14-cv-02912	10, 20, 40	10, 20, 40	Agree
Hall	Barbara L.	2:14-cv-02913	20, 40	20, 40	Agree
Blevins	Connie S.	2:14-cv-02916	10, 20, 40	10, 20, 40	Agree
Harvey	Rhonda K.	2:14-cv-02917	10	10	Agree
Hatfield	Goldie Lawonne	2:14-cv-02919	20	20	Agree
Densmore	Loretta	2:14-cv-02921	10	10	Agree
Belew	Mary	2:14-cv-02924-RMG	10, 20, 30	10, 20, 30	Agree
Carnes	Nedra	2:14-cv-02926-RMG	40	40	Agree
Clark	Doris	2:14-cv-02929-RMG	10	10	Agree
Coffeen	Jackie	2:14-cv-02930-RMG	10, 40	10, 40	Agree
Crudup	Betty	2:14-cv-02932-RMG	10, 20	10, 20	Agree
Deitman	Anna	2:14-cv-02934-RMG	10,20,40	10,20,40	Agree
Ebner	Judy	2:14-cv-02937-RMG	10,20	10,20	Agree
Evans	Rethell	2:14-cv-02938-RMG	20,40	20,40	Agree
Sanford	Linda	2:14-cv-02943-RMG	10, 20	10, 20	Agree
Cherry	Jerlean	2:14-cv-02946-RMG	20	20	Agree
Adams	Donna F.	2:14-cv-02954	10, 20, 40	10, 20, 40	Agree
Olsson	Alberta	2:14-cv-02963-RMG	20	20	Agree
Nichols	Claudette	2:14-cv-02964-RMG	10, 20	10, 20	Agree
Clark	Ruby G.	2:14-cv-02967	20, 40	20, 40	Agree
Gordon	Shirley	2:14-cv-02968	10, 20	10, 20	Agree
Bell	Donna	2:14-cv-02974	10	10	Agree
Haskins	Darlene R.	2:14-cv-02976	20	20	Agree
Haymes	Anette	2:14-cv-02980	20, 40	20, 40	Agree
Hill	Netella J.	2:14-cv-02981	40	40	Agree
Hollar	Jeanette	2:14-cv-02982	20, 40	20, 40	Agree
Jay	Charlene V.	2:14-cv-02983	10	10	Agree
Kilbreth	Donna S.	2:14-cv-02986	10, 20	10, 20	Agree
Kirchoff	Sherry L.	2:14-cv-02987	10	10	Agree
Livingston	Linda	2:14-cv-02988	10	10	Agree
Marshall	Edna	2:14-cv-02989	40, 60	40, 60	Agree
Jones	Brenda	2:14-cv-02998-RMG	40	40	Agree
Hill	Rebecca	2:14-cv-02999-RMG	10	10	Agree
Brown	Ruth	2:14-cv-03000-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Robinson	Debbie	2:14-cv-03002-RMG	10, 40	10, 40	Agree
Koone	Mary E.	2:14-cv-03011	20	20	Agree
Schultz	Joyce	2:14-cv-03028	10	10	Agree
Grantham	Joyce	2:14-cv-03030	10,40	10,40	Agree
Daugherty	Donna	2:14-cv-03033-RMG	20	20	Agree
Scott	Betty	2:14-cv-03034	10, 40	10, 40	Agree
Gosner	Susan	2:14-cv-03036-RMG	20	20	Agree
Gray	Carmeleta	2:14-cv-03037-RMG	40	40	Agree
Hammonds	Joan	2:14-cv-03040-RMG	20	20	Agree
Hando	Dona	2:14-cv-03041-RMG	10,20	10,20	Agree
Hartsfield	Betty	2:14-cv-03042-RMG	20	20	Agree
Heredia	Olga	2:14-cv-03043-RMG	10,20	10,20	Agree
Hickson	Marlene	2:14-cv-03047-RMG	20, 40	20, 40	Agree
Hollinger	Shauna	2:14-cv-03048-RMG	20	20	Agree
Kampelman	Dixie	2:14-cv-03050-RMG	10,20	10,20	Agree
Thomas	Martha	2:14-cv-03057-RMG	20	20	Agree
Marcewicz	Nancy	2:14-cv-03072	20	20	Agree
McFarland	Marilyn	2:14-cv-03073	20, 40	20, 40	Agree
McGuirl	Yolanda	2:14-cv-03074	20	20	Agree
McMahan	Debra	2:14-cv-03075	20, 40	20, 40	Agree
Palmer	Arenda	2:14-cv-03076	20	20	Agree
Pellerito	Judith	2:14-cv-03077	10	10	Agree
Pind	Sherrie	2:14-cv-03078	10, 40	10, 40	Agree
Pratt	Victoria	2:14-cv-03079	10	10	Agree
Quansah	Doris	2:14-cv-03080	20, 40	20, 40	Agree
Reppert	Tina	2:14-cv-03081	40	40	Agree
Robinet	Twila	2:14-cv-03083	10, 20, 40	10, 20, 40	Agree
Rogers	Pamela	2:14-cv-03084	10, 20	10, 20	Agree
Rosario	Yvette	2:14-cv-03085	40	40	Agree
Passmore	Cynthia	2:14-cv-03086	10	10	Agree
Moseley	Victory	2:14-cv-03087-RMG	10, 20	10, 20	Agree
Fraze	Carol	2:14-cv-03088-RMG	10	10	Agree
Church	Rita	2:14-cv-03090	40, 20, 40	40, 20, 40	Agree
Compton	Betty	2:14-cv-03093	10	10	Agree*
Jones	Gloria	2:14-cv-03096	40	40	Agree
Frank	Ruddy	2:14-cv-03098	10	10	Agree*

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
English	Brenda	2:14-cv-03100	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Bledsoe	Gaynell	2:14-cv-03102	10	10	Agree*
Fisher	Dora	2:14-cv-03103	20, 40	20, 40	Agree
Robinson	Susan	2:14-cv-03105	10, 40	10, 40	Agree
Spencer	Nancy	2:14-cv-03106	20	20	Agree
Green	Beatrice	2:14-cv-03107	20, 40	20, 40	Agree
Wiseman	Kimberly	2:14-cv-03108	10, 20	10, 20	Agree
Clark	Barbara	2:14-cv-03110	10	10	Agree*
Forbes	Michelle	2:14-cv-03112	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Bendingfield	Ruth	2:14-cv-03115	20	20	Agree
Stallings	Joan	2:14-cv-03116	20, 40	20, 40	Agree
Cleek	Linda	2:14-cv-03121	10	10	Agree
Burdine	Sharon	2:14-cv-03122	40, 20	40, 20	Agree
Hoffpauir	Zulah	2:14-cv-03127	10, 20	10, 20	Agree
Wempe	Betty	2:14-cv-03130	20	20	Agree
Megason	Patricia	2:14-cv-03131-RMG	10	10	Agree
Robinson	Albertine	2:14-cv-03132	20	20	Agree
Baird	Patsy	2:14-cv-03137	10, 20, 40,20	10, 20, 40,20	Agree
Sproles	Diane	2:14-cv-03139-RMG	10, 20	10, 20	Agree
Sanders	Peggy	2:14-cv-03140-RMG	10, 20	10, 20	Agree
Roy	Jeannine	2:14-cv-03142-RMG	10	10	Agree
Nabor	Tamara	2:14-cv-03143-RMG	20	20	Agree
Palella	Stella	2:14-cv-03145-RMG	10	10	Agree
McGowens	Doreather	2:14-cv-03146-RMG	10, 20	10, 20	Agree
PERICH	JUDITH	2:14-cv-03149-RMG	20, 40	20, 40	Agree
Boone	Maureen	2:14-cv-03154	20	20	Agree
Ashley	Heather	2:14-cv-03166	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Austin	Sheila	2:14-cv-03169	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Russell	Sandra	2:14-cv-03182	20	20	Agree
Scott	Darlene	2:14-cv-03183	20	20	Agree
Smith	Sheryl	2:14-cv-03184	10	10	Agree
Steele	Suzanne	2:14-cv-03185	40	40	Agree
Stewart	Rhonda	2:14-cv-03186	20	20	Agree
Swobody	Cathey	2:14-cv-03187	10	10	Agree
Thomas	Denise	2:14-cv-03188	20	20	Agree
Turner	Darlene	2:14-cv-03189	10	10	Agree
Watson	Virgie	2:14-cv-03190	40	40	Agree
Zohlman	Lisa	2:14-cv-03192	10	10	Agree
Smith	Diane	2:14-cv-03193	20(Generic), 40(Generic), 40	20(Generic), 40(Generic), 40	Agree
Franco	Dolores	2:14-cv-03196	10, 40, 20	10, 40, 20	Agree
Sturges	Ardelia	2:14-cv-03197	10	10	Agree
Wesley	Rose	2:14-cv-03199	10, 20	10, 20	Agree
Addison	Regina	2:14-cv-03200	20, 40	20, 40	Agree
Carter	Dona	2:14-cv-03201	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Pasha	Edith	2:14-cv-03202	10	10	Agree
Siderio	Lucille	2:14-cv-03204	10	10	Agree
Ingram	Brenda	2:14-cv-03205	40	40	Agree
Kasik	Christine	2:14-cv-03206-RMG	10, 20	10, 20	Agree
Gross	Elsie	2:14-cv-03216-RMG	10	10	Agree
Robinson	Thelma	2:14-cv-03219-RMG	20	20	Agree
Jennewein	Peggy	2:14-cv-03243	20, 40	20, 40	Agree
Williams	Pamela	2:14-cv-03249	40	40	Agree
Oliver	Ellen	2:14-cv-03253-RMG	10, 20	10, 20	Agree
Abson	Amanda	2:14-cv-03255	40	40	Agree
Advincula	Pura	2:14-cv-03255	20	20	Agree
Albright	Evelyn	2:14-cv-03255	10,20,40	10,20,40	Agree*
Arnold	Ruthie	2:14-cv-03255	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Baldwin	Mary Lee	2:14-cv-03255	40	40	Agree
Bisantz	Kathy	2:14-cv-03255	20,40	20,40	Agree
Brooks	Frances	2:14-cv-03255	10	10	Agree
Bryant	Robbie	2:14-cv-03255	20	20	Agree
Burkham	Yolanda	2:14-cv-03255	10,20	10,20	Agree
Burr	Dorothy	2:14-cv-03255	10	10	Agree
Carr	Jeanette	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Charles	Ute	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Cook	Linda	2:14-cv-03255	10	10	Agree
Coram	Rachel	2:14-cv-03255	10,20	10,20	Agree
Cousins	Bonnie	2:14-cv-03255	10	Unknown	Agree
Danielly	Joyce	2:14-cv-03255	40	40	Agree*
Davis	Gloria	2:14-cv-03255	20	20	Agree
Don	Patricia	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Duvall	Linda	2:14-cv-03255	10	10	Agree
Fetty	Rhonda	2:14-cv-03255	20	20	Agree
Frey	Barbara	2:14-cv-03255	20	20	Agree
Gaddy	Phyllid	2:14-cv-03255	40	40	Agree
Gamage	Donna	2:14-cv-03255	20	20	Agree
Gibbs	Kim	2:14-cv-03255	40	40	Agree
Giddens	Eleanor	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Gordon	Kathleen	2:14-cv-03255	20	20	Agree
Green	Faye	2:14-cv-03255	20	20	Agree
Green	Rowena	2:14-cv-03255	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Hall	Tera	2:14-cv-03255	10	10	Agree*
Hillyard	Angela	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Holden	Karen	2:14-cv-03255	10, 20	10, 20	Agree
Hutchinson	Audrey	2:14-cv-03255	10,20	10,20	Agree
Hutnyan	Gayle	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Jones	Brenda	2:14-cv-03255	20	Unknown	Agree
Jordan	Carol	2:14-cv-03255	20	20	Agree
Ketcham	Beatriz	2:14-cv-03255	10	10	Agree
Lang	Gloria	2:14-cv-03255	10,20,40	10,20,40	Agree
Leslie	Terri	2:14-cv-03255	40	40	Agree
Lewis	Pamela	2:14-cv-03255	40	40	Agree
Love-Seatts	Alvella	2:14-cv-03255	10	10	Agree
McNair	Patricia	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Moiyallah	Dedeh	2:14-cv-03255	20	20	Agree
Morrow	Beverly	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Mullins	Roberta	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Navas	Diane	2:14-cv-03255	10	10	Agree
Nichols	Belinda	2:14-cv-03255	20	20	Agree
Pollard	Olivia	2:14-cv-03255	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Rogers	Frances	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Romersa	Susan	2:14-cv-03255	40	40	Agree
Royal	Lurethia	2:14-cv-03255	20	20	Agree
Sam	Yvonne	2:14-cv-03255	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Schuld	Patricia	2:14-cv-03255	40	40	Agree
Shining Woman	Marsha	2:14-cv-03255	20	20	Agree
Steventon	Esther	2:14-cv-03255	10	10	Agree
Thomas	Gwendolyn	2:14-cv-03255	10	10	Agree
Trimble	Ludie	2:14-cv-03255	40	40	Agree
Ward	Margaret	2:14-cv-03255	10	10	Agree
Weathers	Jacqueline	2:14-cv-03255	20	20	Agree
Weaver	Mary	2:14-cv-03255	10	10	Agree
Weinreich	Isabel	2:14-cv-03255	40	40	Agree
Williamson	Cynthia	2:14-cv-03255	5	5	Agree
Winters	Julita	2:14-cv-03255	10	10	Agree
Schroeder	Cynthia	2:14-cv-03255-RMG	20,40	20,40	Agree
Duffy A.K.A. Gomes	Maria	2:14-cv-03257	10	10	Agree
Ebarb	Susan	2:14-cv-03260	10, 20	10, 20	Agree
Bracey-Showers	Pearlie	2:14-cv-03263-RMG	10	10	Agree
Carver	Carolyn	2:14-cv-03264-RMG	10, 20	10, 20	Agree
Chikeka	Chinyere	2:14-cv-03265-RMG	20	20	Agree
Doyle	Bertina	2:14-cv-03266-RMG	20	20	Agree
Hawk	Mae	2:14-cv-03267-RMG	20,40	20,40	Agree
Jones	Almeta	2:14-cv-03274-RMG	20	20	Agree
Khouli	Shafea	2:14-cv-03275-RMG	20	20	Agree
Larocque	Susan	2:14-cv-03277-RMG	10	10	Agree
Cutts	Jacqueline D.	2:14-cv-03278	10, 20	10, 20	Agree
Brown	Myra D	2:14-cv-03279	20, 40	20, 40	Agree
Conley	Connie	2:14-cv-03285	20	20	Agree
Jenkins	LaTonya J.	2:14-cv-03288	20	20	Agree
Jones	Beverly L.	2:14-cv-03290	10, 20	10, 20	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
McCormack	Brenda Kay	2:14-cv-03292	10, 20, 40	10, 20, 40	Agree
Walker	Sharon	2:14-cv-03294	20	20	Agree
Washington	Magnolia	2:14-cv-03295	10	10	Agree
Santana	Tahira	2:14-cv-03296	10	10	Agree
Steinmeyer	Bonnetta	2:14-cv-03297	10, 20	10, 20	Agree
DuPree	Ponchita	2:14-cv-03298	10	10	Agree
Moses	Myrtle	2:14-cv-03300	40	40	Agree
Welker	Karen	2:14-cv-03301	10	10	Agree
Williams	Pamela	2:14-cv-03302	10	10	Agree
Wiliamson	Betty	2:14-cv-03303	10, 20, 40	10, 20, 40	Agree
Shaker	Cecilia	2:14-cv-03313	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Moreland	Katherine	2:14-cv-03314	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Moody	Fredia	2:14-cv-03320	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Mckenzie	Shirley	2:14-cv-03322	10	10	Agree
Noe	Candy	2:14-cv-03323	30	30	Agree
Edwards	Thelma	2:14-cv-03324	10, 20	10, 20	Agree
Troxell	Janet	2:14-cv-03327	20,10	20,10	Agree
Johnvin	Lois	2:14-cv-03332-RMG	10, 40	10, 40	Agree
Clark	Mary	2:14-cv-03336	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Dinsmore	Denise	2:14-cv-03354	10, 20, 40	10, 20, 40	Agree
Alcala	Norma	2:14-cv-03355	20	20	Agree
Allen	Ruth	2:14-cv-03356	20	20	Agree*
Appiah	Lucy	2:14-cv-03357	10	10	Agree
Angel	Frances	2:14-cv-03359	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Shelton	Paulette	2:14-cv-03360	40	40	Agree
McGee	Brenda	2:14-cv-03361	10, 20	10, 20	Agree
Meyers	Maria	2:14-cv-03369	40,10, 40	40,10, 40	Agree*
Beaupre	Ann	2:14-cv-03371	10, 20	10, 20	Agree
Baltazar	Rosetta	2:14-cv-03372	20, 10, 20	20, 10, 20	Agree
