

SYNTHETIC SOURCE DOCUMENT (the expert's report as served, input to the check) Report page 1

EXPERT REPORT OF A. EXAMPLE, M.D.

Jane Doe, individually and as parent of Baby D., v. Example Medical Center, et al.,
Superior Court of Example County, No. EX-2025-CV-0417 (SYNTHETIC).

Served June 30, 2026. Prepared at the request of Sample & Sample LLP.

Every name, fact and opinion in this report is invented for a SYNTHETIC work sample.

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1. Qualifications. I am a physician board certified in pediatrics and neonatal-perinatal medicine. My curriculum vitae is Exhibit 2.
2. Compensation. I am compensated at \$500 per hour for review and \$600 per hour for deposition testimony.
3. Materials considered. I reviewed the records produced as EXMC000001 to EXMC000020 and the literature listed in Appendix A.

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4. Delivery. Baby D. was born on March 17, 2024 at 0506 by cesarean delivery (EXMC000008).

5. Birth weight was 3,410 grams. Apgar scores were 1, 4 and 6 at 1, 5 and 10 minutes (EXMC000008).

6. Umbilical arterial cord gas showed pH 6.92 with a base deficit of 16 (EXMC000010).

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7. Labor. Mrs. Doe received magnesium sulfate for preeclampsia with severe features (EXMC000003). Oxytocin (Pitocin) was infused for induction (EXMC000004).

8. Tachysystole was charted at 0404. Terbutaline 0.25 mg was given at 0408 (EXMC000005).

9. Recurrent late decelerations began at 0412, and Dr. Oriel Fabrikam was notified at 0420, as charted by Rowan Tessaly, RN (EXMC000005).

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10. Resuscitation. Baby D. required positive pressure ventilation and intubation at 4 minutes of life (EXMC000009).

11. Glucose. The first point-of-care glucose, at 0706, was 22 mg/dL (EXMC000011; EXMC000012).

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12. Cooling. Whole-body cooling began at 5 hours 40 minutes of life (EXMC000013).

13. Seizures began at about 8 hours of life and were treated with a phenobarbital load of 20 mg/kg (EXMC000014).

14. Maintenance phenobarbital was 15 mg IV every 24 hours (EXMC000015).

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15. Imaging. The MRI of March 22, 2024 showed basal ganglia and thalamic predominant injury (EXMC000018).

16. Opinion on timing. In my opinion, the MRI pattern is consistent with an acute, near-total injury in the final hour before delivery.

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17. Opinion on delivery timing. In my opinion, delivery by 0445 more likely than not would have avoided the injury.

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18. Opinion on glucose. In my opinion, the glucose of 22 mg/dL at 0706 contributed to the injury.

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19. Reservation. I reserve the right to supplement these opinions if additional materials are produced.

/s/ A. Example, M.D. June 30, 2026

Appendix A: literature list (invented titles for the SYNTHETIC sample).