SILLS CUMMIS & GROSS P.C.
One Riverfront Plaza
Newark, NJ 07102
(973) 643-7000
Attorneys for Defendant,
Cardinal Health 409, Inc.
f/k/a R. P. Scherer Corporation

FILED

JUN 04 2009

Carol E. Higbee, P.J.Cv.

IN RE: ISOTRETINOIN
(APPLICABLE TO ALL CONSOLIDATED CASES ON THE ATTACHED LIST)

SUPERIOR COURT OF NEW JERSEY
LAW DIVISION: ATLANTIC COUNTY

DOCKET NO. ATL-L-1321-09

FIRST AMENDMENT TO CASE MANAGEMENT ORDER NO. 3

THIS COURT, having conducted a Case Management Conference on June 4, 2009, and all parties having been represented by Counsel, and for good cause shown,

IT IS on this 4th day of June, 2009:

1. Plaintiffs' Medical Authorizations

Plaintiffs shall provide to Defendants the following two executed authorizations for each healthcare provider identified in the Plaintiffs' Fact Sheet and, upon request, for each additional healthcare provider identified by Defendants:

(a) a combined HIPAA compliant authorization for the release of Plaintiffs' medical and psychiatric records (Form attached here as Exhibit 1); and

(b) a HIPAA compliant authorization for the release of psychotherapy notes on psychotherapy provided to a Plaintiff (form attached hereto as Exhibit 2).

In the event that Plaintiffs have already provided Defendants with an executed copy of the originally approved HIPAA compliant authorization for medical records (with no provision for psychiatric records), in lieu of executing Exhibit 1, plaintiffs shall have the option to provide the originally approved stand-alone psychiatric authorization.

2. Discovery Schedule – Depositions

The parties shall engage in deposition discovery in the consolidated cases in accordance with the following schedule:

(a) Plaintiffs shall complete the deposition of Defendants' corporate representatives by September 1, 2009.

(b) Defendants shall take the depositions of Plaintiffs beginning June 1, 2009, and shall use their best efforts to complete the depositions of Plaintiffs by December 31, 2009 if records collection status permits. Defendants shall delineate which plaintiffs will be deposed first based on status of records collection.

3. Plaintiffs will use their best efforts to provide Defendants with executed records authorizations promptly and Defendants shall use their best efforts to order and collect the records promptly so as to facilitate the scheduling of the depositions in accordance with the schedule set forth herein.

Carol E. Higbee

Honorable Carol E. Higbee, P.J.Cv.

EXHIBIT 1

KATHRYN FLOR, Plaintiff, v. MYLAN BERTEK PHARMACEUTICALS, INC., f/k/a BERTEK PHARMACEUTICALS, INC.; MYLAN PHARMACEUTICALS, INC.; MYLAN, INC., f/k/a MYLAN LABORATORIES, INC.; CARDINAL HEALTH 409, INC., f/k/a R. P. SCHERER CORPORATION; and GENPHARM Defendants.	**SUPERIOR COURT OF NEW JERSEY** **LAW DIVISION** **ATLANTIC COUNTY** Docket No. ATL-L-3795-07 **(CONSOLIDATED)**
_____ Plaintiff, v. _____ _____ _____ Defendants.	Docket No. _____

AUTHORIZATION FOR RELEASE OF
MEDICAL RECORDS AND
PSYCHOLOGICAL/PSYCHIATRIC RECORDS
PURSUANT TO
45 C.F.R. § 164.508 (HIPAA)

Name:

Date of Birth:

Social Security Number:

I hereby authorize _____ to release all existing medical records and information regarding the above-named person's medical care, treatment, physical condition(s) and/or medical expenses revealed by observation or treatment past, present and future and to release all existing records and information regarding the above-named person's psychological or psychiatric care, treatment, condition(s) and/or expenses revealed by observation or treatment past, present and future to the below law firm(s):

- ☐ Baker, Donelson, Bearman, Caldwell & Berkowitz, P.C., Post Office Box 14167, Jackson, MS 39236 (Counsel for Cardinal Health 409, Inc. n/k/a Catalent Pharma Solutions, Inc.)
- ☐ Pietragallo, Gordon, Alfano, Bosick & Raspanti, LLP, One Oxford Center, 38th Floor, Pittsburgh, PA 15219 (Counsel for the Mylan Defendants)
- ☐ Ulmer & Berne, LLP, 600 Vine Street, Suite 2800, Cincinnati, OH 45202-2409 (Counsel for the Barr Defendants)
- ☐ Duane Morris, LLP, 30 South 17th Street, Philadelphia, PA, 19103-4196 (Counsel for the Ranbaxy Defendants).

These records shall be used solely in connection with the currently pending litigation involving the person named above. This authorization shall cease to be effective as of the date on which that litigation concludes.

I understand that this authorization includes information regarding the diagnosis and treatment of psychiatric and psychological disorders, and that the health information being used/disclosed may include information relating to the diagnosis and treatment of Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS), sexually transmitted disease and drug and alcohol disorders.