Dalton	Myrtle	2:14-cv-03377	10	10	Agree
Johnson	Mary L.	2:14-cv-03379-RMG	10	10	Agree
Jones	Carolyn	2:14-cv-03380	10	10	Agree
Johnson	Alice	2:14-cv-03381	20, 40	20, 40	Agree
Danzer	Shelley	2:14-cv-03408-RMG	10	10	Agree
Bradley	Linda	2:14-cv-03409	10, 20	10, 20	Agree
Gelet	Sandra	2:14-cv-03410	10,20	10,20	Agree
Hanson	Frances	2:14-cv-03411	40	40	Agree
Jackson	Laverne	2:14-cv-03414	10	10	Agree
Johnson	Susan	2:14-cv-03415	20, 40	20, 40	Agree
Lozada	Theresa	2:14-cv-03416	50	50	Agree
Wright	Margerite	2:14-cv-03438	20, 40	20, 40	Agree*
Kiser	Lynn	2:14-cv-03448	20, 40	20, 40	Agree
Hunt	Angela	2:14-cv-03455	20,40	20,40	Agree
Dunnagan	Peggy	2:14-cv-03461-RMG	10,20	10,20	Agree
Epperson	Judy	2:14-cv-03462-RMG	10	10	Agree
Goins	Penny	2:14-cv-03463-RMG	20	20	Agree
Hebbard	Judy	2:14-cv-03469-RMG	20	20	Agree
Orellana	Silvia	2:14-cv-03483-RMG	10	10	Agree
Smith	Betty	2:14-cv-03490-RMG	10	10	Agree
Winston	Cheryl	2:14-cv-03492-RMG	20	20	Agree
Williams	Annie	2:14-cv-03493-RMG	10,20	10.2	Agree
Shinhoster	Mary	2:14-cv-03498-RMG	40	40	Agree
Ewing	Louise	2:14-cv-03523-RMG	40	40	Agree
Gardner	JoAnn	2:14-cv-03524-RMG	20	20	Agree
Dixon	Betty	2:14-cv-03526-RMG	10	10	Agree
Bell	Deborah	2:14-cv-03529	10, 20	10, 20	Agree
De Roy Van Zuydewijn	Lotte	2:14-cv-03530-RMG	10	10	Agree
Moss	Linda	2:14-cv-03537-RMG	40	40	Agree
Loretta	Ogletree	2:14-cv-03538-RMG	10	10	Agree
Murphy	Deborah	2:14-cv-03541-RMG	20,40	20,40	Agree
Carolyn	Phillips	2:14-cv-03549-RMG	20	20	Agree
Bryant	Carolyn	2:14-cv-03557	40	40	Agree
Culver	Delores	2:14-cv-03558	10, 20	10, 20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Anderson	Marilyn	2:14-CV-03580	20, 40	20, 40	Agree
Sawyer	Esther	2:14-cv-03584-RMG	20, 40	20, 40	Agree
Massey	Sandra	2:14-cv-03585-RMG	10, 20, 40	10, 20, 40	Agree
Mudrinich	Benita	2:14-cv-03587-RMG	10	10	Agree
Marcellino	Joan	2:14-cv-03588-RMG	10	10	Agree
Henderson	Melody	2:14-cv-03591-RMG	20	20	Agree
Judith	Root	2:14-cv-03599-RMG	10	10	Agree
McBurrows	Carrie	2:14-cv-03602-RMG	10, 20, 40	10, 20, 40	Agree
McLawhorn	Margie	2:14-cv-03604-RMG	10	10	Agree
Barbara	Salsgiver	2:14-cv-03608-RMG	10	10	Agree
Baird	Veroma	2:14-cv-03611	10, 20	10, 20	Agree
Winters	Janice	2:14-cv-03619-RMG	20	20	Agree
Black	Linda K.	2:14-cv-03621	5,10	5,10	Agree
Lipsey	Annie	2:14-cv-03622-RMG	20	20	Agree
Peale	Renee	2:14-cv-03623-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Patricia	Varnado	2:14-cv-03641-RMG	20	20	Agree
Cynthia	Stampley	2:14-cv-03642-RMG	10	10	Agree
Barbara	Wade	2:14-cv-03645-RMG	10, 20	10, 20	Agree
Thomas	Clara	2:14-cv-03650-RMG	20	20	Agree
McDonald	Laura	2:14-cv-03657-RMG	10, 20	10, 20	Agree
Talley-Lesko	Palma J.	2:14-cv-03663-RMG	10, 20, 40	10, 20, 40	Agree
Doyle	Patricia	2:14-cv-03665	10, 20	10, 20	Agree
Ramey	Deborah	2:14-cv-03666-RMG	40	40	Agree
George	Fiona	2:14-cv-03669-RMG	20	20	Agree
Kelly	Schlenker	2:14-cv-03682-RMG	40	40	Agree
Gloria	Ponce	2:14-cv-03696-RMG	10	10	Agree
Carmen	Santiago	2:14-cv-03697-RMG	10	10	Agree
McCormick	Dawn	2:14-cv-03698-RMG	20 (Generic)	20 (Generic)	Agree
Barbara	Walker	2:14-cv-03700-RMG	10	10	Agree
Winters	Delores	2:14-cv-03705-RMG	20	20	Agree
Morris	Carol	2:14-cv-03723-RMG	10	10	Agree
Moon	Kathy	2:14-cv-03735-RMG	10	10	Agree
Garritty	Mary	2:14-cv-03738-RMG	40	40	Agree
Neuenschwander	Karen	2:14-cv-03742-RMG	20	20	Agree
Shaw	Joy	2:14-cv-03753-RMG	10	10	Agree
Perry	Aleta	2:14-cv-03765-RMG	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Bates	Connie	2:14-cv-03767-RMG	10, 20	10, 20	Agree
Bissonnette	Crystal	2:14-cv-03782	10	10	Agree
Collins	Gwen	2:14-cv-03789	20	20	Agree
Alexander	Myrtle C. (Estate of)	2:14-cv-03807	10	10	Agree
Washington	Louella	2:14-cv-03812-RMG	20	20	Agree
Kratz	Karen	2:14-cv-03816	20	20	Agree
Chambliss	Ruby F.	2:14-cv-03819-RMG	20	20	Agree
Bing	Jennie	2:14-cv-03843-RMG	40	40	Agree
Twedt	Arlette	2:14-cv-03855	10	10	Agree
O'Brien	Gail	2:14-cv-03863-RMG	10	10	Agree
Allen	Alana	2:14-cv-03872	10	10	Agree
Cook	Bessie	2:14-cv-03879	10, 20	10, 20	Agree
Ware	Patricia K.	2:14-cv-03880	10	10	Agree
Brison	Eva	2:14-cv-03895	40	40	Agree
BOONE	MARGIE	2:14-cv-03897	40	40	Agree
Hernandez	Caridad	2:14-cv-03898	20	20	Agree
Walker	Theresa	2:14-cv-03908	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Perry	Josephine M	2:14-cv-03918-RMG	40	40	Agree
Toler	Juanita	2:14-cv-03938	20	20	Agree
Harvey	Delois	2:14-cv-03939	20	20	Agree
Bowden	Betty	2:14-cv-03940	20, 40	20, 40	Agree
Briscoe	Lana P.	2:14-cv-03950	20	20	Agree
Damon	Bonnie	2:14-cv-03951	10	10	Agree
Dempsey	Sandra	2:14-cv-03952	20, 40	20, 40	Agree
Gorbett	Vicki A.	2:14-cv-03953	10, 20	10, 20	Agree
Hartsfield	Judy	2:14-cv-03954	10	10	Agree
Henderson	Linda S.	2:14-cv-03955	10	10	Agree
Himelfarb	Susan	2:14-cv-03956	20	20	Agree
Jenkins	Brenda	2:14-cv-03957	40	40	Agree
Kennedy	Carole A.	2:14-cv-03958	10	10	Agree
Lower	Lula	2:14-cv-03959	10, 20	10, 20	Agree
James	Pennelifa	2:14-cv-03961	10	10	Agree
Slider	Jody	2:14-cv-03962	40	40	Agree
Ross	Jennifer	2:14-cv-03963	40	40	Agree
Dalton	Deborah Ann	2:14-cv-03964	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Brown	Susan	2:14-cv-03965	10, 20	10, 20	Agree
DeSomma	Barbara	2:14-cv-03968	10	10	Agree
Birk-Alcorn	Cynthia	2:14-cv-03973	40	40	Agree
Burrell	Mary	2:14-cv-03973	40	40	Agree
Campbell	Sara	2:14-cv-03973	10, 40	10, 40	Agree
Cicero	Patty	2:14-cv-03973	10	10	Agree
Cox	Barbara	2:14-cv-03973	10	10	Agree
Curry	Rebecca	2:14-cv-03973	40	40	Agree
Davidson	Brenda	2:14-cv-03973	20, 40	20, 40	Agree
DiMasi	Tammy	2:14-cv-03973	40	40	Agree
Drake	Dinah	2:14-cv-03973	20	20	Agree
Felts	Lou Ellen	2:14-cv-03973	40	40	Agree
Glover	Alice	2:14-cv-03973	40	40	Agree
Gonzales	Lawanna	2:14-cv-03973	10, 20, 40	10, 20, 40	Agree
Hunt	Lola	2:14-cv-03973	20	20	Agree
Jolly	Hazel	2:14-cv-03973	10	10	Agree
Jones	Mary	2:14-cv-03973	40	40	Agree
Kennedy	Regina	2:14-cv-03973	10, 20, 40	10, 20, 40	Agree
Klahr	Linda	2:14-cv-03973	20	20	Agree
Marshall	Nancy C.	2:14-cv-03973	20	20	Agree
McGill	Joyce D.	2:14-cv-03973	10	10	Agree*
McGovern	Celmira H.	2:14-cv-03973	20, 40	20, 40	Agree*
Mekief	Helen A.	2:14-cv-03973	20	20	Agree*
Merriweather	Marylon F.	2:14-cv-03973	20	20	Agree
Moore	Loretta H.	2:14-cv-03973	40	40	Agree
Moore	Easter E.	2:14-cv-03973	20	20	Agree
North	Pauline M.	2:14-cv-03973	10, 20	10, 20	Agree
Phelps	LuAnn	2:14-cv-03973	Alleges Pre-existing Diabetes then 40	Alleges Pre-existing Diabetes then 40	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Robinson	Susan J.	2:14-cv-03973	20	20	Agree*
Sanders	Mary E.	2:14-cv-03973	10	10	Agree
Sexton	Martha M.	2:14-cv-03973	20	20	Agree
Sipple	Sherree M.	2:14-cv-03973	10, 20	10, 20	Agree*
Sterling	Carol A.	2:14-cv-03973	40	40	Agree*
Stevens	Linda M.	2:14-cv-03973	20, 40	20, 40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Uriarte	Tina R.	2:14-cv-03973	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Vawter	Janis M.	2:14-cv-03973	20	20	Agree
Weese	Linda C.	2:14-cv-03973	20	20	Agree*
Wells	Carolyn J.	2:14-cv-03973	40	40	Agree*
Wilson	Sevella M.	2:14-cv-03973	10	10	Agree*
Wright	Patra D.	2:14-cv-03973	10, 40	10, 40	Agree
Burton	Oberia	2:14-cv-03983	10	10	Agree
Agee	Flora	2:14-cv-03995-RMG	20 mg	20 mg	Agree*
Archibold	Dorothy	2:14-cv-03995-RMG	10 mg	10 mg	Agree
Ballet	Patrice	2:14-cv-03995-RMG	10 mg	10 mg	Agree*
Bradley	Dorothy	2:14-cv-03995-RMG	Alleges Pre-existing Diabetes then 20 mg	Alleges Pre-existing Diabetes then 20 mg	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Carey	Nekitha	2:14-cv-03995-RMG	10 mg	10 mg	Agree
Cole	Teresa	2:14-cv-03995-RMG	40 mg	40 mg	Agree*
Davis	Betty	2:14-cv-03995-RMG	40 mg	40 mg	Agree
Davis	Tracy	2:14-cv-03995-RMG	10 mg	10 mg	Agree
Everett	Angela	2:14-cv-03995-RMG	40 mg	40 mg	Agree
Finkley	Erma	2:14-cv-03995-RMG	10 mg	10 mg	Agree
Garabedian	Maggy	2:14-cv-03995-RMG	40 mg	40 mg	Agree
Gregory	Phyllis	2:14-cv-03995-RMG	10 mg	10 mg	Agree
Hartfield	Teresa	2:14-cv-03995-RMG	20 mg	20 mg	Agree
Holder	Betty	2:14-cv-03995-RMG	20 mg	20 mg	Agree
Johnson	Betty	2:14-cv-03995-RMG	20 mg	20 mg	Agree
Lee	Lillian	2:14-cv-03995-RMG	20 mg	20 mg	Agree
Marshall	Rose	2:14-cv-03995-RMG	20 mg	50 mg	Agree
Mayhew	Mary	2:14-cv-03995-RMG	20 mg	20 mg	Agree*
Morgan	Lou	2:14-cv-03995-RMG	40 mg	40 mg	Agree
Robinson	Doris	2:14-cv-03995-RMG	40 mg	40 mg	Agree
Rowland	Doris	2:14-cv-03995-RMG	10, 20	10, 20	Agree
Rowland	Doris	2:14-cv-03995-RMG	40 mg	40 mg	Agree
Smiley	Linda	2:14-cv-03995-RMG	10 mg	10 mg	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Webb	Sheila	2:14-cv-03995-RMG	10 mg	10 mg	Agree*
Wilson	Susan	2:14-cv-03995-RMG	10 mg	10 mg	Agree*
Umstattd	Deborah	2:14-cv-03997	10, 20	10, 20	Agree
Thompson	Lorene	2:14-cv-03998	10	10	Agree
Mack	Bobby	2:14-cv-03999	10	10	Agree
Canales	Evelyn	2:14-cv-04000	20	20	Agree
Marshall	Theresa	2:14-cv-04011	10, 20	10, 20	Agree
Sterger	Sharon J.	2:14-cv-04023-RMG	40	40	Agree
Cerniglia	Barbara	2:14-cv-04029	20	20	Agree
Sharp	Cecelia	2:14-cv-04030	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Taplin	Bernice	2:14-cv-04031	20	20	Agree
Schoen	Brenda	2:14-cv-04040	10	10	Agree
Black	Hattie	2:14-cv-04041	40	40	Agree
Lopez	Rosemary	2:14-cv-04053	10	10	Agree
Ross	Cheryl	2:14-cv-04057	10, 20	10, 20	Agree
O'bryant	Shirley	2:14-cv-04059	10	10	Agree
Dupard	Rose	2:14-cv-04065-RMG	20	20	Agree
Shepherd	Joyce	2:14-cv-04072-RMG	10, 20	10, 20	Agree
McConahay	LaDonna	2:14-cv-04073-RMG	20	20	Agree
Ainsworth	Vicky	2:14-cv-04099-RMG	20	20	Agree
Abbott	Betty	2:14-cv-04102	10, 20	10, 20	Agree
Applebee	Eugenia	2:14-cv-04103	10	10	Agree
Baboolal	Ann	2:14-cv-04104	10	10	Agree
Backen	Melissa	2:14-cv-04105	40	40	Agree*
Bailey	Rilma	2:14-cv-04107	10	10	Agree
Batt	Ellen	2:14-cv-04109	20	20	Agree
Belmar	Jeaneen	2:14-cv-04110	10, 20	10, 20	Agree
Delmore-Lockett	Ora	2:14-cv-04111	10, 20	10, 20	Agree
Bennett	Patricia	2:14-cv-04113	20, 40	20, 40	Agree
Blevins	Lillie	2:14-cv-04116	20	20	Agree
Bolton	Syndonia	2:14-cv-04117	20	20	Agree*
Bryant	Lois	2:14-cv-04119	20, 40	20, 40	Agree
Burkhart	Teresa	2:14-cv-04120	40	40	Agree
Morisset	Jean	2:14-cv-04132-RMG	10, 20	10, 20	Agree
Holley	Patricia	2:14-cv-04133	40	40	Agree
Robbins	Georgia	2:14-cv-04164	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Zimmerman	Carolyn	2:14-cv-04165	10	10	Agree
Gray	Renate	2:14-cv-04166	10	10	Agree
Lung	Nancy	2:14-cv-04167	10	10	Agree
Medeiros	Denise	2:14-cv-04168	10	10	Agree
Von Minden	Bonnie	2:14-cv-04174	20 mg; 10mg	20 mg; 10mg	Agree
Boutwell	Verna	2:14-cv-04187	20, 10	20, 10	Agree
Jordan	Dianna	2:14-cv-04188	10, 20, 40	10, 20, 40	Agree
Brown	Diane	2:14-cv-04205-RMG	10	10	Agree
Hill	Deborah	2:14-cv-04213	40	40	Agree
Baldwin	Jeannine	2:14-cv-04223	10, 20	10, 20	Agree
Byrd	Ella M.	2:14-cv-04226-RMG	40	40	Agree
HERNANDEZ	MARY LOU	2:14-cv-04228	20	20	Agree
Conley	Mary	2:14-cv-04229	40, 40(Generic)	40, 40(Generic)	Agree
Wilks	Linda	2:14-cv-04230	40	40	Agree
Partain	Shari	2:14-cv-04254	20	20	Agree
Hearon	Dorothy	2:14-cv-04255	20	20	Agree
Burlingame	Linda	2:14-cv-04256	40	40	Agree
Easley	Marguerite	2:14-cv-04257	10	10	Agree
Vendola	Lorri	2:14-cv-04258	10, 20	10, 20	Agree
Carlile	Minh M.	2:14-cv-04259	20, 40	20, 40	Agree
Edwards	Debra	2:14-cv-04300	10	10	Agree
Hendricks	Lucille	2:14-cv-04301	10	10	Agree
Jones	Evelyn	2:14-cv-04303	20	20	Agree
Womack	Yolanda	2:14-cv-04304	10	10	Agree
Netzley	Sharon	2:14-cv-04306-RMG	10, 20	10, 20	Agree
HOLT	TERESA	2:14-cv-04307-RMG	10, 20	10, 20	Agree
Taylor	Glenda	2:14-cv-04308	20, 40	20 40	Agree
Keathley	Gloria	2:14-cv-04309-RMG	20, 40	20, 40	Agree
Garrett	Mildred	2:14-cv-04315	10,20	10,20	Agree
