

No. 98-317-G

WILMA S. CLARK, INDIVIDUALLY AND AS
PERSONAL REPRESENTATIVE OF THE
HEIRS AND ESTATE OF HOWARD HAROLD
CLARK, DECEASED

PLAINTIFF,

V.
UNION PACIFIC RESOURCES COMPANY,
ET AL.,

DEFENDANTS.

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IN THE DISTRICT COURT

OF NUECES COUNTY

319TH JUDICIAL DISTRICT

**CELANESE'S FIRST SUPPLEMENTAL RESPONSE TO
PLAINTIFF'S REQUESTS FOR DISCLOSURE**

Defendants Hoechst Celanese Corporation and Celanese Ltd. (collectively, "Celanese") make the following supplemental disclosures with respect to the claims concerning Plaintiff's Decedent, Howard Harold Clark:

- (a) the correct names of the parties to the lawsuit;

Response: CNA Holdings, Inc. and Celanese Ltd. are the correct names of these defendants.

- (b) the name, address, and telephone number of any potential parties;

Response: At this stage of the suit, Celanese has insufficient information to know if all proper parties are joined.

- (c) the legal theories and, in general, the factual bases of the responding party's claims or defenses (the responding party need not marshal all evidence that may be offered at trial)

Response: On the basis of the limited information and vague allegations contained in Plaintiffs' Petition, Celanese believes the following affirmative defenses do or may apply to this case:

Celanese denies that it ever owned the Pontiac facility at issue in this case.

Celanese was a mere stockholder of the Pontiac Refining Corporation for the period of June 1967 to August 1969; it did not control daily operations of the Pontiac facility at issue and did not control the work performed by Plaintiff's Decedent.

The sole proximate cause of the decedent's alleged injuries or damages was the acts or omissions of other parties or persons over whom Celanese had no control and for whom Celanese is not legally responsible. No act or omission on the part of Celanese either caused or contributed to decedent's alleged injuries or damages.

As to any injuries or damages Plaintiff alleges to have incurred, decedent voluntarily and knowingly assumed the risk of incurring any of the injuries or damages alleged. Additionally, Plaintiff's decedent failed to exercise ordinary care for his own safety, and such failure on his part proximately caused any injuries or damages alleged.

Plaintiff's claims against Celanese are barred by the applicable statute of limitations and the doctrines of laches and waiver.

Further, although Celanese denies that Plaintiff's decedent worked at a facility owned or operated by Celanese, assuming the decedent did work at a Celanese facility, Celanese denies that he was exposed to asbestos at all, or in sufficient quantities to have caused any harm. Celanese believes its plants are and were safe and well-maintained industrial facilities, and there would have been insufficient opportunity for asbestos exposure.

Celanese denies that the decedent suffered from an asbestos-related injury.

- (d) the amount and any method of calculating economic damages;

Response: Celanese is not claiming monetary damages in this suit at this time.

- (e) the name, address, and telephone number of persons having knowledge of relevant facts, and a brief statement of each identified person's connection with the case;

Response: Celanese believes the following individuals may have knowledge of relevant facts:

Cecil Munn attorney who prepared/assisted with corporate acquisitions
Cantey & Hanger, L.L.P.
801 Cherry Street
Suite 2100
Fort Worth, Texas 76102-0821

Kathleen Adamick corporate employee knowledgeable about corporate
86 Morris Avenue ownership and liability issues
Summit, NJ 07901

Ernest M. Dixon, M.D. former corporate medical director
6305 Evermay Drive
McLean, VA 22101

Charles A. Laubly former corporate industrial hygienist
2225 North Tuscon Blvd.
Tucson, AZ 85716

T. Rodgers Shandley former purchasing/contracting employee
234 Turpin Street
Lewisville, TX 75067

Designated Representative/Custodian of Records for the following healthcare providers:

1. Oak Noll Hospital
 Oakland, CA
2. Thomas Spann Hospital
 Brownlee Street
 Corpus Christi, TX
3. Doctors Hospital Central (now Humana Hospital)
 3315 South Alameda Street
 P.O. Box 3828
 Corpus Christi, TX
4. V.A. Medical Center
 Kerrville, TX
5. Mobile Infirmary Medical Center
 5 Mobile Infirmary Circle
 P.O. Box 2144
 Mobile, AL
6. Providence Hospital
 6801 Airport Blvd.
 Mobile, AL
7. Sacred Heart Hospital
 5151 North Ninth Avenue
 Pensacola, FL
8. V.A. Medical Center

Pensacola, FL

9. V.A.
Biloxi, MS

(f) for any testifying expert:

- (1) the expert's name, address, and telephone number;
- (2) the subject matter on which the expert will testify;
- (3) the general substance of the expert's mental impressions and opinions and a brief summary of the basis for them, or if the expert is not retained by, employed by, or otherwise subject to the control of the responding party, documents reflecting such information;
- (4) if the expert is retained by, employed by, or otherwise subject to the control of the responding party:
 - A. all documents, tangible things, reports, models, or data compilations that have been provided to, reviewed by, or prepared by or for the expert in anticipation of the expert's testimony; and
 - B. the expert's current resume and bibliography;

Response: Celanese may call the following experts to testify at trial:

1. 1. J. LeRoy Balzer, Ph.D., 408 Horse Trail Court, Alamo, California 94507.

Dr. Balzer has a Bachelor of Science degree in Public Health Microbiology and a Master of Science degree in Preventive Medicine/Public Health, which were awarded by the University of California at Los Angeles in 1962 and 1963, respectively. He earned a Doctor of Philosophy degree in Environmental Health Science/Industrial Hygiene from the University of California at Berkeley in 1971. From 1966 to 1971, he was employed by the University of California School of Public Health as a research associate and research fellow. In 1966, he became involved in a coordinated research program of occupational medicine, industrial hygiene and education of insulation contractors. This intense study of the construction industry was sponsored through grants from the United States Public Health Service and involved observing the work environment of individuals working with asbestos-containing insulation and related products.