This authorization also may include x-ray reports, CT scan reports, MRI scans, EEGs, EKGs, sonograms, arteriograms, fetal monitor strips, discharge summaries, photographs, surgery consent forms, informed consent forms regarding family planning, admission and discharge records, operation records, doctor and nurses notes (excluding psychotherapy notes maintained separately from the individual's medical records that document or analyze the contents of conversation during a private counseling session or a group, joint, or family counseling session by referring to something other than medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of treatment furnished, results of clinical tests, and any summary of the following items: diagnosis, functional status, the treatment plan, symptoms, prognosis and progress), prescriptions, medical bills, invoices, histories, diagnoses, psychiatric treatment and counseling records, psychological treatment and counseling records, narratives, and any correspondence/memoranda and billing information. It also includes, to the extent such records currently exist and are in your possession, insurance records, including Medicare/Medicaid and other public assistance claims, applications, statements, eligibility material, claims or claim disputes, resolutions and payments, medical records provided as evidence of services provided, and any other documents or things pertaining to services furnished under Title XVII of the Social Security Act or other forms of public assistance (federal, state, local, etc.). This listing is not meant to be exclusive.

I understand that I have the right to revoke in writing my consent to this disclosure at any time, except to the extent that the above-named facility or provider already has taken action in reliance upon this authorization, or if this authorization was obtained as a condition(s) of obtaining insurance coverage. I further understand that the above-named facility or provider cannot condition(s) the provision of treatment, payment, enrollment in a health plan or eligibility for benefits on my provision of this authorization. I further understand that information disclosed pursuant to this authorization may

be subject to redisclosure by the recipient to its clients, agents, employees, consultants, experts, the court, and others deemed necessary by the recipient to assist in this litigation.

Any photostatic copy of this document shall have the same authority as the original, and may be substituted in its place. Copies of these materials are to be provided at the expense of the firm checked above.

Dated this _____ day of _____,200_

_____

[Signature of Plaintiff or Representative]

If a representative, please describe your relationship to the plaintiff and your authority to act on his/her behalf:

_____

_____

_____

_____

EXHIBIT 2

KATHRYN FLOR Plaintiff, v. MYLAN BERTEK PHARMACEUTICALS, INC., f/k/a BERTEK PHARMACEUTICALS, INC.; MYLAN PHARMACEUTICALS, INC.; MYLAN, INC. f/k/a MYLAN LABORATORIES, INC.; CARDINAL HEALTH 409, INC. f/k/a R.P. SCHERER CORPORATION; and GENPHARM Defendants	:	SUPERIOR COURT OF NEW JERSEY LAW DIVISION ATLANTIC COUNTY DOCKET NO. ATL-L-3795-07 CIVIL ACTION **APPLICABLE TO ALL CONSOLIDATED CASES**

AUTHORIZATION FOR RELEASE OF PSYCHOTHERAPY NOTES PURSUANT TO 45 C.F.R. § 164.508 (HIPAA)

Name: _____

Date of Birth: _____

Social Security Number: _____

I hereby authorize _____ to release all existing psychotherapy notes regarding the above-named person's medical care, treatment, physical/mental condition(s) and/or medical expenses revealed by observation or treatment past, present and future to the below law firm(s):

- ☐ Baker, Donelson, Bearman, Caldwell & Berkowitz, P.C., Post Office Box 14167, Jackson, MS 39236 (Counsel for Cardinal Health 409, Inc. n/k/a Catalent Pharma Solutions, Inc.) and Pietragallo, Gordon, Alfano, Bosick & Raspanti, LLP, One Oxford Center, 38th Floor, Pittsburgh, PA 15219 (Counsel for the Mylan Defendants).
- ☐ Ulmer & Berne, LLP, 600 Vine Street, Suite 2800, Cincinnati, OH 45202-2409 (Counsel for the Barr Defendants).

☐ Duane Morris, LLP, 30 South 17th Street, Philadelphia, PA, 19103-4196 (Counsel for the Ranbaxy Defendants).

These records shall be used solely in connection with the currently pending litigation involving the person named above. This authorization shall cease to be effective as of the date on which that litigation concludes.

I understand that this authorization includes all psychotherapy notes maintained separately from the above-named person's medical records that document or analyze the contents of conversation during a private counseling session or a group, joint, or family counseling session by referring to something other than medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of treatment furnished, results of clinical tests, and any summary of the following items: diagnosis, functional status, the treatment plan, symptoms, prognosis and progress.

I understand that the health information being disclosed by these psychotherapy notes may include information relating to the diagnosis and treatment of Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS), sexually transmitted disease and drug and alcohol disorders.

I understand that I have the right to revoke in writing my consent to this disclosure at any time, except to the extent that the above-named facility or provider already has taken action in reliance upon this authorization, or if this authorization was obtained as a condition(s) of obtaining insurance coverage. I further understand that the above-named facility or provider cannot condition(s) the provision of treatment, payment, enrollment in a health plan or eligibility for benefits on my provision of this authorization. I further understand that information disclosed pursuant to this authorization may be subject to redisclosure by the recipient to its clients, agents, employees, consultants, experts, the court, and others deemed necessary by the recipient to assist in this litigation.

Any photostatic copy of this document shall have the same authority as the original, and may be substituted in its place. Copies of these materials are to be provided at the expense of the firm checked above.

Dated this _____ day of _____,200_

_____

[Signature of Plaintiff or Representative]

If a representative, please describe your relationship to the plaintiff and your authority to act on his/her behalf:

_____

_____

_____

_____