Hixson	Judythe	2:14-cv-04328-RMG	10, 20	10, 20	Agree
Belardo	Mildred	2:14-cv-04329	20	20	Agree
Wolf	Elaine	2:14-cv-04333-RMG	5, 10, 20	5, 10, 20	Agree
Eliassen	Donna L.	2:14-cv-04346	5, 10	5, 10	Agree
Freeman	Jan	2:14-CV-04349	20, 40	20, 40	Agree
Reid	Lisa M.	2:14-cv-04350-RMG	10, 20, 40	10, 20, 40	Agree
O'Neal	Laurene	2:14-cv-04351-RMG	10	10	Agree
Leslie	Marge	2:14-cv-04353-RMG	10, 20	10, 20	Agree
Miller	Marcia F.	2:14-cv-04354-RMG	10	10	Agree
Snyder	Barbara	2:14-cv-04374-RMG	10	10	Agree
Davidson	Patricia	2:14-cv-04378	10	10	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Hiester	Judith	2:14-cv-04382	10, 20, 40	10, 20, 40	Agree
Raper	Ruth	2:14-cv-04398	10, 20	10, 20	Agree
Patterson	Irene	2:14-cv-04409-RMG	20	20	Agree
Schwartz	Linda Kay	2:14-cv-04414-rmg	20, 40	20, 40	Agree
Brewer	Mary	2:14-cv-04417	10	10	Agree
McGaugh	Linda	2:14-cv-04418-RMG	20	20	Agree
Barnes	JoAnn W.	2:14-cv-04444-RMG	20	20	Agree
Saunders	Wanda S.	2:14-cv-04447-RMG	20	20	Agree
Miller	Barbara	2:14-cv-04451-RMG	40	40	Agree
Joyner	Kathleen	2:14-cv-04456	5, 10	5, 10	Agree
Sexton	Carrol	2:14-cv-04467-RMG	20	20	Agree
Watts	Annie	2:14-cv-04468	10, 20	10, 20	Agree
Royal	Delores M.	2:14-cv-04475-RMG	10	10	Agree
Trachtenberg	Carol A.	2:14-cv-04476-RMG	20	20	Agree
Vasko	Mary	2:14-cv-04480	10	10	Agree
Lewis	Marcia	2:14-cv-04530	40	40	Agree
Enemali	Janet	2:14-cv-04545	10	10	Agree
Phillips	Christine	2:14-cv-04549	10	10	Agree
Guarino	Angela	2:14-cv-04550	10,20,40	10,20,40	Agree
Metzger	Betty	2:14-cv-04551	10	10	Agree
Walker	Carolyn A. (Estate of)	2:14-cv-04569-RMG	40 (Lipitor), 10-40 (Caduet)	40 (Lipitor), 10-40 (Caduet)	Agree
Stewart	Elizabeth E.	2:14-cv-04574	10	10	Agree
Hebert	Betty	2:14-cv-04590	20	20	Agree
Bonsal	Audrey	2:14-cv-04680-RMG	40	40	Agree
Cooper	Regina	2:14-cv-04681-RMG	10	10	Agree*
Harrington	Sandra	2:14-cv-04682-RMG	10	10	Agree*
Blair	Antoinette	2:14-cv-04692-RMG	20	20	Agree
Pressley	Elizabeth	2:14-cv-04693-RMG	40	40	Agree
Jones	Credell	2:14-cv-04698-RMG	40	40	Agree
Johnson	Carolyn V.	2:14-cv-04700-RMG	20, 40	20, 40	Agree
Bentley	Mary	2:14-cv-04701-RMG	40	40	Agree
McKinney	Ana M.	2:14-cv-04702-RMG	20	20	Agree
Clay	Betty	2:14-cv-04704-RMG	20, 40	20, 40	Agree
Offutt	Brenda	2:14-cv-04715	40	40	Agree
Johannes	Paula	2:14-cv-04729-RMG	10	10	Agree
Dailey	Virginia	2:14-cv-04735-RMG	20	20	Agree
Brager	Roberta	2:14-cv-04741	10, 20, 40	10, 20, 40	Agree
Wolfe	Eloise	2:14-cv-04743	10mg	10mg	Agree
Halbert	Della	2:14-cv-04749	20, 10, 20, 40	20, 10, 20, 40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Moberley	Marsha	2:14-cv-04751-RMG	40	40	Agree
Biswanger	Janet	2:14-cv-04778	10, 20, 40	10, 20, 40	Agree
Heald	Susan I.	2:14-cv-04779	10	10	Agree
Walker	Pamela	2:14-cv-04780	20	20	Agree
Quaschnick	Gail	2:14-cv-04781	40	40	Agree
Mower	Bonnie	2:14-cv-04784	10	10	Agree
Round	Sherrell	2:14-cv-04792-RMG	20	20	Agree
Tarrasky	Robin	2:14-cv-04820-RMG	20, 40	20, 40	Agree
Robinson	Shirley A.	2:14-cv-04822-RMG	40	40	Agree
Robinson	Beverly J.	2:14-cv-04823-RMG	20	20	Agree
Morrison	Diane	2:14-cv-04824-RMG	10, 20, 40	10, 20, 40	Agree
Golden	Bernice	2:14-cv-04825	20	20	Agree
Lombardino	Darline	2:14-cv-04841-RMG	20	20	Agree
Ortgiesen	Carol J.	2:14-cv-04842-RMG	10	10	Agree
Roberts	Sharon	2:14-cv-04843	10, 20, 40	10, 20, 40	Agree
Taylor	Sharon	2:14-cv-04844-RMG	10	10	Agree
Paletta	Chrie	2:14-CV-04846-RMG	10, 20, 40	10, 20, 40	Agree
Brown	Rita	2:14-cv-04847-RMG	10, 20, 40	10, 20, 40	Agree
Rosenstein	Karen B.	2:14-cv-04868-RMG	10	10	Agree
Camp	Sheila	2:14-cv-04871-RMG	20	20	Agree
Vickie	Smith	2:14-cv-04872-RMG	10, 20	10, 20	Agree
Joeann	Zuefeldt	2:14-cv-04873-RMG	20	20	Agree
CURTIS	DONITA	2:14-cv-04875-RMG	20	20	Agree
Ragland	Beverly	2:14-CV-04876-RMG	20	20	Agree*
Medley	Adelina	2:14-cv-04877-RMG	40	40	Agree*
Hooks	Judy	2:14-cv-04878-RMG	20,40	20,40	Agree
Pavelka	Tamera	2:14-CV-04879-RMG	10,20	10,20	Agree
Black	Tanya	2:14-cv-04885	20	20	Agree
Williams	Orelia	2:14-cv-04888-RMG	40	40	Agree
Morrow	Patricia	2:14-cv-04891-RMG	10	10	Agree
Sanders	Annie	2:14-cv-04892-RMG	10,20,40	10,20,40	Agree
Smallwood	Virginia	2:14-cv-04894-RMG	10	10	Agree
Schottel	Ruth E.	2:14-cv-04899-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Pennell	Mary	2:14-cv-04900	10, 20	10, 20	Agree
Toadvine	Janet	2:14-cv-04907	20	20	Agree
Owen	Denise	2:14-cv-04909-RMG	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Holly	Terry	2:14-cv-04912-RMG	40	40	Agree
Moses	Marlene	2:14-cv-04913-RMG	40, 10, 40, 20	40, 10, 40, 20	Agree
Koscher	Jacqueline	2:14-cv-04915	10mg	10mg	Agree
Morrison	Marsha	2:14-cv-04918	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Limeberry	Barbara	2:14-cv-04925-RMG	Alleges Pre-existing Diabetes then 10, 20	Alleges Pre-existing Diabetes then 10, 20	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Mccartney	Arlene	2:14-cv-04926-RMG	40	40	Agree
Sims	Gilda	2:15-cv-00012-RMG	40	40	Agree
Sweeney	Nancy	2:15-cv-00013-RMG	10	10	Agree
Santiago	Irma	2:15-cv-00014-RMG	10, 20	10, 20	Agree
Brank	Flossie	2:15-cv-00026	20, 40	20, 40	Agree
Carr	Carol	2:15-cv-00027-RMG	10	10	Agree
Cates	Teresa (Estate of)	2:15-cv-00028-RMG	20	20	Agree
Goldfarb	Rachel	2:15-cv-00034	10	10	Agree
Fayssoux	Kathy	2:15-cv-00035	10,40	10,40	Agree
D'Agui	Adelaide	2:15-cv-00036	40	40	Agree
Cotter	Donna	2:15-cv-00037	10	10	Agree
Wilson	Chapok	2:15-cv-00038	10	10	Agree
Messer	Hazel	2:15-cv-00039	40	40	Agree*
Madison	Barbara	2:15-cv-00040	20	20	Agree
Blanks	Lisa	2:15-cv-00041	20	20	Agree
Banks	Iris	2:15-cv-00042-RMG	20	20	Agree
Babbitt	Audrey	2:15-cv-00043	10,20,14	10,20,40	Agree
Murdock	Lynn	2:15-cv-00050-RMG	20,40	20,40	Agree
Regala	Susan	2:15-cv-00064	20, 40	20, 40	Agree
Haessly	Jacqueline	2:15-cv-00069	10	10	Agree
Hewell	Janice (Estate of)	2:15-cv-00071	20	20	Agree
Hill	Annie (Estate of)	2:15-cv-00072	20	20	Agree
Hafner	Janet W.	2:15-cv-00074	10	10	Agree
Heath	Peggy	2:15-cv-00075	20	20	Agree
Day	Patricia	2:15-cv-00078	20	20	Agree
Christopher	Rebecca	2:15-cv-00080-RMG	40	40	Agree
Folsom	Barbara	2:15-cv-00081	10, 20, 40	10, 20, 40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Williams	Susie	2:15-cv-00082	10, 40	10, 40	Agree
Ollis	Linda	2:15-cv-00083	10, 40	10, 40	Agree
Anderson	Sharon P.	2:15-cv-00096	10	10	Agree
Halsing	Nankyong	2:15-cv-00097	40	40	Agree
Taylor	Edna	2:15-cv-00101	20	20	Agree
Thomas	Brenda M.	2:15-cv-00110-RMG	20	20	Agree
Gaddie	Judy	2:15-cv-00111	10, 20	10, 20	Agree
Frase	Jacqueline	2:15-cv-00118	20	20	Agree
Mahon	Joyce	2:15-cv-00119-RMG	20, 10	20, 10	Agree
Maddox	Cassandra	2:15-cv-00121-RMG	10	10	Agree
Taylor	Cynthia	2:15-cv-00122-RMG	40	40	Agree
Washington-Davidson	Barbara	2:15-cv-00124-RMG	20	20	Agree
Johnson	Tiffany	2:15-cv-00127	40	40	Agree
Bartley	Linda	2:15-cv-00128-RMG	10, 20, 40	10, 20, 40	Agree
Fultz	Jacklyn	2:15-cv-00135	40	40	Agree
Bowie	Katherine	2:15-cv-00136	10	10	Agree
Korb	Edith	2:15-cv-00143	10,20	10,20	Agree
London	Mary	2:15-cv-00144	20	20	Agree
Miller	Margaret	2:15-cv-00145	10	10	Agree
Rubin	Edie	2:15-cv-00147	40	40	Agree
Wheeler	Patricia	2:15-cv-00148	10	10	Agree
Whitford	Linda	2:15-cv-00149	20,40	20,40	Agree
Hicks	Lisa	2:15-cv-00150	10	10	Agree
Gregory	Sharon	2:15-cv-00151	10	10	Agree
Hardley	Jeanette	2:15-cv-00152	10	10	Agree
Henning	Carol	2:15-cv-00153	20	20	Agree
Hinkle	Glenna	2:15-cv-00154	20	20	Agree
Merritt	Carrie	2:15-cv-00155	20	20	Agree
Moore	Martha	2:15-cv-00156	10	10	Agree
Randolph	Carolyn	2:15-cv-00157	20	20	Agree
Winthrop	Judith	2:15-cv-00158	20	20	Agree
Gross	Bernita	2:15-cv-00159	10	10	Agree
Fisher	Anna	2:15-cv-00165	20, 40	20, 40	Agree
Nation	Carol	2:15-cv-00169-RMG	20	20	Agree
Ray	Ronald Scott	2:15-cv-00180-RMG	20	20	Agree
Robin	Melba	2:15-cv-00181-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Gaines	Janie M.	2:15-cv-00182-RMG	Alleges Pre-existing Diabetes then 10	Alleges Pre-existing Diabetes then 10	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Carrier	JoAnn	2:15-cv-00183	40	40	Agree
Williams	Laryssa	2:15-cv-00192-RMG	20	20	Agree
Rives	India	2:15-cv-00193-RMG	20	20	Agree
Young	Sandra	2:15-cv-00197-RMG	10	10	Agree
Herbert	Wilhelmina	2:15-cv-00225	10	10	Agree
Clay	Alphia	2:15-cv-00226	10, 40	10, 40	Agree
Brannan	Nancy	2:15-cv-00227	10, 20, 10	10, 20, 10	Agree
Davis	Sarah	2:15-cv-00228	20, 40	20, 40	Agree
Anglin	Gioconda	2:15-cv-00229	10	10	Agree
Klein	Barbara	2:15-cv-00230	40	40	Agree
Kelley	Sharon Denise	2:15-cv-00232	40	40	Agree
Ardoin	Janice	2:15-cv-00233	10	10	Agree
Inman	Patricia	2:15-cv-00234	20	20	Agree
Dunbar	Jennifer	2:15-cv-00238	20	20	Agree
Johnson	Margaret	2:15-cv-00241	20, 40	20, 40	Agree
Mason	Diane	2:15-cv-00242	40	40	Agree
Brown	Brenda	2:15-cv-00252	40	40	Agree
Wilmore	Michelle	2:15-cv-00255	20	20	Agree
Pasley	Mae	2:15-cv-00256	20, 40	20, 40	Agree
Atkins	Mary	2:15-cv-00257	10	10	Agree
Brabant	Sandra	2:15-cv-00258	20	20	Agree
Bradley	Judy	2:15-cv-00259	10	10	Agree
Bradford	Mary	2:15-cv-00266	10, 20	10, 20	Agree
Durand	Claire	2:15-cv-00278-RMG	10, 40	10, 40	Agree
Schiraldi	Jean	2:15-cv-00285	20, 40	20, 40	Agree
Saro	Carmen	2:15-cv-00286	10	10	Agree
Rodriguez	Luz	2:15-cv-00287	10	10	Agree
Amari	Edna	2:15-cv-00289	20, 40	20, 40	Agree
Durant	Francine C.	2:15-cv-00293	20, 40	20, 40	Agree
Elmore	Bobbie	2:15-cv-00294	10	10	Agree
Fisher	Sandra L.	2:15-cv-00295	40	40	Agree
Grinnell	Annie	2:15-cv-00313	20	20	Agree
Hanson	Charlotte	2:15-cv-00314	10	10	Agree
Williams	Jessica	2:15-cv-00319	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Williamson	Mattie	2:15-cv-00322	40, 20	40, 20	Agree
Ogentho	Erica	2:15-cv-00323	10	10	Agree
Sebastian	Tina	2:15-cv-00324	20, 40	20, 40	Agree
Bramlette	Betty	2:15-cv-00325	40	40	Agree
Smith	Linda	2:15-cv-00327	20	20	Agree
Vance	Frances	2:15-cv-00328	40	40	Agree
Latimore	Onell	2:15-cv-00332	5, 10	5, 10	Agree
Henley	Elizabeth	2:15-cv-00334	40	40	Agree
Wright	Linda	2:15-cv-00336	20	20	Agree
Peale	Barbara	2:15-cv-00337	10,40	10,40	Agree
Hulce	Debra	2:15-cv-00338	20	20	Agree
Decker	Janice	2:15-cv-00341	40,40	40,40	Agree
Jay	Marian	2:15-cv-00349	20	20	Agree
Royce	Melanie	2:15-cv-00350-RMG	10	10	Agree
Johnson	Dianne	2:15-cv-00352-RMG	40	40	Agree
Wise	Lois	2:15-cv-00353	20	20	Agree
Anderson	Hattie	2:15-cv-00354-RMG	10, 20	10, 20	Agree
Portney	Harriet	2:15-cv-00361-RMG	40	40	Agree
Judkins	Barbara	2:15-cv-00369	10, 20	10, 20	Agree
Karns	Ennis	2:15-cv-00370	20, 40	20, 40	Agree
Koller	Alice	2:15-cv-00371	10	10	Agree
Greer	Karen	2:15-cv-00373-RMG	10	10	Agree
Welch	Jean L.	2:15-cv-00377-RMG	10	10	Agree
Bailey	Helen	2:15-cv-00378-RMG	40	40	Agree
Amos	Joann	2:15-cv-00382-RMG	20	20	Agree
Delano	Dorothy	2:15-cv-00384	10	10	Agree
Kunkel	Brenda	2:15-cv-00385	20, 40	20, 40	Agree
Rodriguez	Linda	2:15-cv-00394-RMG	10	10	Agree
Langbein	Joyce	2:15-cv-00395-RMG	20	20	Agree
James	Ella	2:15-cv-00397	20, 10, 40	20, 10, 40	Agree
Horne	Elizabeth	2:15-cv-00398	10, 20, 10	10, 20, 10	Agree
Williams	Sandra	2:15-cv-00401	10	10	Agree
Marshall	Theresa	2:15-cv-00402	10	10	Agree
Helie	Mary Jane	2:15-cv-00409	10	10	Agree
Wilson	Mertis L.	2:15-cv-00410-RMG	10, 20	10, 20	Agree
Poirier	Judith	2:15-cv-00413-RMG	40	40	Agree
Taborn	Julie	2:15-cv-00414-RMG	10	10	Agree
Cirri	Antonietta	2:15-cv-00415-RMG	10	10	Agree
Ming	Jeanie	2:15-cv-00417-RMG	20	20	Agree
Kompare	Kathryn	2:15-cv-00418-RMG	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Lumpkin	Judith A.	2:15-cv-00421-RMG	10	10	Agree
Perez	Maria	2:15-cv-00430-RMG	10	10	Agree
WRIGHT	CEOLA	2:15-cv-00435-RMG	10, 20	10, 20	Agree
Mitchell	Truthie	2:15-cv-00436-RMG	10	10	Agree