Dr. Balzer worked as a certified industrial hygienist from 1973 until 1987 when he became an Assistant Vice Chancellor at the University of California at San Francisco. He retired in 1994 and became a full-time consulting industrial hygienist and was appointed an Assistant Clinical Professor, School of Medicine, University of California Health Sciences. He is a member of the ACGIH (affiliate), AIHA and other professional organizations reflected on his curriculum vitae, a copy of

which has previously been provided. Dr. Balzer may testify at trial of this case live or by deposition.

Dr. Balzer has other personal knowledge of relevant facts based on his field work involving the use of asbestos-containing products and the surrounding occupational environment, but he also possesses general expertise in his field based upon specialized knowledge, skills and training. Dr. Balzer may offer opinions in this case about the general nature of the working environment in industrial locations such as where plaintiff worked, to include testimony regarding the composition and asbestos content, if any, of products used in such environments and the ability of such products to release asbestos fiber under certain conditions. Dr. Balzer may provide testimony on the availability of materials as substitutes for asbestos-containing products. Dr. Balzer will testify regarding an individual's exposure to asbestos from different media, to include circumstances and occupational settings that may result in direct exposure from persons having contact with asbestos-containing products or equipment, circumstances that may result in lower indirect or bystander exposures for others in the working environment. His testimony will be based, in part, on the results of testing which he has performed or reviewed for products which are the same or substantially similar to those which are anticipated to be discussed in this case. Dr. Balzer will also testify about industrial hygiene principles and methodologies used to determine potential hazards related to asbestos exposure, and how those principles and methodologies have changed over time.

Additionally, Dr. Balzer, based on personal knowledge and a review of medical, scientific and/or technical literature, will provide historical state-of-the-art testimony on the gradual development of knowledge within industry and within the field of industrial hygiene about asbestos exposure levels and suitable control measures. Dr. Balzer will address the evolution of workplace practices available to control exposures to include historical development of the use of respiratory protection in association with the handling of asbestos-containing products. Finally, Dr. Balzer will testify regarding the development over time of governmental standards and regulations pertaining to asbestos, to include the historical evolution of threshold limit values and permissible exposure levels to asbestos developed by professional organizations and government agencies.

2. Lawrence R. Birkner, CIH, CSP, McIntyre, Birkner & Associates, Inc., 2026 El Monte Drive, Thousand Oaks, California 91362-1822.

Mr. Birkner is a certified industrial hygienist and certified safety professional. He received a Bachelor of Science degree from Portland State University in 1973 and a Masters Degree in Occupational Safety and Health at New York University in 1975. Between 1974 - 1976, Mr. Birkner worked closely with Dr. Irvin Selikoff and others at Mount Sinai while employed as a safety and health research specialist at Environmental Sciences Laboratory in New York. From 1976 through 1996, Mr. Birkner worked extensively as a practicing industrial hygienist in American industry; in the course of that employment, Mr. Birkner worked as a corporate industrial hygienist for Celanese Corporation between 1977 - 1981. Mr. Birkner is a fellow of the AIHA and a member of the other professional industrial hygiene organizations reflected on his curriculum vitae, a copy of which has previously been provided.

Mr. Birkner will provide testimony regarding the history of industrial hygiene, industrial hygiene methods, exposure levels which trigger diseases associated with dust exposure, good housekeeping measures, and other related matters. He is prepared to testify about respirator history, what constitutes good hygiene practice, and the periods of time from an industrial hygiene standpoint when people and companies became aware of associated health risks. Mr. Birkner may give testimony regarding the level of fiber release, if any, from asbestos-containing products in the occupational setting and may testify regarding the availability of materials as substitutes for asbestos-containing products. He may testify as to issues involving re-entrainment and fiber drift. Mr. Birkner may also testify regarding work practices applicable to various types of occupations using products that contain asbestos, and he will provide a retrospective assessment or estimate of plaintiffs likely exposure to asbestos in a Celanese work environment based on historical literature and the facts available in this case.

Mr. Birkner has personal knowledge of relevant facts, but he also possesses generalized expertise in his field based on his specialized knowledge, skills and training. He may provide testimony regarding the applicability of the ACGIH, OSHA and EPA guidelines as they relate to occupational exposures to various types of asbestos-containing products. Mr. Birkner may testify regarding the size, construction, layout and working environment of facilities such as where plaintiff worked. He may testify about the nature of the working environment in such locations. He may testify about his knowledge of the composition and asbestos content, if any, of products present in the plaintiffs workplace and may testify concerning the ability of such products to emit asbestos fibers under certain conditions. Mr. Birkner may testify to the dust levels produced by particular occupational operations and products, to include those associated with the use of pipe and block insulation.

Mr. Birkner may testify about the development of literature and information about asbestos-related diseases as they relate to the gradual development of knowledge.

Mr. Birkner may testify about the development of literature and information about asbestos-related diseases as they relate to the gradual development of knowledge within industry and within the field of industrial hygiene about asbestos exposure and appropriate control measures. He will address the evolution of workplace practices available to control exposures, to include the historical development of the use of respiratory protection in association with the handling of asbestos-containing products. Mr. Birkner will testify regarding the development over time of governmental standards and regulations pertaining to asbestos, to include the historical evolution of permissible exposure levels to asbestos developed by professional organizations and government agencies. He will discuss his own research into asbestos-related diseases as they relate to industrial hygiene, the carcinogenicity of various fiber types as they relate to industrial hygiene, and the relationship, if any, between asbestos and various diseases. Mr. Birkner will provide testimony regarding the epidemiology of asbestos-related diseases, latency, state-of-the-art, and other related matters as they impact industrial hygiene. Based on the above evidence developed in this case, Mr. Birkner will testify that the plaintiff at issue had no opportunity for any harmful exposure to asbestos while working at a Celanese facility because of the nature of plaintiffs occupation and particular working

environment, and he will also testify that Celanese's approach to the handling and control of any asbestos-containing materials on its premises were reasonable in light of available information and industrial hygiene practices at different points of time. He may also testify as to any matter raised by experts called by plaintiff or any co-defendants in this action.

