

1 IT IS FRIDAY, FEBRUARY 5<sup>TH</sup> AT 1253 HOURS. I WILL BE ATTEMPTING TO  
2 CONTACT SHARON FONG AT HER OFFICE AT 869 NORTH CHERRY IN TULARE.

3  
4 XX Hello.

5 GW Hi. How are you? Um, I'm here to see Sharon Fong.

6 XX Sharon?

7 GW Yes.

8 XX Okay. What's your name?

9  
10 GW Gregg White.

11 XX Gregg White?

12 GW Yes.

13 XX I'll let her know. Um...I'll let her know that you're here.

14 GW Okay. Thank you. (PAUSE)

15 SF Investigator White?

16  
17 GW Hi.

18 SF Hi, I'm Sharon Fong.

19 GW Nice to meet you.

20 SF Hi. Come on back to my office. Hopefully you didn't have any trouble finding us.

21  
22 GW Nope. Ah, ah, if I remember, didn't the ah, Mineral King Lab used to be in here?

23 SF Yeah. They were on the other---

24 GW That's what I thought.

25 SF --- s-, oh, on the opposite side of this building.

26  
27 GW Okay.

28 SF Yeah, they did. That, you've been around awhile if ---

1 GW (LAUGHS)  
2 SF --- you remember that. 'Cause we've been moved down the street for at least ten  
3 years.  
4  
5 GW Yeah. (LAUGHS)  
6 SF Got a lot more space. Come on back to my office. It's in the back corner.  
7 YY Hi.  
8 GW Hi.  
9  
10 ZZ (unint)  
11 SF Come on. Come on in. (unint) it's a mess. I am way far behind.  
12 GW (LAUGHS) Okay.  
13 SF Come on in. And then our attorney ah, would like to be on the line when you ask  
14 me questions so if you don't mind I'm gonna call um, Bruce. Um, let me see if I  
15 could... Bruce Greene from BakerHostetler in Los Angeles. Okay?  
16  
17 GW Okay.  
18 SF That's what he is requesting. (unint) on the line.  
19 GW Is he just gonna be monitoring or is he?  
20 SF I, he said, ---  
21  
22 GW Yeah.  
23 SF --- "Call me when the investigator arrives. I'd like to participate. So he may ask  
24 questions."  
25 GW Alright. I mean, 'cause you know this isn't a, it's just sort of a basic inquiry type  
26 thing ---  
27  
28 SF Oh, no, I understand.

1 GW --- right now (LAUGHS).  
2 SF I totally (unint)  
3  
4 GW Alright.  
5 SF I totally understand but... Oh, hi. This is Sharon Fong from HCCA and I was  
6 calling to have Bruce on the line. He asked me to call him when Investigator  
7 Gregory White arrived. Okay. Thank you.  
8 GW Okay. And ---  
9 SF And do you like to be called Investigator White?  
10  
11 GW Ah, just Gregg.  
12 SF Just Gregg?  
13 GW That's fine. Alright.  
14 SF Okay.  
15 GW And who is, who is he again?  
16 SF His name is Bruce.  
17 GW Bruce.  
18 SF And then it's Greene, G-R-E-E-N-E. And he's our attorney with (OVERTALK)  
19 BakerHostetle ---  
20  
21 GW How ---  
22 SF --- Hostetler.  
23 GW So Baker. How do you spell the last, Baker Hos?  
24 SF B-, and it's all one word rolled ---  
25  
26 GW Okay.  
27 SF --- together. H-O-S-T-E-T-L-E-R.  
28

1 GW H-O-S-T-E-T ---  
2 BG Hello?  
3 SF Hello. Hi, Bru-, hi Bruce. This is, this is Sharon Fong here from Tulare. And  
4 then I have um, Gregory White, an Investigator here from the DA's office.  
5  
6 BG Hi. Ah, I, do I call you Investigator White or Mr. White or Gregory? How  
7 (LAUGHS) shall I refer to you?  
8  
9 GW Ah, Gregg is fine. That's fine.  
10  
11 BG Hi, Gregg. Hi.  
12  
13 GW Hi.  
14  
15 BG So, I'm ah, the attorney for HCCA and I just wanted, if you don't mind, I just kinda  
16 wanted to listen in and hear what goes on. Because we're obviously concerned  
17 about making sure that you get whatever information you needed is correct.  
18  
19 GW Okay. Okay. And ---  
20  
21 BG So I'm not gonna, I'm not gonna say anything unless I feel compelled to and so if  
22 you just do your thing.  
23  
24 GW Okay. Okay. That'll do. Like I said ah, all this ah, it's just kinda stemming from  
25 an event that happened back in June of last year, from what I'm told. And I  
26 spoke with um, Sandy McVeigh ---  
27  
28 SF Yes.  
29  
30 GW --- yesterday. She told you I spoke with her?  
31  
32 SF Yes, she did.  
33  
34 GW Okay. And what is her title? What is she?  
35  
36 SF She's our lead toxicologist.

