

1 MAKING THINGS UP OUT OF THIN AIR, BUT PERHAPS, READING TOO MUCH  
2 INTO THINGS?

3 A. OVER REACTING. MISINTERPRETING.

4 Q. BUT NOT DELUSIONAL, IN THAT, HE DOESN'T UNDERSTAND REAL  
5 VERSUS NOT REAL?

6 A. CORRECT.

7 Q. OKAY. AND YOUR RECOMMENDATION AT THIS POINT -- AND  
8 PLEASE DON'T LET ME PUT WORDS IN YOUR MOUTH -- IS IT THAT HE BE  
9 FURTHER TESTED AT A FEDERAL MEDICAL FACILITY?

10 A. I THINK THAT'S THE PRUDENT THING TO DO.

11 Q. OKAY.

12 MS. DUARTE: I HAVE NOTHING FURTHER. THANK YOU, YOUR  
13 HONOR.

14 THE COURT: OKAY. YOU DON'T HAVE ANYTHING FURTHER, DO  
15 YOU?

16 MR. NICOLAYSEN: NOTHING. THANK YOU.

17 THE COURT: OKAY. DR. BACKER, A COUPLE OF THINGS. THE  
18 REPORT THAT HAS BEEN -- OR WILL BE MARKED AND PLACED IN THIS  
19 RECORD CONTAINS SOME TYPOS. AND KNOWING WHAT WE ALL KNOW ABOUT  
20 MR. SUTCLIFFE'S UNDERSTANDABLE DESIRE TO MAKE SURE EVERYTHING  
21 IS DONE RIGHT, I WANT TO CONFIRM THAT THIS ENTIRE REPORT IS  
22 ABOUT STEVEN WILLIAM SUTCLIFFE.

23 WHAT I'M REFERRING TO IS, THAT AT THE TOP OF PAGE 3, AND  
24 FOR SEVERAL ENSUING PAGES, **THE NAME OF THE PATIENT IS INDICATED**  
25 **AS DAVID SUTCLIFFE.**

1 THE WITNESS: OH.

2 THE COURT: AND THE CONCLUDING PAGE OR TWO, IT'S LISTED  
3 AS DAVID SNYDER; BUT THAT'S JUST SOME SECRETARY'S TYPO, RIGHT?

4 THE WITNESS: CORRECT, SIR.

5 THE COURT: AND ALL OF THE MATERIAL OF PAGES 1 THROUGH  
6 15 IN THIS REPORT ARE ABOUT, AND DESCRIBE ONLY, STEVEN WILLIAM  
7 SUTCLIFFE, CORRECT?

8 THE WITNESS: THAT'S CORRECT.

9 THE COURT: OKAY. NOW, NEXT, I WOULD LIKE YOU TO TELL  
10 ME, ASSUMING THAT OTHER QUALIFIED EXAMINERS, INCLUDING AT A  
11 MEDICAL CENTER, AT SOME POINT CONCLUDE THAT WHATEVER MR.  
12 SUTCLIFFE'S CONDITION IS, IT IS NOT AN ACCESS ONE DISORDER; ARE  
13 THERE ANY MEASURES THAT SOMEONE LICENSED TO DO THIS KIND OF  
14 THING, NAMELY, A MEDICAL PHYSICIAN, NOT NECESSARILY A  
15 PSYCHOLOGIST, BUT SOMEONE, WHO, PERHAPS, MAY BE A PSYCHIATRIST  
16 OR SOME OTHER KIND OF MEDICAL PHYSICIAN, A DOCTOR; ARE THERE  
17 ANY MEASURES SUCH A PERSON CAN DO, PSYCHOTROPICLY OR OTHERWISE,  
18 TO ASSIST A PERSON WHO HAS EXHIBITED A CONTINUED, NOT ONLY  
19 TENDENCY, BUT A CONTINUED PATTERN OF DISRUPTIVE PROCEEDINGS, SO  
20 THAT IF THERE ARE FURTHER PROCEEDINGS, THE RISK IS MINIMIZED?

21 ARE THERE TRANQUILIZERS? ARE THERE OTHER KINDS OF MEDICATIONS  
22 THAT CAN BE ADMINISTERED TO SOMEONE TO MAKE IT POSSIBLE FOR THE  
23 PROCEEDINGS TO BE CONDUCTED IN A FAIR AND APPROPRIATE WAY?

24 THE WITNESS: YES.

25 THE COURT: AND IN YOUR EXPERIENCE, AND WORKING WITH THE