3. James D. Crapo, M.D., National Jewish Medical and Research Center, 1400 Jackson Street, Denver, Colorado 80206.

Dr. Crapo received a Bachelor of Science degree from Brigham Young University in 1967 and his medical degree from the University of Rochester New York in 1971. He taught medicine for many years at Duke University in Durham, North Carolina. Dr. Crapo is board certified in internal medicine with a subspecialty certification in pulmonary disease. He presently practices medicine at the National Jewish Medical Center in Denver, Colorado and teaches today at the University of Colorado Health Science Center. Dr. Crapo is a fellow of the American Thoracic Society, the American College of Chest Physicians and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided. Dr. Crapo may testify live or by deposition at trial in this matter.

Dr. Crapo is expected to testify about the pulmonary aspects of asbestos exposure, including matters such as dose response, pathogenicity, carcinogenicity and the potential for asbestos-related disease as a result of exposure to the different types of fiber. Dr. Crapo is also expected to testify as to general medical issues and physiology.

Dr. Crapo's testimony is based in part on the personal knowledge of relevant facts, but he also possesses general expertise in his field based upon specialized knowledge, skills and training. Dr. Crapo is expected to testify about alleged occupational exposure - as described by plaintiff and plaintiff's witnesses - and whether such exposure occurred for a sufficient period of time and in a sufficient dose to be of medical consequence, and whether such exposure could be considered a substantial contributing factor to plaintiff's alleged disease. In connection with this, based on his own experience and a review of the medical, scientific and/or technical literature and the opinions and conclusions contained in that literature, Dr. Crapo will provide historical state-of-the-art testimony on the gradual development of knowledge within the medical profession of the asbestos related illnesses. Dr. Crapo may provide testimony regarding the reasonableness of Celanese's usage and control of asbestos at its premises from a medical standpoint based on the developing state of medical knowledge concerning asbestos overtime.

Dr. Crapo is expected to testify about the principles of epidemiology and what is involved in an epidemiologic study. He is expected to testify that studies of particular groups or occupations of people are not necessarily applicable to other groups or occupations. Dr. Crapo is expected to testify as to the information necessary to determine whether a group of people or persons are at risk for contracting an asbestos-related disease and if it is scientifically possible to attribute a disease to a particular exposure. Dr. Crapo is expected to discuss epidemiological analysis of asbestos-related disease in the context of given levels of exposure, and to discuss how such analysis may be applied

to the evidence regarding the plaintiff in this case.

Finally, Dr. Crapo may testify regarding plaintiffs medical condition, cigarette smoking and lung disease, and generally about the pulmonary system and its functions as well as conditions and diseases of the pulmonary system. Dr. Crapo may also testify regarding the diagnosis and prognosis of asbestos-related markers and diseases, and the risks associated with developing cancers. Dr. Crapo may also testify about any matter raised by experts called by plaintiff or any co-defendant, to include but not limited to plaintiffs medical condition, the state of medical knowledge concerning asbestos, asbestos-related disease and other occupational diseases.

4. Dorsett D. Smith, M.D., 431 0 Colby Avenue, Suite 201, Everett, Washington 98203.

Dr. Smith received his Bachelor of Arts degree from Colgate University in 1959 and his medical degree from the University of Pennsylvania Medical School in 1963. Dr. Smith is board certified in internal medicine with a subspecialty certification in pulmonary disease. Dr. Smith has taught medicine at Johns Hopkins Hospital and the University of Washington Hospital for many years through the present. Dr. Smith is a NIOSH certified "B" reader and is fellow of the American Thoracic Society, the American College of Chest Physicians, the American College of Occupational and Environmental Medicine and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided.

Dr. Smith will testify about the pathology of asbestos-related diseases, his research into asbestos-related diseases, the carcinogenicity of various asbestos fiber types, the potential for asbestos-related disease as a result of exposures to the different types of fibers and the relationship, if any, between asbestos and various illnesses. Dr. Smith will also testify regarding the general pulmonary aspects of asbestos exposure, include matters such as dose response, latency and the required fiber burden associated with asbestos-related illnesses. Dr. Smith is expected to testify about alleged occupational exposure - as described by plaintiff and plaintiffs witnesses - and whether, based on his own experience and his review of the medical, scientific and/or technical literature and the opinions and conclusions contained in that literature, whether any exposure at a facility owned or operated by Celanese could be considered a substantial contributing factor to plaintiffs alleged disease.

Dr. Smith has personal knowledge of certain relevant facts but also possesses general expertise in his field based upon specialized knowledge, skills and training. Based upon his own experience and his review of the medical, scientific and/or technical literature and the opinions and conclusions contained in that literature, Dr. Smith will provide historical state-of-the-art testimony on the gradual development of knowledge within the medical profession about the various diseases associated with asbestos and about the asbestos exposure levels thought to be associated with each disease. Dr. Smith will testify regarding the reasonableness of Celanese's historical usage and control of asbestos in its workplace from a medical standpoint based on the information available in the general medical literature and on the types of preventative measures considered by the general medical community as appropriate in the different decades from 1900 through the present.