1 GW Okay. Is that a, is she, 'cause in a report I saw it was described that she was a  
2 supervisor. Is, is that just something that ---  
3 SF Um, (EXHALES) she is an Alcohol Supervisor, which is a license under the state  
4 of California. And she's our lead toxicologist so she does direct the staff down  
5 there in the lab if I am not present. I'm the director ---  
6  
7 GW Okay.  
8 SF --- over the lab. Or the Administrative Director.  
9  
10 GW Okay. Yeah. So she, she had given me your card and it said ah, "Director of  
11 Ancillary Services, Clinical Lab" ah, and "Mineral King Toxicology Lab."  
12 SF That's correct.  
13 GW And she said that you not only are in charge of that but you're also in charge of  
14 the lab for the medical side?  
15 SF Yes. Yes.  
16 GW Alright. Okay.  
17 SF Where, where you're at right now.  
18 GW Right.  
19 SF This is a clinical lab.  
20  
21 GW Okay. Um, and so how it came over to us was that, I guess, the Visalia Police  
22 Department was involved in an Officer Involved Shooting. Ah, they had done a  
23 blood draw which was sent here and it somehow came back that the officer  
24 tested positive for ah, methamphetamines. And so a letter um, a toxicology letter  
25 went to ah, the Visalia Police Department ah, which caused a little concern over  
26 there. The-, and then ah, I don't know the exact time frame, but they, they called  
27  
28

1 here, addressed it. Um, I guess the sample was rechecked and it was found to  
2 be negative.

3 SF And that, that's ---  
4

5 GW Is that right?

6 SF --- pretty much my understanding of, of...

7 GW Okay.

8 SF ... of what had transposed. I was not present when all of that was happening so  
9 all I know is what was reported to me.

10  
11 GW Okay. So, yeah, as it sets now there, he, he's got a negative. Um, and... a, a  
12 couple of detectives had, I think it was back in November, they spoke with ah,  
13 Ms. McVeigh, just kinda how things went down and she had said that she  
14 believes the problem, the reason why it came up a false positive is at one point  
15 there is a, I guess when the samples are loaded into a tray there's ---  
16

17 SF Yes.

18 GW --- five slots.

19 SF Yes.

20 GW Um, there was ah, a problem where some of the slots were mixed up. She said if  
21 there's, there's five slots um, three would usually be correct and one, depending  
22 on how it's loaded, one and five could be transposed and two and four could be  
23 transposed. Is, how ---  
24

25 SF But then ---

26 GW --- she believed.  
27  
28

1 SF Okay. Okay. And, and that I, I don't know. I know that the issue was as far as a  
2 loading issue on the machine. But as far as positions, that I ---  
3  
4 GW Right.  
5 SF --- I don't know anything about.  
6 GW Yeah. That, that's how it came to us, was, is that it's a loading position on the  
7 machine.  
8 SF Yes.  
9  
10 GW Um, and um, do you guys have, whenever they do that, do you guys have any  
11 formal ah, training or you tell them, "This is how it's supposed to be. It's loaded  
12 form ah, the fifth outside space to the inside." Or, "The inside to the outside."  
13 Ha-, how is that normally done? Is there a certain way that you guys tell them ---  
14  
15 SF Yes.  
16 GW --- it's supposed to be done?  
17 SF Yes. I mean, there is. But staff are trained and that there's a certain way that  
18 things are supposed to be loaded. But that is correct.  
19  
20 GW Okay.  
21 SF And so this is a very, very unusual occurrence.  
22 GW Okay. Um... could you tell me how it's supposed to be loaded? Is it from the  
23 outside in, inside out?  
24 SF I, I do not run the ---  
25  
26 GW Okay.  
27 SF --- analyzer. I don't. I ---  
28  
29 GW Okay.

1 SF --- I don't know at all.

2 GW Okay.

3 SF I don't know at all. Um...

4

5 GW Do you guys have anything, as far as the training is it ah, is it a written thing? Do

6 they watch a ...

