

1 IN THE CIRCUIT COURT OF THE STATE OF OREGON
2 FOR MULTNOMAH COUNTY

4	DAVID KOENIG	11	Case No.: 23CV15424
5	Plaintiff	12	PLAINTIFF’S DECLARATION
6	vs	13	PERTAINING TO MEDICAL
7	EVANS CLINCHY	14	RECORDS
8	JENNIFER CLINCHY and	15	
9	BRIANNA (LOLA) McKISSEN	16	
10	Defendants	17	

19 I, David Koenig, declare the following under penalty of perjury:

20 1. This declaration sets forth facts as would be admissible in evidence, and I am competent
21 to testify to the matters stated.

22 2. On May 10, 2023, I sent my former attorney Marc Mohan an email with the subject
23 “Notes from psychiatrist, ENT, and SLP visits”.

24 3. This email contained three attachments:

25 (a) A six-page summary of my April 29, 2023 visit with Psychiatrist Dr. Moses Ijaz,
26 when I was diagnosed with PTSD.

27 (b) A three-page summary of my April 7, 2023 visit with Ears, Nose, Throat (ENT)
28 Specialist Erica Bocchi in which I was diagnosed with dysphonia and referred to a
29 Speech Language Pathologist (SLP).

- 1 (c) A four-page summary of my May 1st, 2023 visit with SLP Sarah Erter, in which
2 the dysphonia was confirmed and voice therapy was recommended.
- 3 4. Gmail's preview functionality only shows the first page of the first documents (a) and (b),
4 though it shows the entirety of document (c).
- 5 5. Downloading the documents gives a PDF with all pages intact.
- 6 6. In responses to requests for production, Mr. Mohan gave no pages of document (a), only
7 the first page of document (b) at Bates #326, and the entirety of document (c) at Bates
8 #322-325.
- 9 7. After I began representing *pro se*, I noticed the lack of document (a) and included it as
10 Exhibit C in the PLAINTIFF'S SUPPLEMENTAL RESPONSE TO EVANS
11 CLINCHY'S AND JENNIFER CLINCHY'S SPECIAL MOTIONS TO STRIKE, also
12 assigning it Bates #472-477.
- 13 8. I did not notice that only the first page of document (b) was included in previous
14 responses to requests for production when I included that page as Exhibit D in the
15 PLAINTIFF'S SUPPLEMENTAL RESPONSE TO EVANS CLINCHY'S AND
16 JENNIFER CLINCHY'S SPECIAL MOTIONS TO STRIKE.
- 17 9. I noticed the omission today and am including at the end of this declaration the entirety of
18 document (b) and assigning it Bates #492-494.
- 19 10. The entirety of document (b) should be considered an amendment of Exhibit D in the
20 PLAINTIFF'S SUPPLEMENTAL RESPONSE TO EVANS CLINCHY'S AND
21 JENNIFER CLINCHY'S SPECIAL MOTIONS TO STRIKE, filed August 15, 2023.
- 22 11. Plaintiff regrets the error.
- 23

1 August 16, 2023.

2

/s/ David Koenig

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Plaintiff, representing *pro se*

PROOF OF SERVICE

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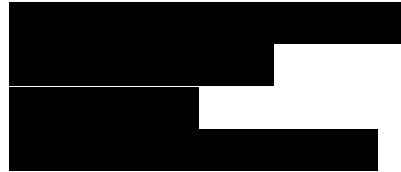
I certify that I caused this document to be served via e-mail on:

Defendants Jennifer and Evans Clinchy
% Atty: Michael Fuller
Olsen Daines
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111 SW 5th Ave., Suite 3150
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michael@underdoglawyer.com

Defendant BriAnna (Lola) McKissen
% Atty: Ashley L. Vaughn
Dumas & Vaughn
3835 NE Hancock St., Suite GLB
Portland, Oregon 97212
Ashley@DumasandVaughn.com

August 16, 2023.