Dr. Smith is expected to testify about the principles of epidemiology and what is involved in an epidemiologic study. He is expected to testify that studies of particular groups or occupations of people are not necessarily applicable to other groups or occupations. Dr. Smith is expected to testify as to the information necessary to determine whether a group of people are at risk of contracting a particular asbestos-related disease, and whether it is scientifically possible to attribute a disease to a particular exposure. Dr. Smith is expected to discuss epidemiological analysis of asbestos and how such analysis may be applied to the evidence in this case and to the plaintiff.

Dr. Smith may testify regarding plaintiffs medical condition, cigarette smoking and lung disease, and generally about the pulmonary system and its functions as well as the diagnosis and prognosis of asbestos-related markers and diseases, and the risks associated with developing cancers. Dr. Smith is also expected to testify about any matter raised by experts called by plaintiff or any co-defendant, including but not limited to plaintiff's medical condition, the state of medical knowledge concerning asbestos, asbestos-related disease and other occupational diseases.

5. Mark R. Stenzel, CIH, P.O. Box 850235, Richardson, Texas 75085-0235.

Mr. Stenze' a practicing certified industrial hygienist. He holds a Bachelor of Science degree in mathematics and chemistry and a Master of Science degree in physical chemistry, which he received from the University of Illinois in 1975. In 1973, Mr. Stenzel was hired by Celanese Chemical Company and worked as a lab chemist/health chemist at its Pampa plant, where he performed industrial hygienist duties to include air monitoring. He became a certified industrial hygienist for Celanese. In that capacity, he had direct contact with each plant in the company and was the hygiene personnel at the plant, company and corporate levels. In 1983, Mr. Stenzel became Manager of Industrial Hygiene for Celanese and held that position through 1992. Since 1992, he has been otherwise employed in industry as an industrial hygienist. Mr. Stenzel is a member of the AIHA, the American Academy of Industrial Hygienists and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided. Mr. Stenzel may testify at trial live or by deposition.

Most of Mr. Stenzel's testimony will be factual in nature and will address the development of Celanese's industrial hygiene and environmental, safety and health programs from their inception through the 1980s. However, this disclosure is made in an abundance of caution because Mr. Stenzel also possesses general expertise in his field based upon specialized knowledge, skills and training, and some areas of his testimony may be informed by professional judgment and opinion. Mr. Stenzel will address the nature and structure of Celanese's industrial hygiene programs and the industrial hygiene and occupational safety practices adopted at Celanese facilities over time. From a review of company documents and other materials, Mr. Stenzel will testify about air monitoring for asbestos exposure and other workplace substances conducted at Celanese plants and the low exposures/low risk levels indicated by the available monitoring data.

From 1977 forward, Mr. Stenzel was intimately involved in the creation and design of Celanese's Health Monitoring System, to include its worker tracking module, health monitoring

module and retrospective exposure assessment module. Mr. Stenzel piloted the worker tracking module, health monitoring module and retrospective exposure assessment module. Mr. Stenzel piloted the worker tracking module at the Pampa plant and helped implement all modules at other Celanese facilities between 1978 - 1981. Mr. Stenzel will testify that the system was state-of-the-art at the time and would be considered state-of-the-art today.

Based on a review of plant and company documents, Mr. Stenzel will testify about how each module system was implemented throughout the company and at each company plant. Mr. Stenzel will provide testimony regarding the correlation of worker tracking exposure data and retrospective exposure data with the alleged exposure claimed by plaintiff. Based on his assessment of these materials, Mr. Stenzel is expected to testify about alleged occupational exposure - as described by plaintiff and plaintiffs witnesses - and the potential risk for developing an occupational disease associated with that exposure. Finally, Mr. Stenzel may provide testimony regarding mortality studies and similar disease assessments which involved the workforce employed at Celanese's plants. The nature of those studies are referenced in his curriculum vitae, a copy of which has previously been provided.

6. Ernest M. Dixon, M.D., Sc.D., 6305 Evermay Drive, McLean, Virginia 22101.

Dr. Dixon received his medical degree from the University of Virginia in 1948 and a doctorate in occupational health from the University of Cincinnati in 1957. Dr. Dixon has held various occupational health positions in industry and served as Celanese's corporate medical director from 1966 - 1981. A curriculum vitae is available upon request. Dr. Dixon may testify at trial in this case live or by deposition.

Dr. Dixon's anticipated testimony in this matter is expected to be factual in nature and will address the development of Celanese's occupational health, industrial hygiene and environmental program from their inception through the 1980s. Dr. Dixon will provide testimony regarding the nature and structure of those programs and, from his own experience and observations, the occupational health and safety practices adopted at Celanese's facilities over time. Dr. Dixon will testify that Celanese's plants over time were extremely clean, well maintained and safe premises; that Celanese's occupational health and safety programs were well developed and advanced for their time; that the potential for asbestos exposure at each plant over time was extremely low; and that no worker present at any Celanese plant was considered to be at risk of incurring any asbestos-related illness based on the information reasonably available to the occupational health community during his period of responsibility.

Dr. Dixon's testimony will be factual in nature based on personal knowledge in relevant areas. However, Dr. Dixon also possesses general expertise in the fields of medicine and occupational health based on specialized knowledge, skills and training. This disclosure is made in an abundance of caution because certain aspects of Dr. Dixon's anticipated testimony may be said to involve the exercise of professional judgment and/or the expression of professional opinion.