7 SF No, I mean ---

8 GW ... um...

9

10 SF --- it's, it's hands on training. Both of them have worked at the laboratory for

11 more than ten years and had been doing this for more than ten years. So it isn't

12 like these are new employees and that, that's something they always know how

13 to do.

14 GW Right. So everybody should be loading them the same?

15

16 SF That is correct.

17 GW Okay. Um... so that's, that's what Ms. McVeigh said she believes the problem

18 was. So we're trying to figure out why that would, why that would have

19 happened if, that it would have been loaded ah, in reverse or backwards,

20 however you want to say. Ah, do you know who would know that?

21

22 SF Ah, no. I mean, it's a, was an error. Um, one of the things that we have done

23 when we did look at that, as far as um... ah, trying to make certain that this does

24 not happen in the future ---

25 GW Uh-huh.

26

27 SF --- I should say, making sure that they're always loaded the same thing, same

28 way. Part of what we also did is we ended up changing our worklist of what



1 we're working on and how the numbers are on the worklist. That they used to  
2 be, you know, they were, they would be numbers but there was no um,  
3 chronological number system to them on how they were loaded.  
4

5 GW Right.

6 SF Like, I mean, you know that you're always supposed to match them up but when  
7 you look at the worklist there was really no pattern that you could actually see.  
8 And we totally changed that.

9 GW Okay.

10  
11 SF Where everything starts with the smallest number to the largest number. And  
12 when you're loading you should always be get-, putting a number on that's larger  
13 than the vial ahead, as a double check.

14 GW Okay.

15 SF And then when you're removing the vials, double checking that everything  
16 matches. And so that was something that we did after this incident. Change.  
17 Just to make certain as another step and another check to make certain that it  
18 doesn't happen.  
19

20 GW Okay.

21 SF But how they got mixed up I really don't know. But we did double, I mean, did  
22 make two other changes in our procedure to make certain that there's still  
23 another way of making certain. Another, two other checks in place to make  
24 certain that vials don't get transposed.  
25

26 GW And that was all as a result of this?

27 SF That's correct.  
28

1 GW Okay. And ah, when did all of that get implemented?

2 SF That got all implemented as soon as we did the repeat and they notified me and  
3 then it's like: Okay, let's look at this and see how could this possibly have  
4 happened? Because it shouldn't happen and we're not ---

5

6 GW Right.

7 SF --- aware of it ever happening before. But how could they possibly have gotten  
8 placed. And one of the things, at least for me, with a different set of eyes, 'cause  
9 I don't run the machine is your numbers aren't in chronological or-, I mean they're  
10 not. They're not, you know, as far as the smallest number to the largest number.

11

12 GW Uh-huh.

13 SF Vials never have a person's name on it. When the toxicologist ---

14

15 GW Right.

16 SF --- are doing the testing they never know whose specimen it is so that there's no  
17 way that they could ever, if they ever wanted to, skew values or chan-, you know,  
18 that it's ---

19

20 GW Right.

21 SF --- you know, that it's blinded, blindfolded testing. You know what I mean?

22

23 GW Right. They're just seeing numbers; they're not seeing names.

24

25 SF They're not seeing names or anything else like that. So that um, and so looking  
26 at it, it's like: Okay, well one thing that would make it easier from a set of eyes is  
27 if you're always having a smaller number, or whether there's some sequence so  
28 that if you end up having, and our numbers normally are large. I mean, it's not  
like using, you know, one or two digits, you know.

1 GW Right.

2 SF Usually they're more like five digits. But that ---

3

4 GW Uh-huh.

5 SF --- if you're loading and you're looking at the vial and you're looking at your

6 worksheet, if you put 11 on, then the next, you know, five, five, let's say 5,011,

7 the next number shouldn't be 5,007, it should be a number that's larger. You

8 know, you're ---

9

10 GW Okay.

11 SF --- always, it should be a larger number. You're checking your worksheet.

12 You're checking the number. And that they should always be in the same thing

13 when you're unloading. You're going back to your worksheet and double

14 checking to make sure that they match. So that ---

15

16 GW Is ---

17 SF --- was a quality control issue that we put in place just that it would make it

18 another way to make sure that there wasn't any, you know.

19 GW Okay. And when the person is running that machine, the same person that's

20 going through the, the numbers, are they the same person that loads the

21 machine? Or is it usually a two person operation

22

23 SF It depends. Sometimes it's loaded by a different person than actually does the

24 interpretation.