ZEIGLER	CATHERINE	2:15-cv-00446-RMG	20	20	Agree
Craver	Connie	2:15-cv-00447	40	40	Agree
Wohlfarth	Mary	2:15-cv-00449	10	10	Agree
Arp	Shelia	2:15-cv-00450	40	40	Agree
Gower	Cynthia	2:15-cv-00452	20, 40	20, 40	Agree
Pittman	Lillie	2:15-cv-00453	10	10	Agree
Chavez	Mary Lou	2:15-cv-00455	10, 20, 40	10, 20, 40	Agree
Levinness	Gilda	2:15-cv-00456	20	20	Agree
Regalado	Katy	2:15-cv-00457	10	10	Agree
Clifton	Barbara	2:15-cv-00458	20, 40	20, 40	Agree
Lopez Mendez	Juana	2:15-cv-00460	40	40	Agree
Green-Owens	Mary	2:15-cv-00461	10	10	Agree
Eygabroad	Jane	2:15-cv-00462	10, 20	10, 20	Agree
White	Ella	2:15-cv-00464	20, 40	20, 40	Agree*
Thomas	Vickie	2:15-cv-00466	10	10	Agree
Marshall	Nancy	2:15-cv-00467	20	20	Agree
Gaffney	Linda	2:15-cv-00468	20, 40	20, 40	Agree
Flynn	Violet	2:15-cv-00470	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Hall	Alyce	2:15-cv-00471	10	10	Agree
Kelly	Betty	2:15-cv-00472	10	10	Agree
Chambers	Terrie	2:15-cv-00473	10	10	Agree
Rochester	Sue	2:15-cv-00476	20	20	Agree
Cunningham	Joyce	2:15-cv-00477	10	10	Agree
Nguyen	Chelsea	2:15-cv-00479	10	10	Agree
Bell	Mamie	2:15-cv-00480	10, 20, 40	10, 20	Agree
Harris	Hynethia	2:15-cv-00497	10	10	Agree
Hinkson	Lucinda	2:15-cv-00498	40	40	Agree
Sanders	Geraldine	2:15-cv-00499	20	20	Agree
McCauley	Anna	2:15-cv-00500	10	10	Agree
VandeVelde	Donna	2:15-cv-00501	40	40	Agree
Braun	Constance	2:15-cv-00509	20, 40	20, 40	Agree
Apruzzese	Joan	2:15-cv-00511	10	10	Agree
Burchfield	Margaret	2:15-cv-00514	20	20	Agree
Burns	Susan L.	2:15-cv-00515	10	10	Agree
Goldsmith	Debra	2:15-cv-00541	10, 20	10, 20	Agree
Harmon	Doreen	2:15-cv-00542	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Delph	Ruth	2:15-cv-00543	10, 20	10, 20	Agree
Michael	Tawny Lee	2:15-cv-00549	20, 40	20, 40	Agree
Harmon	Patricia A.	2:15-cv-00557-RMG	10	10	Agree
Allen	Shirley	2:15-cv-00558	20	20	Agree
Biggs	Nancy L.	2:15-cv-00566	20	20	Agree
Hawley	Susan	2:15-cv-00568	20, 40	20, 40	Agree
Harris	Jessie	2:15-cv-00569	40	40	Agree
Brayman	Linda	2:15-cv-00575-RMG	10, 20	10, 20	Agree
Ferguson	Norma	2:15-cv-00576	10	10	Agree
Robinson	Doretha	2:15-cv-00577-RMG	20, 40	20, 40	Agree
Corwin	Sandra	2:15-cv-00578-RMG	10	10	Agree
Bishop	Carolyn	2:15-cv-00584	10, 20	10, 20	Agree
Gibson	Penny L.	2:15-cv-00585	20, 40	20, 40	Agree
Melvin	Gloria	2:15-cv-00591-RMG	10	10	Agree
Levine	Tina	2:15-cv-00592	40	40	Agree
Rooker	Charlette (Charlotte)	2:15-cv-00601-RMG	10	10	Agree
Hoskins	Joyce	2:15-cv-00602-RMG	10	10	Agree
Burton	Maray	2:15-cv-00605-RMG	10, 20, 40	10, 20, 40	Agree
Scott	Honest	2:15-cv-00607	10	10	Agree
Morris	Lula	2:15-cv-00608	20	20	Agree
Jackson	Bobbie A.	2:15-cv-00613	20	20	Agree
Hilliard	Samantha	2:15-cv-00614	10, 20	10, 20	Agree
Dorreliaand	Ghistaine	2:15-cv-00615	10, 20	10, 20	Agree
Al-Ahmad	Nabila	2:15-cv-00616	40	40	Agree
Aiken	Sarah	2:15-cv-00617	10	10	Agree
Anctil	Sherryl	2:15-cv-00618	30, 40	30, 40	Agree
Hines	Joan	2:15-cv-00622	10, 20, 40	10, 20, 40	Agree
Instenes	Franacee D.	2:15-cv-00623	40	40	Agree
Barfoot	Viola	2:15-cv-00635	10	10	Agree
Koon	Karen S.	2:15-cv-00636	20	20	Agree
Bradley	Phyllis	2:15-cv-00655	10, 20	10, 20	Agree
Jacobs	Delores	2:15-cv-00659-RMG	20,40	20,40	Agree
Richardson	Loretta	2:15-cv-00660-RMG	20	20	Agree
Zeisler	Kimberley	2:15-cv-00661-RMG	10,20,40	10,20,40	Agree
Stratton	Bonnie	2:15-cv-00672	40	40	Agree
Nowlin	Clara	2:15-cv-00673	10	10	Agree
Pardi	Alena	2:15-cv-00674	10	10	Agree
Cavalier	Deborah	2:15-cv-00677	20, 40	20, 40	Agree
Latham	Nona	2:15-cv-00678	40	40	Agree*



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
McAdams	Shirley	2:15-cv-00679	10,20,40	10,20,40	Agree
Puckett	Wanda	2:15-cv-00680	10, 20	10, 20	Agree
Welch	Helen	2:15-cv-00681	20	20	Agree
Lorenzen	Barbara	2:15-cv-00685-RMG	20, 40	20, 40	Agree
Treat	Shirley	2:15-cv-00686-RMG	10	10	Agree
Meyer	Lorna	2:15-cv-00687-RMG	10, 40	10, 40	Agree
Rebecca	Simmons	2:15-cv-00693-RMG	20	20	Agree
Sinnott	Kathleen	2:15-cv-00699-RMG	10, 20	10, 20	Agree
Williamson	Brenda	2:15-cv-00700-RMG	20, 40	20, 40	Agree
Kidd	Sharon	2:15-cv-00725-RMG	10,20	10,20	Agree
Jenkins	Barbara	2:15-cv-00726	10	10	Agree
Holley	Joyce	2:15-cv-00727	10, 20	10, 20	Agree
WESBERRY	SHERRIE	2:15-cv-00732-RMG	10, 20	10, 20	Agree
Lueth	Kathleen	2:15-cv-00739-RMG	20	20	Agree*
Sheridan	Sandra	2:15-cv-00740-RMG	20	20	Agree
Hyman	Billie	2:15-cv-00744-RMG	20	20	Agree
McCants	Jamie	2:15-cv-00746-RMG	20	20	Agree
Baker	Elizabeth	2:15-cv-00748-RMG	10	10	Agree
Malloy	Susie	2:15-cv-00750	10	10	Agree
TERRY	MARY JANE	2:15-cv-00755-RMG	20, 40	20, 40	Agree
Cash	Patricia	2:15-cv-00758	20	20	Agree
Cooper	Betty	2:15-cv-00760	20, 40, 20	20, 40, 20	Agree
White	Dianne	2:15-cv-00761	10,20	10,20	Agree
Green-King	Mary	2:15-cv-00763	10	10	Agree
Wilkerson	Gloristine	2:15-cv-00765	10, 20	10,20	Agree
Pruitt	Kathy Corina	2:15-cv-00767-RMG	20	20	Agree
Purnell	Barbara	2:15-cv-00768-RMG	20	20	Agree
Streeter	Mary	2:15-cv-00769	10	10	Agree
Killian	Cassandra	2:15-cv-00788	20, 40	20, 40	Agree
Pittman	Tammy	2:15-cv-00791-RMG	20	20	Agree
O'Leary	Deborah	2:15-cv-00792-RMG	10	10	Agree
Rodgers	Judith	2:15-cv-00793-RMG	20	20	Agree
McCorvey	Beulah	2:15-cv-00796-RMG	20	20	Agree
Pope	Patricia S.	2:15-cv-00800-RMG	20	20	Agree
Sirois	Sheila	2:15-cv-00801-RMG	20, 40	20, 40	Agree
Stall	Carolyn Y.	2:15-cv-00804-RMG	10	10	Agree
Harris	Sandra	2:15-cv-00806	10	10	Agree
Vaughn	Joanna	2:15-cv-00810-RMG	20	20	Agree
Noisette	Inez	2:15-cv-00814	10mg	10mg	Agree
Prosie	Alice	2:15-cv-00819	10mg; 20mg	10mg; 20mg	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Bell	Priscilla	2:15-cv-00820	10	10	Agree
Bartley	Gemma	2:15-cv-00823	10, 20	10, 20	Agree
Jones	Cathy	2:15-cv-00824	20mg	20mg	Agree
Baughman	Barbara	2:15-cv-00825-RMG	10	10	Agree
Edwards	Chiquinita	2:15-cv-00826-RMG	20	20	Agree
Hanna	Barbara	2:15-cv-00827-RMG	20	20	Agree
Hennessy	Lisa	2:15-cv-00828-RMG	10	10	Agree
Hooks	Charlotte	2:15-cv-00829-RMG	10	10	Agree
Lockhart	Dorothy	2:15-cv-00830-RMG	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Maloney	Beth	2:15-cv-00832-RMG	40, 20	40, 20	Agree
Martin	Rena	2:15-cv-00833-RMG	40	40	Agree
Messer-Holliday	Donna	2:15-cv-00834-RMG	20, 40	20, 40	Agree
Miller	Sue (Lydia)	2:15-cv-00835-RMG	20	20	Agree
Reed	Mary	2:15-cv-00836-RMG	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Reid	Sherry	2:15-cv-00837-RMG	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Sellers	Frances	2:15-cv-00838-RMG	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Spears	Deborah	2:15-cv-00839-RMG	40, 20	40, 20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Taylor	Clementine	2:15-cv-00840-RMG	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Thompson	Robin	2:15-cv-00841-RMG	10, 40	10, 40	Agree
Wheeler	Deborah	2:15-cv-00842-RMG	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Spoke	Marcine	2:15-cv-00843	10	10	Agree
Wilborn	Danielle	2:15-cv-00844-RMG	20	20	Agree
Greatheart	Yvonne M.	2:15-cv-00845	10, 20	10, 20	Agree
Wray	Delores	2:15-cv-00846-RMG	10, 20, 40	10, 20, 40	Agree
Marshall	Shirley	2:15-cv-00847-RMG	10	10	Agree
Jackson	Olor	2:15-cv-00849	40	40	Agree
Moffitt-Woods	Philippa	2:15-cv-00851-RMG	10, 20	10, 20	Agree
White	Dorothy	2:15-cv-00856-RMG	10, 20, 40	10, 20, 40	Agree
Odum	Helen	2:15-cv-00857-RMG	20, 40	20, 40	Agree
Radley	Barbara	2:15-cv-00858-RMG	20	20	Agree
Brame	Sandra	2:15-cv-00862	10	10	Agree
Young	Dorothy	2:15-cv-00863	20	20	Agree
Knapek	Shirley	2:15-cv-00866	10, 40	10, 40	Agree
Bernard	Melissa	2:15-cv-00868	20	20	Agree
Ramsey	Carlton	2:15-cv-00873-RMG	10	10	Agree
Sires	Pamela	2:15-cv-00874-RMG	20	20	Agree
Wilson	Mildred	2:15-cv-00882	20, 40	20, 40	Agree
Martin	Rosetta	2:15-cv-00883	20	20	Agree
McMullen	Anita	2:15-cv-00885	40	40	Agree
Douglas	Mary	2:15-cv-00886	10, 20	10, 20	Agree
Nelson	Virgie	2:15-cv-00889	20	20	Agree
Gibson	Mary	2:15-cv-00891	20, 40	20, 40	Agree*
Thomas	Carrie	2:15-cv-00892	10	10	Agree
Fontana	Henrietta	2:15-cv-00893	10, 20	10, 20	Agree
Pernell	Gearldine	2:15-cv-00894	10	10	Agree
Pich	Samath	2:15-cv-00896-RMG	20	20	Agree
Johnson	Sandra	2:15-cv-00898	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Busch	Kathleen	2:15-cv-00899-RMG	10, 20	10, 20	Agree
Yakes	Deborah L.	2:15-cv-00900-RMG	10, 20, 40	10, 20, 40	Agree
York	Julia Ann	2:15-cv-00902-RMG	20	20	Agree
Thomas	Vivian	2:15-cv-00903-RMG	10	10	Agree
Mecca	Randi	2:15-cv-00905-RMG	10, 20	10, 20	Agree
Michael	Flor	2:15-cv-00906-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Williams	Dianna	2:15-cv-00908	10, 20, 40	10, 20, 40	Agree
Seyferth	Karin	2:15-cv-00909	20	20	Agree
McCoy	Patricia	2:15-cv-00911	10	10	Agree
Pendergrast	Carol	2:15-cv-00913	10	10	Agree
Swanigan	Calverta Tate	2:15-cv-00914-RMG	20, 40	20, 40	Agree
Williams	Sylvia F.	2:15-cv-00915-RMG	10	10	Agree
Maysonet	Carmen J.	2:15-cv-00916	10, 20	10, 20	Agree
Compton	Joanne	2:15-cv-00919-RMG	10,20	10,20	Agree
Parker	Sharon	2:15-cv-00932-RMG	20	20	Agree
Everly	Tommie	2:15-cv-00938	10, 20	10, 20	Agree
Kessler	Sharon	2:15-cv-00939	10	10	Agree
Beard	Beverly	2:15-cv-00940-RMG	40	40	Agree
Newell-Lewis	Kathy	2:15-cv-00941	10, 20, 40	10, 20, 40	Agree
Richards	Elizabeth	2:15-cv-00942	10	10	Agree
Stier	Scottie	2:15-cv-00947	10, 40	10, 40	Agree
Bomgardner	Judy	2:15-cv-00950-RMG	20, 40	20	Agree
Warnes	Candace Lea	2:15-cv-00951	20	20	Agree
Vandling	Laura	2:15-cv-00952	10, 20	10, 20	Agree
Manning	Harvey	2:15-cv-00955-RMG	20	20	Agree
Moore	Gwendolyn	2:15-cv-00956-RMG	20, 40	20, 40	Agree
Robinson	Peggy	2:15-cv-00958-RMG	20	20	Agree
Sechler	Helen	2:15-cv-00959-RMG	40	40	Agree
Taylor	Pansey	2:15-cv-00960-RMG	40	40	Agree
Taylor	Pauline	2:15-cv-00961-RMG	40	40	Agree
Thomas	Mary	2:15-cv-00962-RMG	20	20	Agree
Washington	Barbarl	2:15-cv-00964-RMG	10	10	Agree
Waters	Lillie	2:15-cv-00965-RMG	10	10	Agree
Williams	Vergie	2:15-cv-00966-RMG	20	20	Agree
Dillon	Leatrice	2:15-cv-00967-RMG	20	20	Agree
HARRIS	ANNIE	2:15-cv-00968-RMG	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
CAMPBELL	BERTHA	2:15-cv-00969-RMG	20, 40	20, 40	Agree
Brinson	Catherine	2:15-cv-00971-RMG	10	10	Agree
Grafton	Sandra	2:15-cv-00972-RMG	20	20	Agree
Lopez	Betty	2:15-cv-00987-RMG	10	10	Agree
Koker	Sandra	2:15-cv-00988-RMG	20	20	Agree
Niles	Rebecca	2:15-cv-00989-RMG	40	40	Agree
Roberts	Amanda	2:15-cv-00991-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Wilson	Joanne	2:15-cv-00992-RMG	20	20	Agree
De Simone	Olimpia	2:15-cv-00997-RMG	10	10	Agree
Jordan	Terry	2:15-cv-00998-RMG	10	10	Agree
Kelly	Yvonne	2:15-cv-00999-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Sutton	Lee Nora	2:15-cv-01007-RMG	20	20	Agree
Harrison	Priscilla	2:15-cv-01015	10	10	Agree
West	Laura E.	2:15-cv-01022-RMG	10, 20	10, 20	Agree
Hickey	Martha (Estate of)	2:15-cv-01024	10, 20, 40, 60	10, 20, 40, 60	Agree
Hampton	Mary	2:15-cv-01025	20 mg three times per week	20 mg three times per week	Agree
Segers	Chin	2:15-cv-01027	20, 40	20, 40	Agree
Reed	Rebecca	2:15-cv-01028	20	20	Agree
Motti	Joyce	2:15-cv-01029	40	40	Agree
DiProfio	Kathy	2:15-cv-01030	10	10	Agree
Gammage	Dorothy	2:15-cv-01033	20	20	Agree
Black	Jerilyn	2:15-cv-01043	10, 20	10, 20	Agree
Bryson	Mary Jo	2:15-cv-01049-RMG	20	20	Agree
Everett	Judy	2:15-cv-01050	10, 20	10, 20	Agree
Blackwell	Tina	2:15-cv-01054-RMG	40	40	Agree
Booze-Flowers	Sheryle	2:15-cv-01058	10mg	10mg	Agree
Dreyer	Pamela S.	2:15-cv-01066	10, 40	10, 40	Agree
Jarrell	Teresita	2:15-cv-01067	40	40	Agree
Daley	Patricia J.	2:15-cv--01068	20	20	Agree
Browning	Mary	2:15-cv-01091	10, 20, 40	10, 20, 40	Agree
Barr	Linda Hill	2:15-cv-01092	40	40	Agree