7. Mr. Charles S. Laubly, 2225 North Tucson Boulevard, Tucson, Arizona 85716.

Mr. Laubly received a Bachelor of Science degree from Georgia Tech in 1949. Mr. Laubly worked as field industrial hygienist thereafter and was employed as a corporate industrial hygienist by Celanese between 1967 - 1979. A curriculum vitae is available upon request. Mr. Laubly may testify at trial in this case live or by deposition. Mr. Laubly's anticipated testimony in this matter is expected to be factual in nature and will address the development of Celanese's industrial hygiene and environmental programs from their inception through the 1980s. Mr. Laubly will provide testimony regarding the nature and structure of those programs and, from his own experience and observations, the industrial hygiene and safety practices adopted at Celanese's facilities over time. Mr. Laubly will testify that Celanese's plants over time were extremely clean, well maintained and safe premises; that Celanese's industrial hygiene and safety programs were well developed and advanced for their times; that the usage of asbestos at Celanese's facilities were relatively minor and that the potential for asbestos exposure at each plant over time was extremely low; and that no worker present at any Celanese plant was considered to be at risk of incurring any asbestos-related illness based on the information reasonably available to the occupational health community during his period of responsibility.

Mr. Laubly's testimony will be factual in nature based on personal knowledge in relevant areas. However, Mr. Laubly also possesses general expertise in the field of industrial hygiene based on education, training and experience. This disclosure is made in an abundance of caution because certain aspects of Mr. Laubly's anticipated testimony may be said to involve the exercise of professional judgment and/or the expression of professional opinion.

8. Herbert J. Kolodner, Ph.D., P.E., 777 Pebble Beach Drive, Crescent City, California 95331-3634.

Dr. Kolodner received a Masters degree in safety from the University of Maryland in 1960 and a doctorate in industrial safety from New York University in 1973. Dr. Kolodner has held various safety positions in industry and served as Celanese's corporate safety director from 1970 - 1984. A curriculum vitae is available upon request. Dr. Kolodner may testify at trial in this case live or by deposition.

Dr. Kolodner's anticipated testimony in this matter is expected to be factual in nature and will address the development of Celanese's occupational safety and environmental programs from their inception through the 1980s. Dr. Kolodner will provide testimony regarding the nature and structure of those programs and, from his own experience and observations, the safety practices adopted at Celanese's facilities over time. Dr. Kolodner will testify that Celanese's plants over time were extremely clean, well maintained and safe premises; that Celanese's safety programs were well developed and advanced for their times; that the usage of asbestos at Celanese's facilities were relatively minor and the potential for asbestos exposure at each plant over time was extremely low.

Dr. Kolodner's testimony will be factual in nature based on personal knowledge in relevant

areas. However, Dr. Kolodner also possesses general expertise in the field of industrial hygiene based on education, training and experience. This disclosure is made in an abundance of caution because certain aspects of Dr. Kolodner's anticipated testimony may be said to involve the exercise of professional judgment and/or the expression of professional opinion.

9. William L. Dyson, PhD, C.I.H.; Workplace Hygiene, LLC; 1022 Jefferson Road; Greensboro, North Carolina 27140

Dr. Dyson is a certified industrial hygienist. He received a bachelor of science degree from North Carolina State University in 1973, a master's degree in environmental health engineering from Northwestern University in 1971, and received his doctorate in environmental health engineering from Northwestern University in 1975. From 1967 through 1969, Dr. Dyson worked as a field industrial hygiene engineer for the U.S. Public Health Service providing industrial hygiene services to the public. From 1973 through 1982, Dr. Dyson worked extensively as a practicing industrial hygienist in American industry. Dr. Dyson has worked as a self-employed industrial hygiene consultant from that time through the present. Dr. Dyson is a fellow of the AIHA, a member of the American Academy of Industrial Hygiene, a diplomat of the American Board of Industrial Hygiene, a member of the American Society of Safety Engineers and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided.

Dr. Dyson will provide testimony regarding the history of industrial hygiene, industrial hygiene methods, exposure levels which trigger diseases associated with dust exposure, good housekeeping measures, and other related matters. He is prepared to testify about respirator history, what constitutes good hygiene practices, and the period of time from an industrial hygiene standpoint when people and companies became aware of associated health risks. Dr. Dyson may give testimony regarding the level of fiber release, if any, from asbestos-containing products in the occupational setting and may testify regarding the availability of materials as substitutes for asbestos-containing products. He may testify as to issues involving re-entrainment and fiber drift. Dr. Dyson may also testify regarding work practices applicable to various types of occupations using products that contain asbestos, and he will provide a retrospective assessment or estimate of plaintiff's likely exposure to asbestos in a Celanese work environment based on historical literature and the facts available in this case.

Dr. Dyson has personal knowledge of relevant facts but he also possesses generalized expertise in his field based on his specialized knowledge, skills and training. He may provide testimony regarding the applicability of the ACGIH, OSHA and EPA guidelines as they relate to occupational exposures to various types of asbestos-containing products. Dr. Dyson may testify regarding the size, construction, layout and working environment of facilities such as where plaintiff worked. He may testify about the nature of the working environment in such locations. He may testify about his knowledge of the composition and asbestos content, if any, of products present in the plaintiff's workplace and may testify concerning the ability of such products to emit asbestos fibers under certain conditions. Dr. Dyson may testify to the dust levels produced by particular occupational operations and products, to include those associated with the use of pipe and block

medical community as appropriate in the different decades from 1900 through the present.

Dr. Hughson is expected to testify about the principles of epidemiology and what is involved in an epidemiologic study. He is expected to testify that studies of particular groups or occupations of people are not necessarily applicable to other groups of occupations. Dr. Hughson is expected to testify as to the information necessary to determine whether a group of people or persons are at risk for contracting an asbestos-related disease, and whether it is scientifically possible to attribute a disease to a particular exposure. Dr. Hughson is expected to discuss epidemiological analysis of asbestos and how such analysis may be applied to the evidence in this case and to the plaintiff.

