Brent Morgan, MD

* Name / Occupation
* Current Titles & Affiliations
	+ Associate Medical Director – Georgia Poison Center
	+ Associate Professor – Emergency Medicine – Emory
	+ Director - Medical Toxicology Residency – Emory & CDC
	+ Director – Georgia Occupational & Environmental Toxicology Clinic – Grady
	+ Attending Physician – Grady and Emory
	+ Guest Researcher – CDC
	+ Medical Toxicology Consultant – CHOA
* What is Toxicology
	+ Would ETOH and its effects on the body be contained within the field of toxicology
* Education
	+ B.S. - Baldwin-Wallace College (1987)
	+ M.D. – Ohio State University (1991)
* Post-Graduate Training
	+ Emergency Medicine Residence – Cleveland, OH (1991-94)
	+ Medical Toxicology Fellowship – CMC (1994-96)
* Licensure & board Certification
	+ State Medical Board – Ohio (1992-94)
	+ North Carolina (1994-96)
	+ Georgia (1996-Current)
* Committee Memberships
	+ National
		- American College of Emergency Physicians – Toxicology Section
			* Chair (2006-08)
			* Chair Elect (2005)
			* Secretary (2001-2003)
			* Editor Toxicology Newsletter (2001-2003)
		- Advanced Hazmat Life Support (SE US Director) (2000-current)
	+ Regional
		- Georgia College of ER Physicians
			* Board of Directors (2000-2006)
		- Other regional affiliations
* Editorships & Editorial Boards
	+ AAEM Toxicology Handbook
		- Associate Editor (2011)
		- Associate Editor (2006)
* Manuscript Reviewer
* Honors and Awards
* Society memberships
	+ American College of Medical Toxicology
	+ American Academy of Clinical Toxicology
	+ American College of Emergency Physicians
	+ Georgia College of Emergency Physicians
* Participation in National/International Conferences
	+ Course director for many over the years
* Continuing Education
	+ Participate and teach
* Published Works
	+ Scholarly Journals
	+ Textbooks
* Teaching Experience
	+ Discuss experience
* During career, studied and familiar with ETOH and physiological effects on body
* Previously Testified
	+ Previously been declared an expert
	+ How many times (2)

**TENDER AS EXPERT: TOXICOLOGY AND EMERGENCY MEDICINE.**

* What is ETOH (alcohol)
* In general, how does alcohol consumption affect the body physically
* In general, how can alcohol affect the brain
* Increased alcohol, increased effects
* How is alcohol processed through the body
* Why does a person feel intoxicated
* How is the level of alcohol measured by professionals
	+ Blood
	+ Breathalyzer
* In clinical setting, blood
* What does the amount of alcohol in the blood tell us
* How quickly does our body process alcohol
	+ metabolize
* Describe the different levels of intoxication and their effects on the body
	+ Ambulation - explain
	+ Decreased reflexes - explain
	+ Decreased muscle tone – explain
	+ Vomiting
		- Vomiting doesn’t decrease level of ETOH already in blood. Only expels alcohol in stomach not yet absorbed
	+ Others
* Intoxication effects “going up” vs “going down”
	+ More intoxicated on the way up, even measuring same BAC
* On the brain
	+ Slurred speech
	+ Spinning
	+ Affects consciousness
		- At high levels – not just sleepy
	+ on a person’s ability to make judgments
		- Explain what alcohol does to areas of the brain at high levels
* Factors that might affect intoxication
	+ Size of person
	+ Food in stomach
		- How
		- Lack of meat / fat
		- Carbs – don’t do much to stop absorbtion
	+ Heavy drinker vs. non-heavy drinker
	+ Type of alcohol
		- Proof
	+ Other
* What is considered a “high” level of alcohol
	+ Do different people experience levels differently
	+ Can same person experience same level differently at different times

**Victim’s Records**

* Retained by DA office to review materials
* Purpose of review
	+ Expert opinion on victim’s capacity to consent and level of intoxication at time of alleged assault
* Received the following materials:
	+ Medical Records for Victim from Piedmont Hospital (4/6/2013)
	+ Reports from GBI, including toxicology reports
	+ Police reports from Atlanta Police Department
	+ Text messages from Victim and Defendant
	+ Video Surveillance from Taco Mac restaurant
		- 3 relevant video clips
	+ Audiotaped interviews with
		- Victim and Witnesses
* Review of Medical Records:
	+ What did you look for in records
	+ Any medications Victim’s on affect analysis?
	+ Alcohol level
		- 3:28am – TIME OF DRAW
	+ Level at 3:28am
		- 88 mg/dL
	+ What level of intoxication is that
		- Can’t drive car
* From review of other materials, this draw is 6+ hours later
* Determination of alcohol level at time of sexual contact
	+ Explain calculations
		- How come up with this
	+ Explain factors that affect calculation
		- Knowledge about victim’s food consumption that day
		- Quicker onset of intoxication
* What is estimated level at time of sexual contact
	+ **over 200 mg/dL**
	+ **Coma begins to set in at this level for casual drinkers**
* Weight of Victim: 116 lbs from medical records
* 6 drinks would get her to that level
	+ 200 mg/dL
* From Reports – what victim drank throughout day
	+ 4 drinks
	+ but last drink was extremely high proof – Bob Marley
		- researched, and to be made with 150 proof rum
* From Reports - what victim ate throughout day
	+ Carbs only
* What was reported consistent with BAC levels
* Explain physiological effects at this level:
	+ Inability to properly ambulate
	+ Slurred speech
	+ Intermittent consciousness
	+ Vomiting
	+ Decreased reflexes
	+ Decreased muscle tone
		- Feeling like couldn’t move
* Physiological effects would be apparent to other people
	+ Intermittent consciousness
	+ Slurred speech
	+ Problems walking
* Would not quickly regain sobriety
	+ How would alcohol have affected her as levels decreased
* Signs of mental status improving consistent with timeline provided by Ms. Bridges
* Explain effects on brain
	+ Decision making center of the brain
* Ability to consent to sexual intercourse
	+ - *OCGA §24-7-704: testimony in the form of an opinion or inference shall not be objectionable because it embraces an ultimate issue.*
* Observations from video clips
	+ Consistent with someone who had high alcohol level in system
* Witness accounts also consistent with medical findings

D said vt took pill

* But if took pill, wouldn’t snap out of it when got to McDonalds
* Pill effects would be around longer