Williams	Dora A.	2:15-cv-01110	10mg	10mg	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Davis	Julia	2:15-cv-01121-RMG	20, 40	20, 40	Agree
Kurkowski	Linda	2:15-cv-01133	10	10	Agree
Allmond	Sharon	2:15-cv-01139-RMG	40	40	Agree
Grillo	Debra	2:15-cv-01140-RMG	20	20	Agree
Heflin	Janice	2:15-cv-01143-RMG	20	20	Agree
Lottie	Patricia	2:15-cv-01145-RMG	20	20	Agree
Waters	Rosetta	2:15-cv-01146-RMG	20, 40	20, 40	Agree
Smith-Timmons	Rhonda	2:15-cv-01147-RMG	20	20	Agree
Engebretson	Karen Kaye (Estate of)	2:15-cv-01153	40, 60	40, 60	Agree
Flippo	Peggy	2:15-cv-01154	30	30	Agree
Fugiel	Anita	2:15-cv-01155	20, 40	20, 40	Agree
Lee	Jennifer	2:15-cv-01159	20mg	20mg	Agree
Hadley	Helen	2:15-cv-01163-RMG	10, 20, 40	10, 20, 40	Agree
Hanson	Patricia	2:15-cv-01164	10, 40	10, 40	Agree
Harry-Orr	Linda	2:15-cv-01165	10	10	Agree
Harrison	Mary	2:15-cv-01166	40	40	Agree
Gager	Dixie	2:15-cv-01179	10	10	Agree
Chase	Betty A.	2:15-cv-01182	10, 20, 40	10, 20, 40	Agree
Haye (Densky)	Jody	2:15-cv-01198-RMG	40	40	Agree
Keough	Sandra	2:15-cv-01199-RMG	10	10	Agree
Berling	Lucille	2:15-cv-01203	40	40	Agree
Frederick	Patricia	2:15-cv-01211	10, 20, 40	10, 20, 40	Agree
Brechner	Jerilyn	2:15-cv-01221	20,40	20,40	Agree
Santa Cruz	Maria	2:15-cv-01228-RMG	10	10	Agree
Vodek	Rebecca	2:15-cv-01229-RMG	10	10	Agree
Davis	Blontee	2:15-cv-01231-RMG	10, 20	10, 20	Agree
Cease	Charlene D.	2:15-cv-01233	20, 40	20, 40	Agree
Hamilton	Nonda	2:15-cv-01234	10	10	Agree
Korade	Ann	2:15-cv-01242	20mg; 40mg	20mg; 40mg	Agree
Allison	Deborah	2:15-cv-01243-RMG	10, 20	10, 30	Agree
NorthCutt	Judy Kay	2:15-cv-01248-RMG	5,10,20	5,10,20	Agree
Farmer	Sarah	2:15-cv-01249-RMG	20	20	Agree
Dickerson	Sandra	2:15-cv-01289	Lipitor 10, 20; Caduet 5/20	Lipitor 10, 20; Caduet 5/20	Agree
Bush	Jean L.	2:15-cv-01290	10	10	Agree
Henry	Jacquelyn	2:15-cv-01291	20, 40	20, 40	Agree
Jimenez	Gwendolyn	2:15-cv-01292	10, 20	10, 20	Agree
Kemp	Brenda	2:15-cv-01295	10, 20	10, 20	Agree
Korb	Catherine M.	2:15-cv-01296	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
King	Beverly	2:15-cv-01319	20	20	Agree
Castro	Tracy	2:15-cv-01321-RMG	20, 40	20, 40	Agree
Coffelt	Cheryl	2:15-cv-01329-RMG	10	10	Agree
Pryor	JoAnne	2:15-cv-01347	20mg	20mg	Agree
Bedigian	Vianca	2:15-cv-01356-RMG	10	10	Agree
Berryhill	Dora	2:15-cv-01356-RMG	20	20	Agree
Calvetti	Nancy	2:15-cv-01356-RMG	20	20	Agree
Deutsch	Marie	2:15-cv-01356-RMG	10	10	Agree
Fisher	Karen	2:15-cv-01356-RMG	20	20	Agree
Harper	Eunice	2:15-cv-01356-RMG	20	20	Agree
Haygood	Jo Ann	2:15-cv-01356-RMG	40	40	Agree*
Mabe	Cheryl	2:15-cv-01356-RMG	20	20	Agree
Porter	Elsie	2:15-cv-01356-RMG	10	10	Agree
Romero	Nora	2:15-cv-01356-RMG	10	10	Agree
Snodgrass	Mary Ann	2:15-cv-01356-RMG	20	20	Agree
Thompson	Iris	2:15-cv-01356-RMG	10	10	Agree
Webb	Patricia	2:15-cv-01356-RMG	40	40	Agree
Webb	Debra	2:15-cv-01356-RMG	20	20	Agree
Creveling-Alma	Donna M.	2:15-cv-01368	10	10	Agree
Kincaid	Mary	2:15-cv-01369	10, 20	10, 20	Agree
Guss	Linda	2:15-cv-01372-RMG	20	20	Agree
Johnson	Linda	2:15-cv-01374	20,40	20,40	Agree
Davis	Brenda	2:15-cv-01375	20,40	20,40	Agree
Tyler	Margaret	2:15-cv-01396-RMG	10, 20, 40	10, 20, 40	Agree
Cohan-Zakay	Guity	2:15-cv-01405	10	10	Agree
Cohen	Cathryn G.	2:15-cv-01406	10	10	Agree
Knotts	Carol M.	2:15-cv-01408	10, 20	10, 20	Agree
Melton	Shirley	2:15-cv-01410-RMG	40	40	Agree
Williams	Carolyn	2:15-cv-01411-RMG	10, 20	10, 20	Agree
Waggoner	Virginia	2:15-cv-01412-RMG	10, 20	10, 20	Agree
Fetcko	Denise	2:15-cv-01419	20, 40	20, 40	Agree
Graff	Peggy Gail	2:15-cv-01420	20	20	Agree
Kroeze	Susan Kay	2:15-cv-01421	20, 40	20, 40	Agree
Hoke	Jacintha	2:15-cv-01423	10	10	Agree
Good	Mardena	2:15-cv-01424	20mg; 10mg	20mg; 10mg	Agree
Carter	Linda	2:15-cv-01425	40mg	40mg	Agree
Flemings	Teresa	2:15-cv-01426	10mg	10mg	Agree
Resurreccion	Belen	2:15-cv-01428	10mg	10mg	Agree
Wilson	Geraldine	2:15-cv-01429	10 mg	10 mg	Agree
Tagavilla	Zenaida	2:15-cv-01440-RMG	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Whitworth	Carol	2:15-cv-01441-RMG	20	20	Agree
Huber	Billie	2:15-cv-01442	10	10	Agree
Huitt	Carol	2:15-cv-01444	10	10	Agree
Cowan	Brenda	2:15-cv-01445	40	40	Agree
Kicinski	Pauline	2:15-cv-01446	10	10	Agree
Reese	Brenda	2:15-cv-01447	10, 20	10, 20	Agree
Kaye	Carol	2:15-cv-01449-RMG	40	40	Agree
Lee	Macy	2:15-cv-01450	10	10	Agree*
Benson	Lara	2:15-cv-01452-RMG	40	40	Agree
Mason	Marilyn	2:15-cv-01453-RMG	10,20,40	10,20,40	Agree
Burch	Tracy	2:15-cv-01454	20	20	Agree
Hawks	Barbara	2:15-cv-01461	10	10	Agree
Cunningham	Sarah	2:15-cv-01464-RMG	20	20	Agree*
Bukowski	Mary	2:15-cv-01497	10	10	Agree
Sparks	Lori	2:15-cv-01498-RMG	10, 20	10, 20	Agree
Gruden	Barbara A.	2:15-cv-01500	10, 20, 40	10, 20, 40	Agree
Dominick-McFarlane	Carole	2:15-cv-01521-RMG	10	10	Agree
Lewicki	Teresa	2:15-cv-01522	10, 20, 10, 20	10, 20, 10, 20	Agree
Hartman	Linda	2:15-cv-01527	10	10	Agree
Charlton	Marsetta	2:15-cv-01528	20	20	Agree
Hemmingsen	Janyce	2:15-cv-01529	10	10	Agree
Rison	Edwina H.	2:15-cv-01539-RMG	10	10	Agree
Stokes	Claudetta	2:15-cv-01542	20, 40	20, 40	Agree*
Jackson	Wynette F.	2:15-cv-01543-RMG	10,20	10,20	Agree
Hartman	Kay	2:15-cv-01544-RMG	20,40	20,40	Agree
RATCLIFF	CLARA	2:15-cv-01564-RMG	10, 20	10, 20	Agree
NELSON	RHONDA	2:15-cv-01565-RMG	10	10	Agree
Baldwin	Susan	2:15-cv-01574	10	10	Agree
Ferrarini	Lynda M.	2:15-cv-01575	10, 20	10, 20	Agree
Spencer	Mary	2:15-cv-01576	10	10	Agree
Burns	Peggy	2:15-cv-01578	20	20	Agree
Holland	Jacqueline	2:15-cv-01579-RMG	20	20	Agree
Kraft	Rosemarie	2:15-cv-01580	10	10	Agree
Holman	Phyllis	2:15-cv-01586-RMG	40	40	Agree
Lewis	Thelma	2:15-cv-01591	20	20	Agree
Hansen	Oleta	2:15-cv-01639	40	40	Agree
Chenier	Patsy	2:15-cv-01640	10	10	Agree
Collins	Betty Jane	2:15-cv-01641	20	20	Agree
Cummings	Barbara	2:15-cv-01642	10	10	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Jackson	Delores	2:15-cv-01665	10, 20, 40	10, 20, 40	Agree
Famolare	Virginia	2:15-cv-01666	5, 20	5, 20	Agree
Garvin	Rosa	2:15-cv-01667	20, 40	20, 40	Agree
Hill	Annie M.	2:15-cv-01668	10	10	Agree
Brengel	Dorothy	2:15-cv-01669	10, 20	10, 20	Agree
KOUNS	JENNIFER	2:15-cv-01685-RMG	20	20	Agree
Campbell	Carol	2:15-cv-01686	10, 20, 40	10, 20, 40	Agree*
Cates	Louise	2:15-cv-01687	10, 20	10, 20	Agree
Clark	Jacqueline	2:15-cv-01689	40	40	Agree
Curtis	Agnes	2:15-cv-01692	10, 40	10, 40	Agree
Knapp	Tammy	2:15-cv-01693	40	40	Agree*
Tube	Skeeter M.	2:15-cv-01694-RMG	20	20	Agree
Lindsey	Johnnie	2:15-cv-01700-RMG	20, 40	20, 40	Agree
McGonigle	Bonnie	2:15-cv-01707-RMG	10, 20, 40	10, 20, 40	Agree
Roberson	Lou Ellen	2:15-cv-01708-RMG	40	40	Agree
Person	Rose	2:15-cv-01709-RMG	20	20	Agree
Bender	Betty	2:15-cv-01711	20	20	Agree
Currie	Joann	2:15-cv-01712	10, 20, 40	10, 20, 40	Agree
Erickson	Cynthia	2:15-cv-01713	40, 20	40, 20	Agree
Scott	Angela	2:15-cv-01745	40mg	40mg	Agree
Graham	Arnia Faye	2:15-cv-01746	10	10	Agree
Patterson	Mary	2:15-cv-01747	20	20	Agree
Wallenhorst	Joyce	2:15-cv-01760	40mg	40mg	Agree
Atcheson	Lucille	2:15-cv-01762-RMG	10	10	Agree
Hughes	Cindy S.	2:15-cv-01764-RMG	20, 40	20, 40	Agree
Swinney	Linda	2:15-cv-01770	40	40	Agree
Hess	Ellen	2:15-cv-01783	10	10	Agree
Vitale	Linda	2:15-cv-01792-RMG	10	10	Agree
Dunn	Shirley	2:15-cv-01794	20, 40	20, 40	Agree
McCormick	Geralynn J.	2:15-cv-01795	20	20	Agree
Neil	Mavis	2:15-cv-01805	10mg	10mg	Agree
Haas	Carolyn	2:15-cv-01808	20mg, 40mg	20mg; 40mg	Agree
Jones	Linda	2:15-cv-01812-RMG	10	10	Agree
Graham	Barbara	2:15-cv-01815	10	10	Agree
Bailey	Martha Ann	2:15-cv-01816	20	20	Agree
Fuess	Kathryn	2:15-cv-01817	20	20	Agree
Clarke	Bernice	2:15-cv-01820	10	10	Agree
Galbiso	Denise	2:15-cv-01821	10	10	Agree
Winfrey	Delilah	2:15-cv-01828-RMG	10	10	Agree
Parrott	Lois	2:15-cv-01829-RMG	20, 40	20, 40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Bowers	Judith A.	2:15-cv-01831	20, 40	20, 40	Agree
Brand	Judy	2:15-cv-01832	20	20	Agree
Drury	Rebecca	2:15-cv-01833	20	20	Agree
Harris	Gayle	2:15-cv-01834	20	20	Agree
Nagy	Donna	2:15-cv-01835-RMG	10	10	Agree
Russell	Carmane	2:15-cv-01836-RMG	40	40	Agree
Zavelovich	Eugenia	2:15-cv-01837-RMG	10, 20, 40	10, 20, 40	Agree
Pennington	Norma	2:15-cv-01838-RMG	5, 10	5, 10	Agree
Pinches	Pat	2:15-cv-01840-RMG	20	20	Agree
Rodriguez	Evangelina	2:15-cv-01841-RMG	10	10	Agree
Crawford	Jeanette	2:15-cv-01849	40	40	Agree
Hartley	Lisa	2:15-cv-01851	10mg	10mg	Agree
Schaffer	Doris	2:15-cv-01852	10mg; 20mg	10mg; 20mg	Agree
Townsel	Altresa	2:15-cv-01853	10mg; 20mg; 40mg	10mg; 20mg; 40mg	Agree
Underwood	Julie	2:15-cv-01854	10 mg	10 mg	Agree
Welch	Garnette	2:15-cv-01855	10mg	10mg	Agree
Hemmes	Margaret	2:15-cv-01857	20	20	Agree
Piszczek	Queen	2:15-cv-01861-RMG	10, 20	10, 20	Agree
Jackson	Carolyn	2:15-cv-01862	10mg	10mg	Agree
Riordan	Patricia	2:15-cv-01863-RMG	40	40	Agree
SHEAR	DEBORAH	2:15-cv-01864-RMG	20, 40	20, 40	Agree
MILLER	SHARON	2:15-cv-01865-RMG	40	40	Agree
Sibert	Joyce M.	2:15-cv-01869-RMG	10	10	Agree
Parrish	Loucella	2:15-cv-01879	10, 20	10, 20	Agree
Thomas	Annie	2:15-cv-01880	20	20	Agree
Vernotica	Linda	2:15-cv-01897-RMG	10, 20	10, 20	Agree
Lyall	Vi	2:15-cv-01898-RMG	10	10	Agree
Douglass	Ellen	2:15-cv-01901	20mg; 40mg	20mg; 40mg	Agree
Williams	Dora L.	2:15-cv-01902	20mg	20mg	Agree
Smith	Ermagene	2:15-cv-01903	10mg	10mg	Agree
Ambarchian	Karmen	2:15-cv-01911	10	10	Agree
Antonyan	Veganush	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Lane	Wanda	2:15-cv-01911	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
LaTorre	Myra	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Mayo	Nedra	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
McKee	Margo	2:15-cv-01911	40	40	Agree
Miller	Beverly	2:15-cv-01911	40	40	Agree
Mueller	Elizabeth	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Parsamyan	Elizabeth	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Peddicord	Meighan	2:15-cv-01911	40	40	Agree
Poghosyan	Areknazan	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Pogosyan	Asyor	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Ritzel	Carolyn	2:15-cv-01911	20	20	Agree
Sanders	Helen	2:15-cv-01911	40	40	Agree
Simms	Roberta	2:15-cv-01911	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Smith	Donna	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Smith	Sophia	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
St.JulienneRamsey	Darlene	2:15-cv-01911	20, 40	20, 40	Agree
Stocks	Viola	2:15-cv-01911	10	10	Agree
Suggs	Pearl	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Taltoan	Cecilia	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Tamba	Angela	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Taylor	Sandra	2:15-cv-01911	20	20	Agree
Tennessee	Delores	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Terjanyan	Alvard	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Thompson	Caroline	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Trdadyan	Araksi	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Vanburen	Katherine	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Wagner	Brenda	2:15-cv-01911	10	10	Agree
Walker	Lawanda	2:15-cv-01911	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Walker	Vandora	2:15-cv-01911	10	10	Agree
Watkins	Christine	2:15-cv-01911	10	10	Agree
Wesley	Donita	2:15-cv-01911	40	40	Agree
Wiley	Joy	2:15-cv-01911	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre- existing Diabetes; Reserves Rights
Wilmerton	Betty	2:15-cv-01911	40	40	Agree
Worthy	Martha	2:15-cv-01911	10	10	Agree
Arutyunyan	Araks	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Bondurant	Gloria	2:15-cv-01912	20	20	Agree
