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10 *Attorneys for Plaintiff*
 CITY AND COUNTY OF SAN FRANCISCO

11 IN THE UNITED STATES DISTRICT COURT
 12 FOR THE NORTHERN DISTRICT OF CALIFORNIA
 13

14 CITY AND COUNTY OF SAN FRANCISCO,
 15 Plaintiff,
 16 vs.
 17 ALEX M. AZAR II, et al.,
 18 Defendants.

No. C 19-02405 WHA
Related to
 No. C 19-02769 WHA
 No. C 19-02916 WHA

**DECLARATION OF DR.
 CHRISTOPHER COLWELL IN
 SUPPORT OF PLAINTIFFS' MOTION
 FOR SUMMARY JUDGMENT AND IN
 SUPPORT OF THEIR OPPOSITION TO
 DEFENDANTS' MOTION TO DISMISS
 OR, IN THE ALTERNATIVE, FOR
 SUMMARY JUDGMENT**

19 STATE OF CALIFORNIA, by and through
 ATTORNEY GENERAL XAVIER BECERRA,
 20 Plaintiff,
 21 vs.
 22 ALEX M. AZAR, et al.,
 23 Defendants.

Date: October 30, 2019
 Time: 8:00 AM
 Courtroom: 12
 Judge: Hon. William H. Alsup
 Action Filed: 5/2/2019

24 COUNTY OF SANTA CLARA et al,
 25 Plaintiffs,
 26 vs.
 27 U.S. DEPARTMENT OF HEALTH AND
 HUMAN SERVICES, et al.,
 28 Defendants.

1 I, Dr. Christopher Colwell, declare as follows:

2 1. I have personal knowledge of the facts set forth in this declaration and, if called as
3 a witness, could and would testify competently to the matters set forth below.

4 2. I am Chief of Emergency Medicine at Zuckerberg San Francisco General Hospital
5 and Trauma Center (“ZSFG”). I have served in that position since July 1, 2016. In this capacity,
6 I oversee all emergency service operations for the City and County of San Francisco (“San
7 Francisco” or “City”), including the Emergency Department at ZSFG.

8 3. Prior to coming to ZSFG, I was chief of the Department of Emergency Medicine at
9 Denver Health and professor and executive vice chair of the Department of Emergency Medicine
10 at University of Colorado School of Medicine. I have been an emergency physician for 24 years
11 and have published more than 100 manuscripts or book chapters in the areas of prehospital,
12 emergency and trauma care. I received my Bachelor of Science degree from University of
13 Michigan and my medical doctorate from Dartmouth Medical School. I completed residency
14 training in emergency medicine at Denver Health where I served as chief resident. I am a fellow
15 of the American College of Emergency Physicians.

16 4. ZSFG is the only trauma center in San Francisco. In addition, ZSFG is the
17 provider of trauma care for the northern portion of San Mateo County and thus has a service area
18 of 1.5 million people. It has the highest trauma center designation (Level 1) which increases a
19 seriously injured patient’s chances of survival by an estimated 20-25%. The ZSFG trauma team
20 serves nearly 4,000 adults & children annually for traumatic injuries.

21 5. Pursuant to ZSFG Administrative Policy 5.15, if a staff member in the ZSFG
22 Emergency Department requests not to participate in an aspect of patient care because doing so
23 would conflict with the person’s religious or moral beliefs, the Department will honor that request
24 as long as it does not negatively affect the quality of patient care. Importantly, however, if the
25 immediate nature of the patient’s needs do not allow for a substitution of personnel, individuals
26 are required to perform their duties unless and until other competent personnel can be provided.

27 6. If individuals could categorically refuse to assist with a critical procedure—and
28 suffer no repercussions—patients would suffer.

1 7. Every day, patients present in the ZSFG emergency room with life threatening
2 conditions. Many times every month, those conditions involve serious complications relating to
3 pregnancy or a sexually transmitted disease/infection. A team member opting out of those
4 patients' treatment would put their health—and even lives—at serious risk.

5 8. Within the last few weeks, I was personally involved in the treatment of a healthy
6 young woman who had bled substantially into her abdomen due to an ectopic pregnancy. Her
7 condition was critical. If a member of the team responsible for her care had opted out of her
8 treatment for any reason, the woman would have died before other competent personnel could
9 have been substituted in.

10 9. Similarly, I was involved in the treatment of a young woman who was septic and
11 hypotensive due to pelvic inflammatory disease resulting from a sexually transmitted disease.
12 The patient required immediate treatment. If a member of the team responsible for her care had
13 opted out of her treatment for any reason, the woman might have died.

14 10. Put simply, emergency medical teams cannot do our jobs and save people's lives if
15 there is an option for team members to opt-out of providing emergency care.

16 11. If San Francisco's Health and Human Services ("HHS") funding were terminated,
17 the results for the healthcare system in San Francisco would be catastrophic.

18 12. Because the vast majority of its funding comes from HHS, the ZSFG Emergency
19 Department would likely be forced to close within months. I believe it would reasonably take
20 more than three years for another hospital to build the necessary infrastructure and obtain the
21 required verifications to open a similar program.

22 13. In the interim, other local hospitals would not be able to cover the increase in
23 demand for emergency care. Accordingly, there would be no place in the region for patients with
24 severe trauma to be treated. Patient care for individuals with major injuries like gun-shot wounds,
25 stab wounds, severe blunt trauma, traumatic car crash injuries, and traumatic brain injuries would
26 be severely compromised and more of these individuals would die.

27 14. In addition, the ZSFG Emergency Department personnel treat a wide range of non-
28 traumatic complaints for a predominantly underserved, urban population. ZSFG is the primary

1 provider of psychiatric emergency care in the City. Accordingly, closure of the Department
2 would mean that thousands of people would lose access to medical care and individuals suffering
3 psychiatric emergencies would have no place to be treated.

4

5 I declare under penalty of perjury that the foregoing is true and correct and that this
6 declaration was executed on September 9, at San Francisco, California.

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Christopher Colwell, MD

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