25 GW Okay. Um, I mean, this physically so I would be sitting here reading the, the

26 numbers and you would be loading it?

27

28

1 SF Um, I'm not present when that's being done. All I know is what the staff, but  
2 occasionally one person may load it and when another person may be doing the  
3 interpretation ---  
4  
5 GW Okay.  
6 SF --- or, or doing it. 'Cause we have two toxicologists, so.  
7  
8 GW Okay. Alright.  
9  
10 SF And normally because the specimens run overnight that we don't run them and  
11 get the results the same day that it takes a long period of time, you know ---  
12  
13 GW Okay.  
14  
15 SF --- that sometimes it's a two person operation.  
16  
17 GW And so you said going from ah, always having them going ah, a larger number  
18 that's, you said that's one thing that you guys did. And you guys did two other  
19 things as well?  
20  
21 SF Well other thing, and, which they may have already been doing this. They may  
22 have already been doing it. But for me from just a laboratory practice ah, when  
23 the testing is all done you go and, going back and double checking that they are  
24 still in the order that you thought they were in. Especially if it's someone else  
25 loaded it in and you're reporting it out. Make sure, because you're signing your  
26 name, that ---  
27  
28 GW Uh-huh.  
29  
30 SF --- that this matches up with the order that you're expecting.  
31  
32 GW Okay. And so that's something you, you told them to do but they could have  
33 already well ---

1 SF (OVERTALK) They could have already ---  
2 GW --- (OVERTALK) been doing that?  
3 SF --- been doing that. But that for me, looking at it as far as from and administrative  
4 standpoint of "What can we do? What is good lab practice?" This is la-, good lab  
5 practice is to check, double check, you ---  
6  
7 GW Okay.  
8 SF --- know. And double check again. And as far as laboratorians, we normally are  
9 very detail oriented ---  
10  
11 GW Right.  
12 SF --- and normally obsessive compulsive ---  
13  
14 GW (LAUGHS)  
15 SF --- and it's normal to check, check, recheck. And then the next day check it  
16 again! (LAUGHS)  
17  
18 GW Right. So ---  
19 SF So it's normal.  
20  
21 GW --- is there another, another ah, I'll say ah, check that you guys put in? You said,  
22 I think there were three. You guys made three changes?  
23  
24 SF No. That, those ---  
25  
26 GW Okay.  
27  
28 SF --- say as far as just checking, changing the worksheet and then me just making  
that recommendation. But, as I say, they may have already been doing that.

1 GW Okay.

2 SF Just a reminder of normal lab practice of always double checking multiple times  
3 and checking at the end.

4

5 GW And was that something that you guys discussed in a meeting or when out in a  
6 memorandum? Or how did ---

7 SF We only have ---

8 GW --- (unint)

9

10 SF --- two toxicologists so it just ---

11 GW Okay.

12 SF --- the three of us talking.

13 GW Okay.

14 SF And working on this and looking at it ourselves because for us it's like, "Oh, my  
15 gosh ---

16

17 GW (LAUGHS)

18 SF --- this is horrible."

19 GW And from talking to, to Ms. McVeigh, she said that, I guess there are different ah,  
20 stations over there and ca-, to kinda keep everybody's um, to keep them sharp  
21 they just kinda rotate?

22

23 SF That's correct.

24 GW And how often do they rotate? Would it...

25 SF It depends. I mean ah (EXHALES)... I mean ah (EXHALES), it, it may be, I  
26 mean, it may be several times per week 'cause they, they rotate back and forth  
27 on who ---

28

1 GW Uh-huh.

2 SF --- does alcohols and who does screens. And there are only two of them. And it  
3 also depends on if someone's on vacation. Whether someone's in court of who  
4 then does what testing. So I mean they, they float. Um, Steve spends more time  
5 doing toxicology and on the GCMS than Sandy does because she ends up  
6 needing to go court more often than he does. And so she usually does tests that  
7 are easy to break away and...  
8  
9 GW Okay. So either Sandy or Steve would have?

10 SF That's correct. Those are the only two.

11 GW So those two do everything?

12 SF That's correct. (OVERTALK) That's why it makes it ---

13 GW (OVERTALK) Wow! That is, like, a lot of work. (LAUGHS)

14 SF --- hard when they're in court or anything ---

15 GW Right.

16 SF --- else because work stops for us.

17 GW Okay. Um... and if ah, say a, say would the machine was loaded backwards um,  
18 and there was a problem um...  
19  
20 BG Hey, Gregg? Gregg?