Carter	Dale	2:15-cv-01912	40	40	Agree
Drake	Sandra	2:15-cv-01912	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Forest	Patricia	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Galstian	Larisa	2:15-cv-01912	20	20	Agree
Garcia	Martha	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Gilbert	Pauline	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Ginyard	Valerie	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Gordon	Dawn	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Graves	Beverly	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Green	Claudette	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Green	Sallie	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Hanks	Glenda	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Harrington	Eddre	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Heath-Thomas	Jennie	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Honeycutt	Linda	2:15-cv-01912	10	10	Agree
Jackson	Laura	2:15-cv-01912	40	40	Agree
Jenkins	Darlene	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Jenkins	Gwen	2:15-cv-01912	10	10	Agree
Johnese	Mary	2:15-cv-01912	40	40	Agree*
Johnson	Mae	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Jones	Margaret	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Khachatryan	Srbui	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Leadbetter	Robin	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Mack	Doris	2:15-cv-01912	20	20	Agree
McKinney	Charlotte	2:15-cv-01912	40	40	Agree
Melendez	Suenil	2:15-cv-01912	20	20	Agree
Mercer	Lucile	2:15-cv-01912	40	40	Agree
Pittaway	Barbara	2:15-cv-01912	10	10	Agree
Porter	Susie	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Pugh	Marjorie	2:15-cv-01912	40	40	Agree
Rolland	Flora	2:15-cv-01912	10	10	Agree
Ruiz	Maria	2:15-cv-01912	20	20	Agree
Scott	Kathy	2:15-cv-01912	20	20	Agree
Smith	Lydia	2:15-cv-01912	60	60	Agree
Smith	Patricia	2:15-cv-01912	40	40	Agree
Starrett	Kathleen	2:15-cv-01912	20	20	Agree
Thomas	Mary	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Ward	Carrie	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Williams	Dorothy	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Wilson	Ardina	2:15-cv-01912	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Ali	Violet	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Ayrapetyan	Mariam	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Bardwell	Edna	2:15-cv-01913	20	20	Agree
Bassett	Linda	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Bowman	Cordelia	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Bowman	Melva	2:15-cv-01913	40	40	Agree
Brantley-Garrett	Lillie	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Britten	Margie	2:15-cv-01913	20	20	Agree
Brooks	Deloris	2:15-cv-01913	10, 40	10, 40	Agree
Brooms	Sherrie	2:15-cv-01913	40	40	Agree
Butler	Brenda	2:15-cv-01913	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Byron	Elizabeth	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Cater	Elizabeth	2:15-cv-01913	40	40	Agree
Change	Ruth	2:15-cv-01913	Unknown	Unknown	Disagree - 40 mg
Christian	Brenda	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Coleman	Cynthia	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Coleman	Geneva	2:15-cv-01913	10	10	Agree
Cordell	Julie	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Cubie	Geraldine	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Curtis	Ocie	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Doane	Gladys	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Faulkner	Althea	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Hardy-Cole	Debra	2:15-cv-01913	20	20	Agree
Jackson	Phyllis	2:15-cv-01913	20	20	Agree
McDowall	Claudette	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Radl	Margaret	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Rosales	Beatriz	2:15-cv-01913	20	20	Agree
Sharkey	Vera	2:15-cv-01913	10	10	Agree
Thompson	Sarah	2:15-cv-01913	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Williams	Amber	2:15-cv-01913	20	20	Agree
Williams	Marlene	2:15-cv-01913	10	10	Agree
Winn	Sharon	2:15-cv-01913	Alleges Pre-existing Diabetes then 40	Alleges Pre-existing Diabetes then 40	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Srun	Heng Ya	2:15-cv-01915-RMG	40	40	Agree
Dols	Eileen	2:15-cv-01916	10	10	Agree
Eckert	Helen Ann	2:15-cv-01917	10, 20	10, 20	Agree
Graves	Brenda	2:15-cv-01919	10	10	Agree
Hoening	Nancy	2:15-cv-01920	10, 20	10,20	Agree
Dorrity	Myra	2:15-cv-01924	20, 40	20, 40	Agree
Hernandez	Elida	2:15-cv-01925	10	10	Agree
Huseby	Kirsten	2:15-cv-01926	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Knisley	Lorena	2:15-cv-01927	5, 10	5, 10	Agree
Minatra	Sandra	2:15-cv-01939-RMG	10	10	Agree
Schmidtzinksky	Theresa	2:15-cv-01940-RMG	10	10	Agree
Shelton	Mary Alice	2:15-cv-01942			
Maddox	Gracie	2:15-cv-01968-RMG	20	20	Agree
Smola	Vicki	2:15-cv-01974	10, 20, 40	10, 20, 40	Agree
Wadibia	Carol	2:15-cv-01987-RMG	10	10	Agree
Eidsness	Linda	2:15-cv-01991	40	40	Agree
Campbell	Cynthia	2:15-cv-01994-RMG	10	10	Agree
Pickel	Susan	2:15-cv-01998-RMG	5, 10, 20	5, 10, 20	Agree
Longoria, JoAnn	JoAnn	2:15-cv-02001	40	40	Agree
Wegner	Ina May	2:15-cv-02018-RMG	20	20	Agree
Gouff	Alice	2:15-cv-02026	20	20	Agree
Dunn	Lucreasia	2:15-cv-02031	20	20	Agree
Pruett	Rosalind	2:15-cv-02032	20	20	Agree
MILFORD	CLAIRE	2:15-cv-02033-RMG	10, 20	10, 20	Agree
Kazanas	Judith	2:15-cv-02037	40 mg twice per week	40 mg twice per week	Agree
Kosnitch	Josephine	2:15-cv-02047-RMG	20	20	Agree
Smith	Sandra	2:15-cv-02061	20 (Generic), 40 (Generic), 40	20 (Generic), 40 (Generic), 40	Agree
Tristano	Nancy	2:15-cv-02067	40	40	Agree
Nichols	Kathy	2:15-cv-02070	20	20	Agree
Buchanan	Debra	2:15-cv-02072	40	40	Agree
Cale	Audrey	2:15-cv-02081	10, 20	10, 20	Agree
Metcalfe	June	2:15-cv-02090-RMG	10	10	Agree
Brown	Laura	2:15-cv-02153	20	20	Agree
Richardson	Esver	2:15-cv-02154-RMG	20,40	20,40	Agree
Hedden	Willie	2:15-cv-02155	10	10	Agree
McDonald	Paula M.	2:15-cv-02156-RMG	10,20,40	10,20,40	Agree
Dunovant	Joe Ann	2:15-cv-02160	20	20	Agree
Mikles	Terry	2:15-cv-02171-RMG	20	20	Agree
McDonald	Deborah	2:15-cv-02172-RMG;	40	40	Agree
Oster	Eileen	2:15-cv-02175-RMG	10, 20, 40	10, 20, 40	Agree
Fusco	Louise	2:15-cv-02176	20	20	Agree
Mosby	Alice	2:15-cv-02180	10	10	Agree
Tague	Elida	2:15-cv-02181	20	20	Agree
Anderson	Diane	2:15-cv-02182	10, 20, 40	10, 20, 40	Agree
Peterson	Helen	2:15-cv-02183-RMG	10	10	Agree
Essah	Lima	2:15-cv-02184	10,20	10,20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Peavey	Dorothy	2:15-cv-02185	10	10	Agree
Duncan	Rose	2:15-cv-02191	10	10	Agree
Singh	Reinell (Estate of)	2:15-cv-02197	10	10	Agree
Tucker	Victoria	2:15-cv-02201-RMG	10,20,40	10,20,40	Agree
Johnson	Barbara	2:15-cv-02202-RMG	10,20	10,20	Agree
Melton	Jean	2:15-cv-02206-RMG	10	10	Agree
Milham	Joanne	2:15-cv-02211-RMG	10	10	Agree
ABERNATHY	BONNIE	2:15-cv-02215-RMG	20, 40	20, 40	Agree
Bentley	Rebecca Joan	2:15-cv-02219	10	10	Agree
Slycord	Barbara	2:15-cv-02225-RMG	10, 20	10, 20	Agree
Barreto	Celia	2:15-cv-02232	10, 20	10, 20	Agree
Davis	Denise Yow	2:15-cv-02233	10	10	Agree
Hunter	Patricia	2:15-cv-02234	40	40	Agree
Thacker	Joan	2:15-cv-02236-RMG	10, 20	10, 20	Agree
Scott	Judy	2:15-cv-02237	10, 20	10, 20	Agree
Westerlund	Margot	2:15-cv-02242-RMG	20, 40	20, 40	Agree
Wyatt	LaVell	2:15-cv-02252-RMG	20	20	Agree
White	Josephine	2:15-cv-02254	40	40	Agree
Dates	Farah	2:15-cv-02255-RMG	40	40	Agree
Cushman	Deborah	2:15-cv-02256-RMG	10	10	Agree
Folsom	Gaye	2:15-cv-02283	20	20	Agree
Stephens	Jacquelyn	2:15-cv-02285-RMG	10, 20, 40	10, 20, 40	Agree
Smith	Sandra J.	2:15-cv-02286-RMG	10, 20	10, 20	Agree
O'Connell	Irene	2:15-cv-02287-RMG	10, 20	10, 20	Agree
Michaels	Michelle	2:15-cv-02288-RMG	20	20	Agree
Orla	Barbara	2:15-cv-02295	20	20	Agree
Taylor	Irene	2:15-cv-02298-RMG	10	10	Agree
Payne	Betty	2:15-cv-02299-RMG	10, 20	10, 20	Agree
Orlando	Shirley	2:15-cv-02300-RMG	10	10	Agree
Bodenhamer	Nancy J.	2:15-cv-02308	10, 20	10, 20	Agree
Peterson	Dr. Kari, ED.D	2:15-cv-02309-RMG	10	10	Agree
Davis	Sybil	2:15-cv-02310	40	40	Agree
Lund	Marcia	2:15-cv-02320-RMG	5-10 (Caduet), 10 (Lipitor), 40 (Lipitor), 10-20 (Caduet)	5-10 (Caduet), 10 (Lipitor), 40 (Lipitor), 10-20 (Caduet)	Agree
Tidwell	Jo Ann	2:15-cv-02326			
Mays	Eloise	2:15-cv-02334	10	10	Agree
Lee	Mona	2:15-cv-02335	10, 20, 40	10, 20, 40	Agree
Milano	Christina	2:15-cv-02336-RMG	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Pettit	Darlene	2:15-cv-02337-RMG	10, 20, 40	10, 20, 40	Agree
Magoon	Alice	2:15-cv-02351	20	20	Agree
Shu	Lee-Fen	2:15-cv-02355-RMG	20	20	Agree
Shultz	Billie	2:15-cv-02363	10, 20	20	Agree
Doherty	Carol	2:15-cv-02364	20,40	20,40	Agree
Hubbard	Betty	2:15-cv-02369	20	20	Agree
Welch	Vickie	2:15-cv-02376-RMG	20, 40	20, 40	Agree
Chrisman	Judy	2:15-cv-02381	20	20	Agree
Graves	Carol S.	2:15-cv-02382	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Moskaluk	Mary Ann	2:15-cv-02384-RMG	20, 40	20, 40	Agree
Owens	Linda	2:15-cv-02385-RMG	20	20	Agree
Rawlings	Debra	2:15-cv-02401-RMG	10	10	Agree
Sands	Pearl	2:15-cv-02404	20	20	Agree
Larkin	Diane	2:15-cv-02405-RMG	10	10	Agree
Oliver	Brenda	2:15-cv-02406-RMG	10	10	Agree
Moulder	Patricia	2:15-cv-02407-RMG	10	10	Agree
Ruggles	Sherry	2:15-cv-02421-RMG	10	10	Agree
Smith	Bonita	2:15-cv-02422-RMG	20	20	Agree
Workman	Joan	2:15-cv-02455-RMG	10	10	Agree
Shaw	Mindie J.	2:15-cv-02456-RMG	20, 40	20, 40	Agree
Mowrey	Rebecca	2:15-cv-02460-RMG	20, 40	20, 40	Agree
Tucci	Patricia	2:15-cv-02461-RMG	10, 20, 40	10, 20, 40	Agree
Bearden	Brenda	2:15-cv-02467	10, 20, 40	10, 20, 40	Agree
Squyres	Margie	2:15-cv-02472-RMG	20	20	Agree
Holmes	Deborah	2:15-cv-02483-RMG	20, 40	20, 40	Agree
Alexander	Colleen	2:15-cv-02486	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Leslie	Deborah	2:15-cv-02487-RMG	20	20	Agree
Parrish	Eileen Jo	2:15-cv-02488-RMG	20	20	Agree
Lariscy	Maxine	2:15-cv-02489-RMG	10, 20, 40	10, 20, 40	Agree
Tillery	Linda J.	2:15-cv-02490-RMG	10	10	Agree
Totten	Delores	2:15-cv-02493	20	20	Agree
LeJeune	Vienna	2:15-cv-02494	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Florence	Lois	2:15-cv-02495	40	40	Agree
Venzant	Margaret	2:15-cv-02497	20	20	Agree
Lewis	Ella	2:15-cv-02498	40	40	Agree
Herbertson	Ann	2:15-cv-02500	10	10	Agree
Staples	Sheila	2:15-cv-02501	20, 40	20, 40	Agree
Land	Wanda	2:15-cv-02502-RMG	20, 40	20, 40	Agree
Peters	Lynne	2:15-cv-02505-RMG	20	20	Agree
Sher	Nina	2:15-cv-02506-RMG	10	10	Agree
Zucker	Miriam	2:15-cv-02512-RMG	40	40	Agree
Moreland-Carmona	Joy	2:15-cv-02515	40	40	Agree
Sargent	Adele	2:15-cv-02520-RMG	20	20	Agree
Boudrie	Pamela L.	2:15-cv-02522	20	20	Agree
Payne	Annette Leone	2:15-cv-02528-RMG	10	10	Agree
Carroll	Susan	2:15-cv-02541-RMG	20	20	Agree
Taylor	Beverly	2:15-cv-02555-RMG	10	10	Agree
Povlitzki	Mary Ann	2:15-cv-02565-RMG	10	10	Agree
Walker	Paula	2:15-cv-02576-RMG	10	10	Agree
Villanueva	Margaretta	2:15-cv-02597-RMG	40	40	Agree
Wiggans	Evelyn	2:15-cv-02598	40	40	Agree
Snell	Anne	2:15-cv-02599	20	20	Agree
Rivello	Lauralee	2:15-cv-02601	20	20	Agree
Coleman	Doris M.	2:15-cv-02602	10	10	Agree
Kaissar	Faye	2:15-cv-02605	10	10	Agree
Marsh	Betty	2:15-cv-02606	10	10	Agree
Buzard	Annette M.	2:15-cv-02612- RMG	10	10	Agree
Jewell	Cheryl	2:15-cv-02615	20	20	Agree
Abel	Kathleen	2:15-cv-02619	20	20	Agree
Farris	Linda	2:15-cv-02620	20, 40	20, 40	Agree
Darrington	Bessie	2:15-cv-02630	20	20	Agree
BUTLER	JOAN	2:15-cv-02643-RMG	20, 40	20, 40	Agree
WALKER	GINA	2:15-cv-02644-RMG	10, 20	10, 20	Agree