Dr. Hughson may testify regarding plaintiff's medical condition, cigarette smoking and lung disease, and generally about the pulmonary system and its functions as well as conditions and diseases of the pulmonary system. Dr. Hughson may testify regarding the diagnosis and prognosis of asbestos-related markets and diseases, and the risks associated with developing cancers. Dr. Hughson is also expected to testify about any matter raised by experts called by plaintiff or any co-defendant, including but not limited to plaintiff's medical condition, the state of medical knowledge concerning asbestos, asbestos-related disease and other occupations diseases.

11. Peter J. Barrett, M.D.; 300 Boylston Street, Suite 714; Boston, Massachusetts 02116-3923

Dr. Barrett received his bachelor of arts degree from the College of the Holy Cross in 1964 and his medical degree from Tufts University School of Medicine in 1968. Dr. Barrett is board certified in diagnostic radiology and nuclear medicine. Dr. Barrett has taught radiology at Harvard University and at other institutions over the years. He is a NIOSH certified "B" reader and is a fellow of the American Thoracic Society, the American College of Chest Physicians, the American College of Radiology and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided.

Dr. Barrett is expected to testify generally about radiologic concepts and evaluation and their relation to the diagnosis of pulmonary diseases. He will testify specifically regarding his evaluation of x-rays and CT scans in the diagnosis of occupational pneumoconiosis. It is anticipated that Dr. Barrett will testify generally as to his interpretation and the plaintiff's chest images, the presence or absence of any asbestos-related condition as evidenced by those films, and the presence of other abnormalities or conditions unrelated to any exposure to asbestos. In addition, Dr. Barrett is expected to testify generally about the pulmonary affects of asbestos exposure including matters such as dose response, pathogenicity, carcinogenicity and the potential for asbestos-related disease as a result of exposure to the different types of fibers. Dr. Barrett may testify regarding plaintiff's general medical condition, cigarette smoking history and lung disease, and generally about the pulmonary system and its functions as well as the diagnosis and prognosis of asbestos-related markers and diseases, and the risks associated with developing cancers. Dr. Barrett is also expected to testify about any matter raised by experts called by plaintiff or any co-defendants, including but not limited to plaintiff's medical condition, the state of medical knowledge concerning asbestos, asbestos-related disease and other occupational diseases. In that sense, his testimony may be dependent upon the prior testimony of other experts and cannot be specifically predicted. Dr. Barrett may testify live at trial or by deposition transcript.

12. Victor L. Roggli, M.D., Department of Pathology, Duke University Medical Center, Room M243, Orwin Road, Durham, North Carolina 27710.

Dr. Roggli received his bachelor of arts degree from Rice University in 1973 and his medical degree from Baylor College of Medicine in 1976. Dr. Roggli is a board certified pathologist. He has taught medicine at Duke University Medical Center for many years through the present. Dr. Roggli is a member of the International Association of Pathologists, the College of American Pathologists, the American College of Chest Physicians, the American Thoracic Society, the American Board of Forensic Examiners, the United States/Canadian Mesothelioma Panel and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided.

Dr. Roggli is expected to provide testimony concerning the anatomic structure and functioning of the lung from a pathologic perspective, the defense mechanisms and functioning of the lung in health and otherwise, the responses of the lung to various stimuli, and the role of various components of the respiratory system and the proper functioning of the lung. Dr. Roggli is expected to describe and distinguish various types of asbestos fibers, to describe the things which affect the ability of asbestos fibers to impact various structures within the respiratory system, and to describe the body's specific responses to fibers of asbestos that are inhaled, whether or not they are retained.

Dr. Roggli will also define and distinguish various conditions, such as asbestosis, pleural changes and other non-malignant changes that may be attributable in some persons due to long-term inhalation and retention of some forms of asbestos fiber. Dr. Roggli is further expected to testify concerning the circumstances under which exposure to certain forms and types of asbestos may be associated with the incidence of various malignancies in some persons, and will testify concerning the results of his own experience, the medical and scientific literature, and existing epidemiologic studies concerning associations that are alleged to exist epidemiologically between exposure to asbestos in some populations and the mortality and/or incidents of various forms of cancer. Dr. Roggli is also expected to offer testimony concerning the effects of inhaled tobacco smoke and other environmental stressors on the occurrence of disease in populations who are also alleged to be exposed to asbestos-containing products, and how the effects of inhaled tobacco smoke and other environmental factors can affect the results of certain epidemiologic studies.

Dr. Roggli is also expected to testify that it cannot be said, to a reasonable degree of medical probability, that any hypothetical person's alleged "exposure" to products that may have contained asbestos was of importance to that individual without reference to that specific person's individual work history; medical history; findings on physical examination and pathologic examination of tissue, if any; information concerning the individual's use of protective equipment; specific types of asbestos-containing products used and/or handled; resolution of questions regarding exposures to substances other than asbestos-containing products; and other known etiologies for whatever conditions are found to exist.

Dr. Roggli may testify as to the general aspects of the diagnosis and treatment of asbestos-related disease and the pathological effect of asbestos on the lungs. In that regard, Dr.

Roggli may testify as to his findings and diagnosis after examination and analysis of tissue, slides or other pathologic materials, medical records, reports, chest images and plaintiff's work history. He may give testimony concerning his review of any report purported to be diagnostic of any oncological condition and the methods of and procedures for conducting fiber counts. He may give testimony regarding malignancies associated with asbestos exposure or cigarette abuse and other malignancies from which they must be differentiated, the appropriate protocols for diagnosis of those conditions, prognosis and information relating to the known causes of those malignancies. He may testify concerning medical and scientific literature relevant to any malignancy purported to be asbestos-related and any other malignancy from which it must be distinguished, including data relevant to contentions of increased risk of asbestos-related disease or cancer, prognosis, the relevant standards of care and considerations relating to medical monitoring. His testimony may include discussion of any relevant epidemiology, anatomy and physiology.