21 GW Yes.

22 BG Can I interrupt for a second 'cause ---

23 GW You bet.

24 BG --- um, I'm (unint) maybe (unint) had to learn about this myself today. And I, I  
25 think, and I'm gonna ask Sharon if this is correct, I just, I don't think the issue was  
26  
27  
28

1 things were loaded backwards or forward that, I don't think that was the issue.

2 Um, these machines, as I understand them, they have rows of five slots for the  
3 samples and there are 20 rows of five slots so you could put a hundred samples  
4 in ---  
5

6 SF That's correct.

7 BG --- to get tested at any one point in time. And they don't usually do that many but  
8 they do do ah, more than, you know, they do more than one. So they do up to 50  
9 at a time. But the thing is that these samples come in from outside with a name  
10 on them. They're then put into a tube for the purposes of analysis with a number  
11 on it to keep the confidentiality et cetera, et cetera.  
12

13 GW Right.

14 BG Those tubes with the numbers are the ones that go into the machine, the  
15 analyzer.  
16

17 GW Right.

18 BG They're put in the slots. But the, the someone, some human has to say to the  
19 analyzer, I'm trying to put this in really pedantic terms, but someone has to say,  
20 "Okay. Sample number one is in slot one. Sample number six is ---  
21

22 GW (CLEARS THROAT)

23 BG --- in slot two." Et cetera, et cetera. Regardless of whether it's loaded right to  
24 left, left to right, someone has to put on the worksheet the way that they are  
25 loaded so that when the results come out the machine says, "Okay" you know,  
26 "slot one is a positive. Slot two is a negative." And you can identify slot one as  
27  
28



1 sample number one. Slot two is sample number six. Am I, am I right so far?

2 Um...

3 SF That's correct.

4 BG Okay. So what happened is it was a mistake. Someone mixed up the  
5 identification of which slots these sample, this sample went into. So when it ran  
6 out and slot, it, it might have been in slot three, but slot three was, you know,  
7 somebody else's number and his number wa-, came out under slot four which  
8 was obviously positive. That's the problem.

9  
10 GW Right.

11 BG And I'm not, I'm not sure if that was clear to you but I wanted to try to because I  
12 didn't understand it ---

13 GW Yes.

14 BG --- until just this morning.

15 GW Yeah. And I, and I do understand that and my next question is um, say there are  
16 two um, like this when the officer ---

17 SF Uh-huh.

18 GW --- came back positive and somebody else came back negative. Um, and so it's  
19 when it's done you're not, "Okay. It's a negative" and you take all the samples  
20 and you get rid of them, how do you guys, how do you guys, 'cause I don't think  
21 you guys realized it was a problem until the Visalia Police Department called and  
22 said, "Hey. I don't think our guy was on anything."

23 SF Well (unint) we don't really know that it's an officer that we're reporting out on.

24 GW Right. So ---

1 SF You know. But, and that he did test positive for screen and most of the people  
2 that we screen positive in Tulare County for amphetamine are positive for  
3 amphetamine (LAUGHS) ---  
4  
5 GW Right.  
6 SF I hate to say that but that's, that's our clientele --  
7  
8 GW Right.  
9 SF --- that we deal with. So that's not ah, a, a, unusual occurrence to get a positive  
10 result. It definitely is on a policeman but when it's ---  
11  
12 GW Right.  
13 SF --- (unint) reported out they're not aware it's a policeman ---  
14  
15 GW So ---  
16 SF --- so, and until that became ---  
17  
18 GW Until they call, un-, until they call and tell you guys something, how do you know  
19 there was ever a mix up?  
20 SF We did not know until you actually notified us and then we looked at that and,  
21 and said ---  
22  
23 GW Right.  
24 SF --- "This needs to be investigated." And we, then repeated all of ---  
25  
26 GW So ---  
27 SF --- the testing that was done that day.  
28  
GW Right. So if, if two people were mixed up um, and the sheets were sent out but  
nobody ever called to say anything you guys would never know?