Cummings	Anna	2:15-cv-02650	20, 40	20, 40	Agree
Huey	Marie B.	2:15-cv-02651-RMG	10	10	Agree
JACKSON	ELAINE	2:15-cv-02652-RMG	10, 20, 40	10, 20, 40	Agree
Grzelak	Diane M.	2:15-cv-02660	20	20	Agree
Tanner	Dawn S.	2:15-cv-02679-RMG	10	10	Agree
Sands	Marcia	2:15-cv-02680-RMG	20	20	Agree
Thompson	Judith	2:15-cv-02681-RMG	10, 20	10, 20	Agree
Tillman	Sandra E.	2:15-cv-02682-RMG	20, 40	20, 40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Williams	G96Mae	2:15-cv-02683-RMG	20	20	Agree
Fry	Eleanor	2:15-cv-02691-RMG	40	40	Agree
Widmayer	Lulu	2:15-cv-02694	20	20	Agree
Gallman	Ellen	2:15-cv-02709	10	10	Agree
Elwell	Peggy	2:15-cv-02720	10, 20	10, 20	Agree
Jump	Shirley	2:15-cv-02729-RMG	10	10	Agree
Leonard	Cathy	2:15-cv-02732	10	10	Agree
Roth	Elizabeth	2:15-cv-02747-RMG	10, 20	10, 20	Agree
Rankin	DEBORAPatricia	2:15-cv-02752-RMG	40	40	Agree
Tannenbaum	Harriet	2:15-cv-02753-RMG	10, 20	10, 20	Agree
Knotts	Judy	2:15-cv-02769	10	10	Agree
Varnado	Thelma	2:15-cv-02771-RMG	10	10	Agree
Crawford	Joan	2:15-cv-02775	10, 20	10, 20	Agree
Kasey	Regina	2:15-cv-02792	20	20	Agree
Moore	Donna	2:15-cv-02799-RMG	40	40	Agree
Thompson	Brenda	2:15-cv-02825	40, 20	40, 20	Agree
Meyers	Barbara	2:15-cv-02826	10	10	Agree
Birkelbach	Laura	2:15-cv-02835	20	20	Agree
Hodges	Jacqueline	2:15-cv-02836	10	10	Agree
Nelson	Pamela	2:15-cv-02837-RMG	10, 20	10, 20	Agree
Wong	Linda	2:15-cv-02848-RMG	10, 20	10, 20	Agree
FERNANDEZ	MARIA	2:15-cv-02851-RMG	10, 20, 40	10, 20, 40	Agree
Abelli	Anna	2:15-cv-02854-RMG	10	10	Agree
Brant	Sharon W.	2:15-cv-02881	5	5	Agree
Hickey	Julie	2:15-cv-02885	20	20	Agree
Cook	Shirley	2:15-cv-02887	10	10	Agree
WARREN	BETTY	2:15-cv-02915-RMG	20	20	Agree
MAGEE	LORETTA	2:15-cv-02917-RMG	10, 20	10, 20	Agree
MOORE	PATRICIA	2:15-cv-02918-RMG	40	40	Agree
STALLINGS	SARAH	2:15-cv-02919-RMG	40	40	Agree
WARD	SHELIA	2:15-cv-02920-RMG	20	20	Agree
WOODS	SHIRLEY	2:15-cv-02921-RMG	20	20	Agree
Generette	Janet	2:15-cv-02925	10mg	10mg	Agree
Lipnit	Mariana	2:15-CV-02946	10, 20, 40	10, 20, 40	Agree
Lee	Constance	2:15-cv-02973	10, 20	10, 20	Agree
Baker	Susan	2:15-cv-02976	20	20	Agree
Coleman	Linda	2:15-cv-02984	10	10	Agree
Reed	Nora	2:15-cv-02993-RMG	10	10	Agree
Glickman	Danielle	2:15-cv-02997-RMG	20	20	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Hoffman	Kim	2:15-cv-03004	Alleges Pre-existing Diabetes	Alleges Pre-existing Diabetes	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Cullen	Evelyn	2:15-cv-03005	20	20	Agree
Gurevich	Adele	2:15-cv-03006	10mg; 20mg	10mg; 20mg	Agree
Agosto-Sanchez	Nidia (Nilda)	2:15-cv-03007	20	20	Agree
Peeler	Fran	2:15-cv-03016	10, 20, 40	10, 20, 40	Agree
Franklin	Melonise	2:15-cv-03032-RMG	10	10	Agree
Gatrell	Kay	2:15-cv-03033-RMG	10	10	Agree
Gonzalez	Yolanda	2:15-cv-03035-RMG	20	20	Agree
Gross	Sarah	2:15-cv-03037	10	10	Agree
Freeman	Wanda	2:15-cv-03049-RMG	10	10	Agree
Henderson	Dorothy	2:15-cv-03065-RMG	10, 40	10, 40	Agree
Isom	Althaun	2:15-cv-03066-RMG	40	40	Agree
Hanes	Sandra L.	2:15-cv-03080-RMG	20	20	Agree
Franza	Linda	2:15-cv-03090	20, 40	20, 40	Agree
Lee	Charlene	2:15-cv-03092-RMG	20	20	Agree
Lopez	Carmen	2:15-cv-03093-RMG	10, 40	10, 40	Agree
Lopiccolo	Kathryn Christine	2:15-cv-03094-RMG	40	40	Agree
James	Minnie	2:15-cv-03097-RMG	10,20	10,20	Agree
Lynch	Iris	2:15-cv-03100-RMG	40	40	Agree
Martin McSwain	Shirley Elaine	2:15-cv-03101-RMG	10	10	Agree
Mcneal	Mildred	2:15-cv-03104-RMG	20	20	Agree
Stevens	Jonnie	2:15-cv-03111-RMG	10	10	Agree
Lobdell	Barbara	2:15-cv-03115-RMG	20	20	Agree
WILLIAMS	GWENDOLYN	2:15-cv-03118-RMG	20	20	Agree
Thayer	Anita	2:15-cv-03119	20	20	Agree
McQuirk	Mary Lynn	2:15-cv-03124-RMG	40	40	Agree
Northime	Elizabeth	2:15-cv-03125-RMG	20	20	Agree
Engelbrecht	Brenda	2:15-cv-03126	20	20	Agree
Gasper	Diane	2:15-cv-03127	20	20	Agree
Tatman	Christine M.	2:15-cv-03137-RMG	10	10	Agree
San Jose	Gregoria	2:15-cv-03139	10	10	Agree
Bunch	Betty	2:15-cv-03144-RMG	20	20	Agree
Ruffo	Sallie	2:15-cv-03146-RMG	10	10	Agree
Stanaland	Barbara	2:15-cv-03148-RMG	10, 20, 40	10, 20, 40	Agree
Mills	Patricia	2:15-cv-03151-RMG	10, 20	10, 20	Agree
Robles	Doris	2:15-cv-03153-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Morris	Judy	2:15-cv-03154-RMG	20, 40	20, 40	Agree
Warren	Lottie	2:15-cv-03168-RMG	10, 20, 40	10, 20, 40	Agree
Webster	Vittoria	2:15-cv-03171-RMG	10	10	Agree
White	Dorothy	2:15-cv-03172-RMG	40	40	Agree
Ador	Mary	2:15-cv-03181	20	20	Agree
Brake	Carolyn	2:15-cv-03183	20	20	Agree
Francis	Daphne	2:15-cv-03191-RMG	10	10	Agree
Artis	Pearlie	2:15-cv-03205-RMG	20, 40	20, 40	Agree
Blackshear	Martha	2:15-cv-03206-RMG	20	20	Agree
Cano	Ana	2:15-cv-03208-RMG	20	20	Agree
Henck	Margaret	2:15-cv-03215-RMG	40	40	Agree
Bueker	Karen	2:15-cv-03223	20	20	Agree
Evans	Francine	2:15-cv-03229-RMG	40	40	Agree
Everette	Etta	2:15-cv-03230-RMG	20	20	Agree
Holycross	Donetta	2:15-cv-03235-RMG	40	40	Agree
Elias	Karen L.	2:15-cv-03242-RMG	20	20	Agree
Worzack	Constance	2:15-CV-03244	10, 20	10, 20	Agree
Laureano	Elizabeth	2:15-cv-03277	20	20	Agree
Marks	Mary D.	2:15-cv-03281-RMG	20	20	Agree
Walker	Shirley Ann	2:15-cv-03284-RMG	30	30	Agree
Carter	Martha J.	2:15-cv-03288	10	10	Agree
Wade	Genia	2:15-cv-03296-RMG	10	10	Agree
Cauthen	Anita	2:15-cv-03297	20	20	Agree
Watkins	Louise	2:15-cv-03299-RMG	10	10	Agree
Young	Shirley A.	2:15-cv-03301-RMG	20	20	Agree
Eason	Carolyn	2:15-cv-03312	20	20	Agree
Fox	Sherri	2:15-cv-03314	20	20	Agree
Dorso	Mary Ann	2:15-cv-03323	10	10	Agree
McGee	Violet	2:15-cv-03325-RMG	20	20	Agree
Sandburg	Rhonda M.	2:15-cv-03326-RMG	20	20	Agree
McAllister	Lori	2:15-cv-03350	20	20	Agree
Davis	Pearl L.	2:15-cv-03351-RMG	20	20	Agree
Gonzalez	Nelida	2:15-cv-03356	10, 20	10, 20	Agree
Otero Cruz	Santo	2:15-cv-03365	40, 20	40, 20	Agree
Herron	Hortense	2:15-cv-03371	10, 20	10, 20	Agree
Traylor	Toni	2:15-cv-03372-RMG	40	40	Agree
Armstrong	Dale	2:15-cv-03390	20	20	Agree
Sunderland-Rios	Kathlene	2:15-cv-03391	40	40	Agree
Torres Oquendo	Nydia M	2:15-cv-03403	10, 20, 40	10, 20, 40	Agree
Hughes	Rudell	2:15-cv-03412-RMG	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Giannini	Pamela	2:15-cv-03415-RMG	10, 40	10, 40	Agree
Mason	Patricia	2:15-cv-03418	10	10	Agree
Charles	Diane	2:15-cv-03428	10	10	Agree
Echeverry	Gloria	2:15-cv-03429	40	40	Agree
Rodriguez	Lydia	2:15-cv-03430	20, 40	20, 40	Agree
Sanchez	Elisa	2:15-cv-03431	40	40	Agree
Stidham	Virginia	2:15-cv-03434-RMG	10	10	Agree
Troup	Rollie M.	2:15-cv-03435-RMG	10, 20	10, 20	Agree
Kornegay	Phyllis	2:15-cv-03446	10	10	Agree
Roberts	Lisa	2:15-cv-03452-RMG	10, 20	10, 20	Agree
Spehn	Lisa	2:15-cv-03453	10, 20, 40	10, 20, 40	Agree
Webb	Tanya	2:15-cv-03454-RMG	20	20	Agree
Williams	Charmaine	2:15-CV-03463	10	10	Agree
Lepine	Julie	2:15-CV-03464	10	10	Agree
Hollinger	Beatrice	2:15-cv-03468	10, 20	10, 20	Agree
Farrell	Eulalia	2:15-cv-03476	20 40	20, 40	Agree
John	Linda	2:15-cv-03487-RMG	10	10	Agree
Wells-Williams	Lillie	2:15-cv-03488	10mg	10mg	Agree
Williams	Liem	2:15-cv-03489	20	20	Agree
Collins	Jacqueline A.	2:15-cv-03491	40	40	Agree
HAMMONTREE	JUDY	2:15-cv-03492-RMG	10, 20	10, 20	Agree*
Fowler	Mary Anthanette	2:15-cv-03496	10, 20, 40	10, 20, 40	Agree
Angjeli	Rozeta	2:15-cv-03503	10	10	Agree
Daly	Patricia	2:15-cv-03508	20	20	Agree
Gonzalez	Carmen	2:15-cv-03531-RMG	20	20	Agree
Borges	Myrna	2:15-cv-03539-RMG	20	20	Agree
Heinrich	Nelia	2:15-cv-03541-RMG	20, 40	20, 40	Agree
Perez	Rosa	2:15-cv-03543-RMG	40	40	Agree
Barrick	Christina	2:15-cv-03548	20mg; 40mg	20mg; 40mg	Agree
VANCE	BARBARA	2:15-cv-03561-RMG	20	20	Agree
Taylor	Julia	2:15-cv-03564-RMG	20	20	Agree
Williams	Mary	2:15-cv-03566-RMG	20	20	Agree
Grey	Diana	2:15-cv-03567-RMG	10	10	Agree
Overkleeft-Fullerton	Hendrika	2:15-cv-03569	20	20	Agree
Massingale	MaryAnn	2:15-cv-03573-RMG	40	40	Agree
Spielman	Virginia	2:15-cv-03574-RMG	40	40	Agree
Tapp	Lisa	2:15-cv-03575-RMG	40	40	Agree
Matos	Vivian	2:15-cv-03576-RMG	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Davis AKA Davis-Bill	Linda	2:15-cv-03585-RMG	20, 40	20, 40	Agree
Spear	Victoria	2:15-cv-03587-RMG	10	10	Agree
Burgos	Luz	2:15-cv-03595-RMG	20, 40	20, 40	Agree
Vallecillo	Magda	2:15-cv-03598-RMG	10,	10	Agree
Reeves	Nancy	2:15-cv-03618-RMG	20, 30, 40	20, 30, 40	Agree
Scholer	Lois	2:15-cv-03619-RMG	10	10	Agree
Jackson	Annette W.	2:15-cv-03629	10	10	Agree
DAWSON	WILLIE	2:15-cv-03640-RMG	10	10	Agree
Rosalez	Nancy	2:15-cv-03658	20,40	20,40	Agree
Lambiris	Lika	2:15-cv-03680-RMG	10,20	10,20	Agree
Bagley	Sharon	2:15-CV-03682	10	10	Agree
Oraschin	Eleanor	2:15-cv-03693-RMG	20	20	Agree
Ruiz	Overlinda	2:15-cv-03722-RMG	10	10	Agree
Lee	Janice	2:15-cv-03723-RMG	20	20	Agree
Kearney	Olivia	2:15-cv-03744-RMG	40	40	Agree
Saulter	Caroline	2:15-cv-03745-RMG	40	40	Agree
Appel	Rita	2:15-cv-03748	10mg	10mg	Agree
Moody	Teresa	2:15-cv-03759-RMG	10	10	Agree
Orlowski	Michele	2:15-cv-03760-RMG	20	20	Agree
Simons	Genoveva	2:15-cv-03761-RMG	20	20	Agree
Gibson	Regina	2:15-cv-03762-RMG	40	40	Agree
Velazquez	Lourdes	2:15-cv-03763-RMG	40, 20	40, 20	Agree
Ron de Lopez	Armida	2:15-cv-03764-RMG	40	40	Agree
Williams	Judy	2:15-cv-03784-RMG	10	10	Agree
Woods-Copes	Donna	2:15-cv-03785-RMG	10, 40	10, 40	Agree
Strickland	Judith	2:15-cv-03786-RMG	20, 40	20, 40	Agree
Caban	Carmen	2:15-cv-03788-RMG	20, 10, 40	40	Agree
Eddy	Vera	2:15-cv-03789-RMG	20, 145	20, 145	Agree
Navarro	Manuela	2:15-cv-03791-RMG	20	20	Agree
Byrd	Carrie	2:15-cv-03795	10	10	Agree*
Calhoun	Amanda	2:15-cv-03796	10	10	Agree
Connell	Linda	2:15-cv-03797	20	20	Agree
Dion	Norma	2:15-cv-03798	20	20	Agree
Driggers	Penny	2:15-cv-03799	40	40	Agree
Duncan	Jeraldine	2:15-cv-03800	40	40	Agree
Easterling	Yvonne	2:15-cv-03801	10	10	Agree
Elliott	Lucy	2:15-cv-03802	10	10	Agree
Fitzhugh	Glenda	2:15-cv-03803	20	20	Agree
Flintom	Shirley	2:15-cv-03804	40	40	Agree

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Forister	Connie	2:15-cv-03805	40	40	Agree
Glasgow	Patricia	2:15-cv-03807	40	40	Agree
Gothart	Mary	2:15-cv-03808	20, 40	20, 40	Agree
Haddon	Betty	2:15-cv-03809	10	10	Agree*
Hammond	Carelene	2:15-cv-03810	10	10	Agree
Harris	Sandra	2:15-cv-03812	40	40	Agree
Hawthorne	Cassandra	2:15-cv-03813	20	20	Agree
Hayes	Evola	2:15-cv-03814	20, 40	20, 40	Agree
Moore	Adrian	2:15-cv-03816	20	20	Agree
Dye	Joyce	2:15-cv-03817	20	20	Agree
Thomas	Beverly	2:15-cv-03818	10	10	Agree
Reed	Sharon	2:15-cv-03819	40	40	Agree
Hendricks	Andrea	2:15-cv-03820	20	20	Agree
Hillman	Christeen	2:15-cv-03821	40	40	Agree
Holley	Willie	2:15-cv-03822	10	10	Agree
Holmes	Helen	2:15-cv-03823	10	10	Agree
Hughston	Judy	2:15-cv-03824	10, 20	10, 20	Agree
Johnson	Estate of Anna	2:15-cv-03825	10	10	Agree
Jones	Ozella	2:15-cv-03826	20	20	Agree
Jones	Rebecca	2:15-cv-03827	20, 40	20, 40	Agree
Kato	Kathleen	2:15-cv-03828	10	10	Agree
Kesler	Mary Ann	2:15-cv-03829	40	40	Agree*
King	Janet	2:15-cv-03830	40	40	Agree
Lacount - Kelly	Loretta	2:15-cv-03831	20	20	Agree
Love	Doris	2:15-cv-03832	20	20	Agree
Lowhorn	Donna	2:15-cv-03833	20	20	Agree
Majors	Gay	2:15-cv-03835	10, 20	10, 20	Agree
Martin	Gail	2:15-cv-03836	10	10	Agree
Massey	Gwendolyn	2:15-cv-03837	40	40	Agree
Mauro	Janice	2:15-cv-03838	20, 40	20, 40	Agree*
McCamy	Beth	2:15-cv-03839	20	20	Agree
Maddox	Mary	2:15-cv-03840	40	40	Agree
Johnson	Kim	2:15-cv-03849	10mg; 40mg	10mg; 40mg	Agree
McGalliard	Dorothy	2:15-cv-03850	20	20	Agree
McFalls	Shirley	2:15-cv-03851	10	10	Agree*
Medenblik	Jackelyn	2:15-cv-03852	40	40	Agree
Murphy	Dorothy	2:15-cv-03853	40	40	Agree
Neale	Gwenda	2:15-cv-03854	10, 20	10, 20	Agree
Nixon	Barbara	2:15-cv-03857	20	20	Agree