Finally, it is expected that Dr. Roggli's testimony will generally respond to the pathologic, scientific and epidemiologic testimony which may be offered by plaintiff's experts, and in that sense his testimony is dependent upon the prior testimony of such experts and cannot be specifically predicted. Dr. Roggli may testify live at trial or by deposition transcript.

13. John E. Craighead, M.D., Department of Pathology, University of Vermont, Burlington, Vermont 05405

Dr. Craighead received his bachelor of science degree from the University of Utah in 1952 and his medical degree from the same institution in 1956. Dr. Craighead is board certified in anatomic pathology and clinical pathology. He has taught medicine at the University of Vermont College of Medicine for many years through the present. Dr. Craighead is a member of the International Academy of Pathology, the American Thoracic Society, the Academy of Pathology, the American Association for Cancer Research and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided.

Dr. Craighead is expected to provide testimony concerning the anatomic structure and functioning of the lung from a pathologic perspective, the defense mechanisms and functioning of the lung in health and otherwise, the responses of the lung to various stimuli, and the role of various components of the respiratory system and the proper functioning of the lung. Dr. Craighead is expected to describe and distinguish various types of asbestos fibers, to describe the things which affect the ability of asbestos fibers to impact various structures within the respiratory system, and to describe the body's specific responses to fibers of asbestos that are inhaled, whether or not they are retained.

Dr. Craighead will also define and distinguish various conditions, such as asbestosis, pleural changes and other non-malignant changes that may be attributable in some persons due to long-term inhalation and retention of some forms of asbestos fiber. Dr. Craighead is further expected to testify concerning the circumstances under which exposure to certain forms and types of asbestos may be associated with the incidence of various malignancies in some persons, and will testify concerning

the results of his own experience, the medical and scientific literature, and existing epidemiologic studies concerning associations that are alleged to exist epidemiologically between exposure to asbestos in some populations and the mortality and/or incidents of various forms of cancer. Dr. Craighead is also expected to offer testimony concerning the effects of inhaled tobacco smoke and other environmental stressors on the occurrence of disease in populations who are also alleged to be exposed to asbestos-containing products, and how the effects of inhaled tobacco smoke and other environmental factors can affect the results of certain epidemiologic studies.

Dr. Craighead is also expected to testify that it cannot be said, to a reasonable degree of medical probability, that any hypothetical person's alleged "exposure" to products that may have contained asbestos was of importance to that individual without reference to that specific person's individual work history; medical history; findings on physical examination and pathologic examination of tissue, if any; information concerning the individual's use of protective equipment; specific types of asbestos-containing products used and/or handled; resolution of questions regarding exposures to substances other than asbestos-containing products; and other known etiologies for whatever conditions are found to exist.

Dr. Craighead may testify as to the general aspects of the diagnosis and treatment of asbestos-related disease and the pathological effect of asbestos on the lungs. In that regard, Dr. Craighead may testify as to his findings and diagnosis after examination and analysis of tissue, slides or other pathologic materials, medical records, reports, chest images and plaintiff's work history. He may give testimony concerning his review of any report purported to be diagnostic of any oncological condition and the methods of and procedures for conducting fiber counts. He may give testimony regarding malignancies associated with asbestos exposure or cigarette abuse and other malignancies from which they must be differentiated, the appropriate protocols for diagnosis of those conditions, prognosis and information relating to the known causes of those malignancies. He may testify concerning medical and scientific literature relevant to any malignancy purported to be asbestos-related and any other malignancy from which it must be distinguished, including data relevant to contentions of increased risk of asbestos-related disease or cancer, prognosis, the relevant standards of care and considerations relating to medical monitoring. His testimony may include discussion of any relevant epidemiology, anatomy and physiology.

Finally, it is expected that Dr. Craighead's testimony will generally respond to the pathologic, scientific and epidemiologic testimony which may be offered by plaintiff's experts, and in that sense his testimony is dependent upon the prior testimony of such experts and cannot be specifically predicted. Dr. Craighead may testify live at trial or by deposition transcript.

14. Russell A. Harley, Jr., M.D., Medical College of South Carolina, Department of Pathology & Laboratory Medicine, 171 Ashley Avenue, Charleston, South Carolina 29425-5836

Dr. Harley received his bachelor of arts degree from Newberry College in 1960 and his medical degree from the Medical College of South Carolina in 1965. Dr. Harley is board certified in pathology. Dr. Harley has taught medicine at the Medical College of South Carolina for many

years through the present. Dr. Harley is a fellow of the College of American Pathologists, the American College of Chest Physicians, the American Thoracic Society and other professional organizations reflected on his curriculum vitae, a copy of which has previously been provided.

Dr. Harley is expected to provide testimony concerning the anatomic structure and functioning of the lung from a pathologic perspective, the defense mechanisms and functioning of the lung in health and otherwise, the responses of the lung to various stimuli, and the role of various components of the respiratory system and the proper functioning of the lung. Dr. Harley is expected to describe and distinguish various types of asbestos fibers, to describe the things which affect the ability of asbestos fibers to impact various structures within the respiratory system, and to describe the body's specific responses to fibers of asbestos that are inhaled, whether or not they are retained.

Dr. Harley will also define and distinguish various conditions, such as asbestosis, pleural changes and other non-malignant changes that may be attributable in some persons due to long-term inhalation and retention of some forms of asbestos fiber. Dr. Harley is further expected to testify concerning the circumstances under which exposure to certain forms and types of asbestos may be associated with the incidence of various malignancies in some persons, and will testify concerning the results of his own experience, the medical and scientific literature, and existing epidemiologic studies concerning associations that are alleged to exist epidemiologically between exposure to asbestos in some populations and the mortality and/or incidents of various forms of cancer. Dr. Harley is also expected to offer testimony concerning the effects of inhaled tobacco smoke and other environmental stressors on the occurrence of disease in populations who are also alleged to be exposed to asbestos-containing products, and how the effects of inhaled tobacco smoke and other environmental factors can affect the results of certain epidemiologic studies.