1 SF That's correct. But ah, two things: One, we do proficiency testing which is  
2 paying a company to send us unknowns. We do the testing and we send them  
3 back the results. We've never had an issue with mixed up specimens and that's  
4 still the same thing that your, your loading and whatever else.  
5

6 GW Right.

7 SF We never have. And then also for the suspect; the suspect always has the ability  
8 to ask for a retest. We've never had a problem with any retest that we've ever  
9 had with, that have been sent. You know, so that's not, and you know we've  
10 never had a discrepancy where the result we had didn't match what we had  
11 reported out. Or an area that we thought that there was issue. We've done the -  
12 --  
13

14 GW Well, I mean, except for the officer. I mean ---

15 SF Other than officer one.

16 GW He came back positive.

17 SF Yeah. That's correct. But other than that we've not had that as an issue with all  
18 of the quality checks that we have in place that we have never found that to be  
19 an issue.  
20

21 GW Okay.

22 SF And like I say, the, the proficiency testing that we are involved with which is  
23 College of American Pathologists, and that is who we are accredited by, there  
24 are, I'm trying to think, there are less than 30 laboratories in the United States  
25 that are accredited by CAP for Forensic Toxicology. We're inspected every two  
26 years. They go through everything that we do. We are fine as far as  
27  
28

1 accreditation. That is something we pay for. None of the other testing facilities in  
2 our area are CAP accredited. There's only four for the entire state of California.  
3 So we go through all of the highest standards that we can to make certain that  
4 we are performing a quality product. And that we, ourselves, pay to have  
5 unknowns sent to us. We don't have to do that.  
6

7 GW Uh-huh.

8 SF But pay to make certain that there's not problems and issues. And we've done  
9 everything we can potentially do to try and mitigate that as an issue or possibility  
10 that that could happen. And, again, when this happened we looked at it and it's  
11 like, "What more steps can we take to try and make sure this never happens  
12 again."  
13

14 GW Okay. Um, let's see. And what was the other technician's name? Other than  
15 Sandy?  
16

17 SF Steve Comstock.

18 GW Comstock. Steve Comstock.

19 SF C-O-M-S-T-O-C-K.

20 GW Okay. Steve Comstock. Okay. And ah, for the samples that you guys, for  
21 positives, is it you keep for a year?  
22

23 SF For blood specimens, all specimens that we test that are blood we keep for a  
24 year in the freezer.

25 GW Okay. What about negatives? Do you guys?

26 SF Negatives we keep also. All specimens we keep for a year.

27 GW All keep for a year?  
28

1 SF On all blood. Because you never know with a blood specimen. It came back  
2 later on that you guys says, "Oh. You know there's something weird that was out  
3 there we need you to test for." Because we're only testing street drugs, for the  
4 most part.  
5  
6 GW Right.  
7 SF We're not necessarily testing for, let's say, synthetic ---  
8  
9 GW Right.  
10 SF --- marijuana or something else. So ---  
11  
12 GW Gotcha.  
13 SF --- we hang on to it just because it's negative doesn't mean that there's not  
14 something that causing the sa-, you know the client or suspect to be under the  
15 influence. We're just not detecting it. They may be on Ambien. We don't test for  
16 Ambien.  
17 GW Uh-huh.  
18 SF But a lot of people take it for sleeping and it may impair driving ability so, but  
19 that's not something that we check for so it's ---  
20  
21 GW Okay.  
22 SF --- always stored.  
23 GW So all blood kept for a year?  
24 SF All year and then Coroner blood is kept longer than that.  
25  
26 GW Okay. And so ah... is it a year or at least a year for, like, for positives? For, if it  
27 was ---  
28 SF It's a year is what our contract has with Tulare County and that that ---

1 GW Okay.

2 SF --- is what Title 17 says we need to do for alcohol and that is what um, College of  
3 American Pathologists says is that we need to keep it for a year.

4

5 GW And if they, if ah, they wanted you to keep it longer it, would they contact you and  
6 say, "Hey. Can you hold on to this a little bit longer?" Or ---

7 SF Oh, no, that's correct. And sometimes we do.

8

9 GW Okay.

10 SF I mean, Coroner specimens, like Fresno County Coroner, we hold for five years  
11 but if they really believe that something is a murder that they just haven't been  
12 able to figure out it'll be holded forever. And we have ---

13 GW Okay.

14 SF --- some sa-, some specimens that we hold forever, you know.

15

16 GW Right.

17 SF Just because they ---

18 GW Okay.

19 SF --- still think that there's something there. They just don't know what it is.

20

21 GW Okay.

22 SF So we try and work with our, with the clients that we do business with. And if  
23 they need something held that's fine. If, but if not, then it's discarded after a  
24 year. We just don't the storage space in the freezer.