Orr	Louise	2:15-cv-03859	10, 40	10, 40	Agree

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Payton	Lillian	2:15-cv-03861	40	40	Agree
Peters	Rosetta	2:15-cv-03863	40	40	Agree
Pinkston	Gail	2:15-cv-03864	20	20	Agree
Price	Kay	2:15-cv-03866	20	20	Agree
Pugh	Sherrie	2:15-cv-03867	40	40	Agree
Phillips	Sandra	2:15-cv-03869	10	10	Agree*
Creecy	Ellen	2:15-cv-03871	20	20	Agree*
Replinger	Toshiko	2:15-cv-03872	10	10	Agree
Crittendon	Kim	2:15-cv-03874	10	10	Agree
Ramirez	Maricela	2:15-cv-03875	40	40	Agree
Daly	Teresa	2:15-cv-03876	10	10	Agree
Parker	Clairessa	2:15-cv-03877	20	20	Agree
O'Kane	Vita	2:15-cv-03878	10	10	Agree
Nunez	Antonia	2:15-cv-03879	40	40	Agree
McClellan	Shirley	2:15-cv-03881	40	40	Agree
Massey	Teresa (Terri)	2:15-cv-03882	10	10	Agree
Davis	Doris	2:15-cv-03884	10, 20	10, 20	Agree
Martinez Davila	Josephina (Josefina)	2:15-cv-03885	20, 40	20, 40	Agree
Dingess	Brenda	2:15-cv-03886	40	40	Agree
Dunn	Julie	2:15-cv-03888	20	20	Agree
Mancil	Joan	2:15-cv-03889	20	20	Agree
Durando	Carol	2:15-cv-03891	20	20	Agree
Edwards	Betty	2:15-cv-03892	20	20	Agree
Long	Arlene	2:15-cv-03893	40	40	Agree
Floyd	Alberta	2:15-cv-03894	10, 20	10, 20	Agree
Foggie	Catherine	2:15-cv-03896	10	10	Agree
Forward	Kay	2:15-cv-03898	10	10	Agree
Frazier	Janice	2:15-cv-03900	40	40	Agree
Fuchs	Debra	2:15-cv-03902	20	20	Agree
Green	Arlene	2:15-cv-03903	10, 20	10, 20	Agree
Hall	Beulah	2:15-cv-03905	20, 40	20, 40	Agree
Hayes	Margaret	2:15-cv-03906	10	10	Agree
Heatherly	Linda	2:15-cv-03907	40	40	Agree
Hicks	Doris	2:15-cv-03908	20	20	Agree
Hill	Beverly	2:15-cv-03909	10	10	Agree
Holmes	Rosie	2:15-cv-03911	10	10	Agree
Horvath	Diann	2:15-cv-03912	40	40	Agree
Hough	Jo Ann	2:15-cv-03913	40	40	Agree
Hughes	Peggy	2:15-cv-03914	40	40	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Ignasiak	Paulette	2:15-cv-03915	10	10	Agree
Jacobs	Sandy	2:15-cv-03916	20	20	Agree
Lambert	Donna	2:15-cv-03917	20	20	Agree
Richardson	Connie	2:15-cv-03925	40	40	Agree
Robinson	Sandra	2:15-cv-03927	10	10	Agree
Roche	Carla	2:15-cv-03928	40	40	Agree
Roldan	Alicia	2:15-cv-03929	20	20	Agree
Rone	Patricia	2:15-cv-03930	20	20	Agree
Roquemore	Elwanda	2:15-cv-03932	10, 20	10, 20	Agree
Shiflett	Nola	2:15-cv-03936	10	10	Agree
Shows	Estate of Lucy	2:15-cv-03937	20, 40	20, 40	Agree
Simpson	Ester	2:15-cv-03938	20	20	Agree
Slone	Viola	2:15-cv-03939	40	40	Agree
Sopko	Lynette	2:15-cv-03940	40	40	Agree
Stevens	Ella	2:15-cv-03941	40	40	Agree
Stockton	Shirley	2:15-cv-03942	20	20	Agree
Stoffer	Charlotte	2:15-cv-03943	10, 20	10, 20	Agree
Strozier	Carolyn	2:15-cv-03944	20	20	Agree
Thompson	Betty	2:15-cv-03948	20	20	Agree
Throckmorton	Judith	2:15-cv-03949	40	40	Agree*
Tipping	Judy	2:15-cv-03950	20	20	Agree
Tripp	Ella	2:15-cv-03952	20	20	Agree
Troncale	Mary Jo	2:15-cv-03954	20	20	Agree
Turner	Peggy	2:15-cv-03955	20	20	Agree
Villot	Lou	2:15-cv-03956	20, 40	20, 40	Agree
Whaley (Dec.)	Martha	2:15-cv-03958	20	20	Agree
Williams	Barbara	2:15-cv-03959	10	10	Agree*
Woolfolk	Jennifer	2:15-cv-03961	40	40	Agree
Wright	Janet	2:15-cv-03962	20, 40	20, 40	Agree
Youngs	Anna	2:15-cv-03964	20	20	Agree
Zerba	Iris	2:15-cv-03965	40	40	Agree
Stephens	Angela	2:15-cv-03967-RMG	10	10	Agree
Reshef	Margaret	2:15-cv-03968-RMG	20	20	Agree
Williams	Minnie	2:15-cv-03970-RMG	40	40	Agree
Riley	Jeanne	2:15-cv-03971-RMG	10	10	Agree
Cameron	Renee J.	2:15-cv-03974-RMG	40	40	Agree
Guertin	Rebel L.	2:15-cv-03980-RMG	10	10	Agree
King	Nancy	2:15-cv-03981-RMG	20	20	Agree
Washington	Brenda	2:15-cv-03982-RMG	20	20	Agree
Meadows	Donna	2:15-cv-03984	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Whitley	Bonnie	2:15-cv-04015-RMG	20, 40	20, 40	Agree
Abson-Starling	Ruthie	2:15-cv-04026-RMG	10, 20	10, 20	Agree
Adair	Susan	2:15-cv-04027-RMG	20	20	Agree
Flores	Maria	2:15-cv-04028-RMG	40	40	Agree
Pereira	Alexandrina	2:15-cv-04029-RMG	10	10	Agree
Broadhead	Shirley	2:15-cv-04034-RMG	10	10	Agree
Strader	Phyllis	2:15-cv-04035-RMG	10, 40	10, 40	Agree
Hott	Shawn	2:15-cv-04036-RMG	10, 20	10, 20	Agree
Smith	Georganna	2:15-cv-04037-RMG	20	20	Agree
Bryant	Joyce	2:15-cv-04038	10mg; 20mg	10mg; 20mg	Agree
Dorton	Donna	2:15-cv-04041	10mg	10mg	Agree
Anderson	BJ	2:15-cv-04046-RMG	20	20	Agree
Ayala Bladt	Carmen	2:15-cv-04048-RMG	20	20	Agree
Barley	Maggie	2:15-cv-04049-RMG	20	20	Agree
Baggett	Elizabeth	2:15-cv-04050-RMG	20	20	Agree
JENKINS	GENEVIEVE	2:15-cv-04052-RMG	10	10	Agree
KODIAK	DIANA	2:15-cv-04053-RMG	10	10	Agree
CHRISTIAN	SHIRLEY	2:15-cv-04054-RMG	20	20	Agree
EASTMAN	JOAN	2:15-cv-04055-RMG	20	20	Agree
Matter	Pamela	2:15-cv-04056-RMG	10	10	Agree
Doyle	Jenise	2:15-cv-04057-RMG	10, 40	10, 40	Agree
Bergeron	Nancy	2:15-cv-04068-RMG	20	20	Agree
Bynum	Barbara	2:15-cv-04069-RMG	20	20	Agree
Caballero	Dora	2:15-cv-04070-RMG	40	40	Agree
Tracy	Laverne	2:15-cv-04075	20mg	20mg	Agree
Humble	Sherry	2:15-cv-04078	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Hamilton	Annie	2:15-cv-04096	20mg	20mg	Agree
Mallow	Linda L.	2:15-cv-04122-RMG	20	20	Agree
Weaver	Kelley	2:15-cv-04123-RMG	20	20	Agree
Whelband	Lillian	2:15-cv-04124-RMG	20, 40	20, 40	Agree
Lewis-Lester	Angel	2:15-cv-04126-RMG	40	40	Agree
Garcia	Bertha	2:15-cv-04127-RMG	40	40	Agree
Wethington	Rita	2:15-cv-04128-RMG	10	10	Agree
Garcia	Miriam	2:15-cv-04129	40	40	Agree
Gruber	Laurette	2:15-cv-04130	10, 20	10, 20	Agree
Woolfolk	Theresa	2:15-cv-04138-RMG	40	40	Agree



CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Ling	Sharon	2:15-cv-04139-RMG	20	20	Agree
Noll	Maureen	2:15-cv-04141-RMG	40	40	Agree
Coleman	Mary	2:15-cv-04158-RMG	20	20	Agree
Cino	Marla	2:15-cv-04159-RMG	10, 20, 40	10, 20, 40	Agree
Ceaser	Janace	2:15-cv-04221	20	20	Agree
Goldsmith	Jacqueline	2:15-cv-04222	20	20	Agree
Pardee	Jean	2:15-cv-04224	20	20	Agree
McLennan	Dawn	2:15-cv-04234	40mg	40mg	Agree
Tharrington	Kimberly R.	2:15-cv-04239	20	20	Agree
Jones	Mary Ann	2:15-cv-04240	10, 20	10, 20	Agree
Tyler	Nenita	2:15-cv-04243	20, 40	20, 40	Agree
Woodberry	Rosa	2:15-cv-04245	10	10	Agree
Smith	Gracie	2:15-cv-04267-RMG	10	10	Agree
Touchard	Myriam	2:15-cv-04272	Alleges Pre-existing Diabetes then 20, 40	Alleges Pre-existing Diabetes then 20, 40	Agree Plaintiff Alleges Pre-Existing Diabetes; Reserves Rights
Oakley	Gloria T.	2:15-cv-04278-RMG	40	40	Agree
Wilson	Doris	2:15-cv-04282-RMG	10	10	Agree
Gillard	Nettie	2:15-cv-04295-RMG	20	20	Agree
Osorio	Marta	2:15-cv-04344	10	10	Agree
Whittington	Marion	2:15-cv-04346	40	40	Agree
McCorkle	Ossie	2:15-cv-04373	20, 40	20, 40	Agree
Lee	Christina	2:15-cv-04376	40	40	Agree
Vohs	Mary	2:15-cv-04377	10, 20	10, 20	Agree
Allen	Julia	2:15-cv-04392	20	20	Agree
Lewis	Judy	2:15-cv-04393	20	20	Agree
Hennington-Taylor	Sharon	2:15-cv-04394	10, 20, 40	10, 20, 40	Agree
Wydra	Peggy	2:15-cv-04396-RMG	10	10	Agree
DALESANDRO	CAROL	2:15-cv-04402-RMG	20, 40	20, 40	Agree
SOUTHWARD	ARETA	2:15-cv-04403-RMG	10, 20	10, 20	Agree
JESSEN	GLORIA	2:15-cv-04404-RMG	20	20	Agree
THOMPSON	MARY	2:15-cv-04405-RMG	20	20	Agree
ROPER	ROSE	2:15-cv-04406-RMG	10	10	Agree
Walker	Terry	2:15-cv-04416-RMG	10	10	Agree

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Stanton	Florene	2:15-cv-04418	10,20	10,20	Agree
Flugence	Alona	2:15-cv-04425	20	20	Agree
Churchman	Teri	2:15-cv-04426	20	20	Agree
James	Betty	2:15-cv-04427	Alleges Pre-existing Diabetes then 40	Alleges Pre-existing Diabetes then 40	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Gross	Darlene	2:15-cv-04428	20	20	Agree
Hulett	Carolyn	2:15-cv-04429	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Norman	Cheryl	2:15-cv-04432	40	40	Agree
Holt	Roberta	2:15-cv-04433	10mg	10mg	Agree
Baldwin (Dec.)	Polly	2:15-cv-04507	10	10	Agree
Chaney	Annie	2:15-cv-04508	20	20	Agree
Choice	Stephanie	2:15-cv-04509	10	10	Agree
Cole	Frances	2:15-cv-04510	10	10	Agree
Davis	Erma	2:15-cv-04517	20, 40	20, 40	Agree
Johnson	Linda	2:15-cv-04524	20mg	20mg	Agree
Morciglio	Ivette	2:15-cv-04527	40	40	Agree
Stewart	Sandra	2:15-cv-04528	10, 40	10, 40	Agree
Friday	Diane	2:15-cv-04529	10, 20	10, 20	Agree
Hopewell	Elaine	2:15-cv-04539	20	20	Agree
Lee	Mary	2:15-cv-04540	20	20	Agree
Loftin	Jane	2:15-cv-04541	40	40	Agree*
Moshiri	Soraya	2:15-cv-04543	40	40	Agree
Quedens	Joy	2:15-cv-04544	10, 20, 40	10, 20, 40	Agree
Teague	Judy	2:15-cv-04545	20, 40	20, 40	Agree
Wright	Patricia	2:15-cv-04546	10	10	Agree
Smith	Elizabeth M.	2:15-cv-04547	10	10	Agree
Foote	Beverly	2:15-cv-04572-RMG	10, 20	10, 20	Agree
Somers	Diane	2:15-cv-04578	20mg	20mg	Agree
Wilson	Sungerett	2:15-cv-04646-RMG	20	20	Agree
McGlone	Thelma	2:15-cv-04659	40mg	40mg	Agree
Leflore	Kathleen	2:15-cv-04687	20,40	20,40	Agree
Casal	Lourdes	2:15-cv-04705	10	10	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Salser	Becky	2:15-cv-04706	20	20	Agree
Gamble	Mary	2:15-cv-04707	20, 40	20, 40	Agree
Samrow	Brenda	2:15-cv-04708	20	20	Agree
Anderson	Becki	2:15-cv-04709-RMG	10	10	Agree
Boyer	Linda J.	2:15-cv-04710	10, 20	10, 20	Agree
Lee	Betty	2:15-cv-04740-RMG	10	10	Agree
Peters	Philippa	2:15-cv-04752	20	20	Agree*
Halbert	Norma	2:15-cv-04764-RMG	10, 20	10, 20	Agree
Flanagan	Carol	2:15-cv-04766	20	20	Agree
Seal	Linda	2:15-cv-04790-RMG	10	10	Agree
Sapkaroski	Daryl (Krstec)	2:15-cv-04815	10, 20	10, 20	Agree
DeCicco	Deborah	2:15-cv-04833-RMG	20, 40	20, 40	Agree
Miller	Patricia	2:15-cv-04834-RMG	20	20	Agree
Thompson	Jane	2:15-cv-04869	20 , 40, 20(Generic),	20, 40, 20(Generic),	Agree
Wilson	Marva	2:15-cv-04904	20mg; 40mg	20mg; 40mg	Agree
Wurzelbacher	Jacqueline	2:15-cv-04921-RMG	10, 20	10, 20	Agree
Steed	Orlesia	2:15-cv-04945	20, 40	20, 40	Agree
Brown	Theresa	2:15-cv-04987-RMG	10, 20	10,20	Agree
Myers	Carol	2:15-cv-05003	10mg	10mg	Agree
Foster	Dorothy C.	2:15-cv-05014	10, 20	10, 20	Agree
Webber	Claudia J.	2:15-cv-05015-RMG	20	20	Agree
Adams	Cathy	2:15-cv-05019-RMG	Alleges Pre-existing Diabetes then 10	Alleges Pre-existing Diabetes then 10	Agree Plaintiff Alleges Pre-existing Diabetes; Reserves Rights
Watrus	Jean	2:15-cv-05046-RMG	10, 20	10, 20	Agree
Rader	Sandra	2:15-cv-05056-RMG	Unknown	Unknown	Agree Plaintiff Alleges Unknown; Reserves Rights
Brown	Shirley	2:15-cv-05088	40	40	Agree
James	Gladys	2:15-cv-05089	20	20	Agree
Sheffey	Grace	2:15-cv-05102	20mg	20mg	Agree
Presley	Deborah	2:16-cv-00007-RMG	40	40	Agree
Simpson	Patricia	2:16-cv-00008	20	20	Agree
Derflinger	Caridad	2:16-cv-00013	20	20	Agree

CLIENTLAST	CLIENTFIRST	CIVILNO	ALL DOSES PRESCRIBED PRE-DM	ALL DOSES INGESTED PRE-DM	Pfizer Position (Dose Alleged)
Diehl	Dolores	2:16-cv-00022	10	10	Agree
Herstein	Claire	2:16-cv-00047-RMG	20, 40	20, 40	Agree
Newvine	Jennifer	2:16-cv-00054-RMG	20	20	Agree
Gann	Peggy	2:16-cv-00055-RMG	20	20	Agree
Woodard	Eloise	2:16-cv-00056-RMG	10,40	10,40	Agree
Devore	Elizabeth	2:16-cv-00057-RMG	20	20	Agree
Eason	Mary	2:16-cv-00061-RMG	10, 40	10, 40	Agree
McCall	Marian	3:13-cv-02764-RMG;	20, 40	20, 40	Agree
Brooks	Linda	3:14-cv-00154-RMG	20	20	Agree
Christiano	Janet	3:14-cv-00545-RMG	10, 20	10, 20	Agree
Papcun	Christine	4:13-cv-01422	10, 20, 40	10, 20, 40	Agree
Fernandez	Patricia	4:13-cv-01423	10	10	Agree
McClam	Harriet	4:13-cv-02148-RMG	10, 20	10, 20	Agree
Haynesworth	Rose Marie	4:13-cv-02767-RMG	10	10	Agree
Farr	Emily	5:13-cv-02741-RMG	20, 40	20, 40	Agree
Mosley	Rhonda	5:14-cv-00155	20mg	20mg	Agree
Keitt	Rosa	5:14-cv-00525-RMG	20	20	Agree
Blackham	Irene	6:14-cv-00530-RMG	20, 40	20, 40	Agree
Durocher	Juanita	7:13-cv-01965	20	20	Agree
Williams	Brenda	8:13-cv-01421	10	10	Agree
Adams	Janice	8:13-cv-01735-RMG	10	10	Agree
Thompson	Shelby	8:13-cv-02763-RMG	40	40	Agree
Long	Sherrill	8:13-cv-02768-RMG	10, 20	10, 20	Agree