Dr. Harley is also expected to testify that it cannot be said, to a reasonable degree of medical probability, that any hypothetical person's alleged "exposure" to products that may have contained asbestos was of importance to that individual without reference to that specific person's individual work history; medical history; findings on physical examination and pathologic examination of tissue, if any; information concerning the individual's use of protective equipment; specific types of asbestos-containing products used and/or handled; resolution of questions regarding exposures to substances other than asbestos-containing products; and other known etiologies for whatever conditions are found to exist.

Dr. Harley may testify as to the general aspects of the diagnosis and treatment of asbestos-related disease and the pathological effect of asbestos on the lungs. In that regard, Dr. Harley may testify as to his findings and diagnosis after examination and analysis of tissue, slides or other pathologic materials, medical records, reports, chest images and plaintiff's work history. He may give testimony concerning his review of any report purported to be diagnostic of any oncological condition and the methods of and procedures for conducting fiber counts. He may give testimony regarding malignancies associated with asbestos exposure or cigarette abuse and other malignancies from which they must be differentiated, the appropriate protocols for diagnosis of those conditions, prognosis and information relating to the known causes of those malignancies. He may testify concerning medical and scientific literature relevant to any malignancy purported to be

asbestos-related and any other malignancy from which it must be distinguished, including data relevant to contentions of increased risk of asbestos-related disease or cancer, prognosis, the relevant standards of care and considerations relating to medical monitoring. His testimony may include discussion of any relevant epidemiology, anatomy and physiology.

Finally, it is expected that Dr. Harley's testimony will generally respond to the pathologic, scientific and epidemiologic testimony which may be offered by plaintiff's experts, and in that sense his testimony is dependent upon the prior testimony of such experts and cannot be specifically predicted. Dr. Harley may testify live at trial or by deposition transcript.

Additional copies of the referenced curriculum vitae will be provided upon request.

Defendants' Medical Experts will or have been provided with the records referenced in subpart (k) of its responses to requests for disclosures as well as any x-rays or pathology of plaintiff's decedent.

15. Subject to the right to object to and contest qualifications and admissibility as provided in the Texas Rules of Evidence 702 through 705 and the law of this state, Defendants reserve the right to cross-designate those expert witnesses designated by plaintiff to testify against Defendants.

16. Subject to the right to object to and contest qualifications and admissibility as provided in the Texas Rules of Evidence 702 through 705 and the law of this state, Defendants designate the following treating physicians of plaintiff:

- (a) Dr. Gerald A. Reeves
1533 South Brownlee
Corpus Christi, Texas
- (b) Dr. John M. Hogan
Third Street
Corpus Christi, Texas
- (c) Dr. Joseph Wright
3302 S. Alameda Street
Corpus Christi, Texas
- (d) Dr. Lynne Taylor
VA Medical Center
Kerrville, Texas

- (e) Dr. Thomas Kessler
Mobile Diagnostic Center,
6701 Airport Blvd.
Mobile, AL
- (f) Drs. Gary Rich and George Massing
1 Mobile Infirmary Circle
Mobile, AL
- (g) Dr. William R. Kleinschrodt
Suite A101–6701 Airport Blvd.
Mobile, AL
- (h) Drs. William Crooner, Billy Mosley, and Charles Rutherford
6701 Airport Blvd.
Mobile, AL
- (i) Dr. L. Craig Miller
Suite 1-C
4511 North Davis Highway
Pensacola, FL
- (j) Dr. Gaeton D. Lorino
6701 Airport Blvd.; Suite A-101
Mobile, AL
- (k) Dr. Joseph D. Calhoun
#1 Saint Vincent Circle, Suite 160
Little Rock, Arkansas

The above-listed treating physicians are anticipated to testify regarding plaintiffs medical history, treatment, diagnosis and prognosis based upon their treatment of him, and they may testify live at trial or by deposition.

17. All witnesses listed by all defendants. Any physician who has examined and/or treated plaintiff. Any and all records custodians, live or by deposition upon written questions, for any physicians or institutions listed herein or revealed in plaintiffs' answers to interrogatories or any other pleading on file in this case.

Defendants reserve the right to amend or supplement this disclosure pursuant to Rule 193.5 of the Texas Rules of Civil Procedure, Defendants further reserve the right to call undesignated expert witnesses in rebuttal, whose identities and testimony cannot reasonably be foreseen until plaintiffs

named experts provide written reports in this case and/or have presented testimony and evidence at trial.

(g) any discoverable indemnity and insuring agreements;

Response: Celanese is investigating to determine whether any such agreements exist. Celanese reserves the right to supplement.

(h) any discoverable settlement agreements;

Response: None.

(i) any discoverable witness statements;

Response: None.

(j) in a suit alleging physical or mental injury and damages from the occurrence that is the subject of the case, all medical records and bills that are reasonably related to the injuries or damages asserted or, in lieu thereof, an authorization permitting the disclosure of such medical records and bills;

Response: At this time, Celanese is not in possession of any medical or billing records relating to any physical or mental injury and damages alleged by Plaintiff.

(k) in a suit alleging physical or mental injury and damages from the occurrence that is the subject of the case, all medical records and bills obtained by the responding party by virtue of an authorization furnished by the requesting party;

Response: None at this time. Celanese will supplement if necessary.

Respectfully submitted,



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Attorneys for Defendants,
Hoechst Celanese Corporation,
and Celanese Ltd.

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of Celanese's First Supplemental Response to Plaintiff's Requests for Disclosure has been forwarded to the following counsel of record by certified mail, return receipt requested on this 26th day of December, 2000:

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