25 GW Okay. Um, I say 'cause this, it came to our office say, that sent a deal. Um, and  
26 it makes us a little nervous (LAUGHS) you know to, to, you know, to make sure  
27 that ah ---

28

1 SF Oh, I'm sure. And in (unint) understand.

2 GW So we're trying to, you know, just to make sure everything is um, this is the  
3 highest quality it can be.

4 SF Uh-huh.

5 GW Um... would, if ah, our office right now were to ask you to not destroy ah,  
6 anymore samples for, for this just this time being, would you guys be able to do  
7 that?  
8

9 SF It depends on how long that you're wanting us to hold on to them.

10 GW Um, I'm hoping it wouldn't be that long. Um, just until, like I said, this whole  
11 thing's figured out and ---  
12

13 SF How long do ---

14 GW --- and we're passed it.

15 SF --- you think that will be? I mean, part of it is a storage space.

16 GW Right.

17 SF Part of it is as my conversations with um, Robert Dempsie when we talked about  
18 this it ---  
19

20 GW Uh-huh.

21 SF --- puts, it puts the District Attorney and prosecution at risk the longer that you  
22 hold on to specimens because any specimen that you have, even though it's  
23 frozen, it will deteriorate. Especially after a year. So if you're holding on ---  
24

25 GW Right.

26 SF --- to specimens for two years and they ask for a retest, the values are gonna be  
27 lower than what we had. Whether they're alcohol, whether it's amphetamines,  
28

1 any lab you send it to. Therefore, the suspect has a legal right to retest for one  
2 year. After that they don't have a right to it. So there's no reason to hang on to  
3 it. So the longer you hold on to specimens, the weaker your case becomes.  
4

5 GW Okay. Um, I cannot give you an exact time frame. Um, I'm hoping it won't be  
6 that long of a time period. But, but just for right now could you hang on to them?

7 And, and I will ---

8 SF Well I can give them, I will, I can give them direction not to destroy ---

9 GW Okay.  
10

11 SF --- specimens but, you know (OVERTALK) let me know.

12 GW (OVERTALK) And I will get back to you.

13 SF Because, like I say, it's, it's a ---

14 GW Yeah.

15 SF --- double, it hurts you somewhat, we have a space issue. That's our issue, is  
16 space.  
17

18 GW Okay.

19 SF But from your, your standpoint...

20 GW Yeah. I'll get back to you ---  
21

22 SF ... the result ---

23 GW --- as, as fast as I can on that.

24 SF Okay.

25 GW Um... um... and would you be able to generate, like, a list, like, a, on average,  
26 like, how many um, samples you guys test a year? And ---  
27

28 SF Oh...



1 GW --- or do you have a list? Like a, of what um, of what samples do you have on  
2 hand? I know that would be a lot.

3 SF No. I couldn't (unint) I couldn't generate that. That was, I couldn't tell you what  
4 was in the freezer. I mean, I can go through. We normally perform, I think it's  
5 normally, like 2000 per month, is about what we average.

6

7 GW Uh-huh.

8 SF As far as ah, tests ---

9

10 GW And that's just processing?

11 SF That's correct. As far as getting, because, I mean, we cover, we cover Fresno  
12 County Coroner. We cover ---

13 GW Uh-huh.

14 SF --- Kings County Coroner. You know, and, see, what, and then you know almost  
15 all of the PDs and the CHPs that we have and ---

16

17 GW Right.

18 SF --- but as far as the number of specimens coming in that have orders, it's  
19 approximately 2000 per month.

20

21 GW Okay. Um...

22 SF And then normally, you know, when we end up having things, 'cause you know  
23 we get multiple tubes 'cause we use different tubes for alcohol than we do for ---

24 GW Right.

25 SF --- for um, drug testing. So.

26

27 GW Okay. And also on the report I got from the Sheriff's Department it had listed that  
28 they spoke with Sandy and that she was gonna generate, supposed to generate

1 some type of report that would explain how this whole thing started. How ah,  
2 how it was fixed and how it ended. And I, when I talked to her yesterday um, I  
3 asked her if she had that report and she said um, she didn't do a report um, per  
4 you.

5  
6 SF That is correct. That I told her we do not release any type of statement until it's  
7 been reviewed by our attorneys, and if it's approved by our attorneys then we  
8 would release something. But that we don't ---

9  
10 GW Okay.