/s/ David Koenig

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Plaintiff, representing *pro se*

Patient: David E Koenig
DOB: 10/08/1977
MR#: 2480041
DOS: 04/07/2023

New Patient Consultation

David E Koenig was seen today as a new patient. The patient is a 45 year old male with a chief complaint of voice change. He has chronic hoarseness that can fluctuate in the severity. This began about 2 years ago. He has been dealing with anger issues and other mental health issues that resulted in him screaming often. There has been about 5 times where he has lost his voice completely for about 24 hours. During this time there was some pain with phonation. Typically there is no pain when he speaks. He has tried drinking throat comfort tea recently. He has also been working on his mental health and is screaming less. No odynophagia, dysphagia, or dyspnea. No neck trauma or intubations. He is concerned that he is done permanent damage to his throat/voice. No other concerns.

Pharmacy Verified

CURRENT MEDICATIONS

Medication list reviewed today



escitalopram oxalate 10 mg tablet (escitalopram oxalate)



ALLERGIES

No known allergies

Have you ever had an allergic reaction to a medication (for example: rash, itching, trouble breathing)? No

Have you ever had anaphylaxis (a life-threatening allergic reaction)? No

Is there any personal or family history of inhaled gas allergy? No

Do you have an allergy to IV Contrast? No

Do you have an allergy to Latex? No

PAST MEDICAL HISTORY

CARDIOVASCULAR: Heart murmur, High blood pressure, High cholesterol

PSYCHOLOGICAL: Post-traumatic stress disorder

PAST SURGICAL HISTORY

Have you ever had complications from a surgery? No

FAMILY HISTORY:

Are you adopted? No

Father: Deceased, heart attack, 51-70

Mother: Alive



SOCIAL HISTORY

Marital status: Separated/Divorced

What is your current living situation: Alone

Children: 1 living; Male, 20, healthy
0 deceased
Do you have pets at home: No

000493

LIFESTYLE

Do you exercise regularly? Yes, Orangetheory, 2-3 days per week, 60 min per day
Do you drink caffeinated beverages? Yes, usually one, sometimes two per day
Cigarette use: Never smoker
Other tobacco or nicotine products: Never
Marijuana use: Never
IV or other recreational drug use: Never

PHYSICAL EXAM

Vitals: Height: 70 in, Weight: 175 lbs, BMI: 25.20
General: Well developed, well nourished, in no apparent distress. Voice is raspy.
Ears: Normal pinnas, clear external auditory canals, tympanic membranes are clear, intact without any signs of infection or effusion.
Nose: Septum is deviated to the right. Otherwise clear and anterior rhinoscopy without masses or lesions.
Oral Cavity/ Oropharynx: No masses or lesions in the oral cavity or oropharynx. Moist mucosa.
Hypopharynx/Larynx: Unable to be examined secondary to hyperactive gag reflex and unfavorable anatomy.
Neck: Supple, without any lymphadenopathy. Larynx is midline with normal crepitus. No audible stridor or stertor. No thyromegaly
Cranial Nerves: CN II-XII grossly intact.

PROCEDURE NOTE:

After a PARQ was discussed with the patient, topical anesthetic consisting of Lidocaine and phenylephrine was applied to the left nasal cavity. Flexible laryngoscopy was then performed. The left nasal cavity is otherwise clear. There is diffuse mucosal edema and erythema of the supraglottic and glottic areas. Vocal cords are moving normally without paresis. There is no vocal cord lesions. There is minor laryngeal muscle tension. The pyriform sinuses are clear and symmetric without pooling of secretions. No change with Valsalva. This was well tolerated.

IMPRESSION

1. Dysphonia. His exam today it looks consistent with voice overuse and trauma along with some muscle tension. I recommend he continue to work on his mental health as I think the screaming is the main contributing factor here. We also discussed how speech therapy might be helpful for the muscle tension and overall to learn better vocal hygiene measures and techniques. He is interested this. I will send out a referral for him nearby his home which would be which is to voice and swallowing clinic. He is to let me know if they are booking out for in advance and we can consider sending the referral to a different clinic. Follow-up can be as needed but he knows to return for any new or worsening symptoms. All questions were answered.

NEW/CHANGED MEDICATIONS

Added new medication of escitalopram oxalate 10 mg tablet (escitalopram oxalate) - Signed

REVIEW OF SYSTEMS

Ears, Nose, and Throat: *Positive for* Hoarseness, Throat pain/soreness

Thank you for allowing me to participate in the care of your patient. Please feel free to contact me with

any questions or concerns.

000494

Sincerely yours,

Erica E Bocchi PAC

CC.

Sent to:

Khaleed Alston ND

Method: Fax

(503) 624-0118