11 SF --- ah, as far as an internal comment of processes that had gone into the  
12 laboratory.

13 GW Right.

14 SF And wouldn't you agree with me on that, Bruce?

15  
16 BG Yeah. I mean, look, Gregg, if you need something just let us know what you  
17 need. We'll get, we'll get you what ---

18 GW Okay.

19 BG --- you want. But I guess I have to see it first.

20 GW Okay. Well, do you think something like that could be generated?

21  
22 SF Um, Bruce I sent to you the, what was generated by Sandy um, a short awhile  
23 ago. I don't know if you saw it, of what she had written and sent to me at a  
24 previous time. I just told her that she could not release it unless we got ah,  
25 approval from the attorney.

26  
27 BG Okay. Gregg, when do you want it? Don't tell me in 15 minutes though.

28 GW No (LAUGHS). I don't think it's ---

1 SF (LAUGHS)  
2 GW --- I don't think it's quite that urgent. But ah...  
3 BG Like, some time in the, towards the middle of next week? Would that be okay?  
4  
5 GW I, I can work with that.  
6 BG Okay. And you just want her, sort of a narrative of what we believe happened in  
7 this particular instance?  
8 GW Yes. Um, yeah, what you believed happened and ah, ah, and, I guess, it would  
9 be any steps that you, you took so it wouldn't happen again. Um ---  
10  
11 BG Okay.  
12 GW --- ah, you know, if, if the fact that if this was just an isolated incident you believe.  
13 Um, you know, just ---  
14  
15 BG Sure.  
16 GW --- just stuff like that.  
17 BG Yeah. Which, by the way, is what we think.  
18 GW Right. Right.  
19 BG (unint)  
20 GW Okay. Yeah. Um, yeah ---  
21  
22 BG Sure.  
23 GW --- middle of the next week would perfect.  
24 BG You got it.  
25 GW Okay. Um... let's see.  
26  
27 BG Would you like to leave some blood before you go?  
28 SF (LAUGHS)

1 GW (LAUGHS) I'm good. Thank you.  
2 BG Alright.  
3 GW (LAUGHS) Okay.  
4  
5 BG I guess I can't offer you free blood samples?  
6 GW (LAUGHS)  
7 SF (LAUGHS)  
8 GW Okay. Alright. Well I think that is ah, that's pretty much all I need for now.  
9 SF Okay. Wonderful.  
10  
11 GW Um, if I have any other questions for you though um, could I just call you or set  
12 up ah, set up another time on email? I have a ---  
13 SF Oh, yeah. The card?  
14 GW Yeah.  
15 SF Sandy gave you?  
16 GW Uh-huh.  
17 SF That's fine.  
18 GW Okay.  
19 SF You okay with that, Bruce?  
20  
21 BG Oh, yeah. Yeah.  
22 SF Okay.  
23 GW Like I said, hopefully, hopefully this'll be it.  
24 SF Okay.  
25 GW This'll, we can just get this whole thing done and, and that's it.  
26  
27 SF Okay.  
28

1 GW Okay. Well I ah, I appreciate your time.

2 SF Okay. Thank you.

3 BG Thank you. Thank you very much.

4 GW Alright.

5 BG Thank you, Sharon.

6 SF Thank you, Bruce. I'm gonna hang up on you now, okay?

7 BG I'm gonna hang up on me too.

8 SF Okay. Thanks. (LAUGHS)

9 GW (LAUGHS) Alright.

10 SF Thank you.

11 GW Well thanks for ah, taking, taking some time.

12 SF Oh, no. That's fine. That's fine. At least I was here today. Ah, are you parked

13 right in front of the lab?

14 GW Um, yes. Yes, I am.

15 SF So I'll let you go out this way. The door right next to it is where Mineral King

16 used to be. That was ---

17 GW Oh, okay.

18 SF --- the old space and we ---

19 GW Yeah. I remember that.

20 SF --- expanding and growing.

21 GW Yeah.

22 SF Yeah, you, good. Good. Good.

23 GW (LAUGHS) (OVERTALK) Okay. Well, thank you.

24

25

26

27

28

1 SF (OVERTALK) Thank you, Gregg.

2 GW Bye.

3 SF Bye-bye.

4  
5  
6 END OF INTERVIEW IS 1325.

7  
8 Transcribed by  
9 Constance J. Conway  
10 Tulare County District Attorney  
11 Bureau of Investigations  
12 February 10, 2016  
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