

Transcript of Richard J. Shaw, M.D.
Conducted on March 15, 2022

<p>1 VIRGINIA: 2 IN THE CIRCUIT COURT FOR FAIRFAX COUNTY 3 4 ----- x 5 JOHN C. DEPP, II, : 6 Plaintiff, : Case No. 7 v. : CL-2019-0002911 8 AMBER LAURA HEARD, : 9 Defendant. : 10 ----- x 11 Videotaped Deposition of 12 RICHARD J. SHAW, M.D. 13 Conducted Remotely via Zoom 14 Tuesday, March 15, 2022 15 10:03 a.m. 16 17 18 19 20 Job No.: 438435 21 Pages: 1 - 136 22 Reported By: AMY L. STRYKER, CCR</p>	<p>1 A P P E A R A N C E S 2 3 ON BEHALF OF PLAINTIFF JOHN C. DEPP, II: 4 STEPHANIE CALNAN, ESQ. 5 BROWN RUDNICK LLP 6 One Financial Center 7 Boston, Massachusetts 02111 8 (617) 856-8200 9 and 10 ANDREW C. CRAWFORD, ESQ. 11 BROWN RUDNICK LLP 12 601 Thirteenth Street, NW 13 Suite 600 14 Washington, D.C. 20005 15 (202) 536-1785 16 17 18 19 20 21 22</p>
<p>1 Deposition of RICHARD J. SHAW, M.D., 2 conducted remotely. 3 4 5 Pursuant to notice, before AMY L. STRYKER, 6 Certified Court Reporter and Notary Public of the 7 State of Maryland. 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22</p>	<p>1 A P P E A R A N C E S C O N T I N U E D 2 3 ON BEHALF OF DEFENDANT AMBER LAURA HEARD: 4 ADAM NADELHAFT, ESQ. 5 CHARLSON BREDEHOFT COHEN BROWN 6 & NADELHAFT, P.C. 7 11260 Roger Bacon Drive 8 Suite 201 9 Reston, Virginia 20190 10 (703) 318-6800 11 12 ALSO PRESENT: 13 CHARLIE MCGRATH, AV Technician 14 ARMANDO FORTE, Videographer 15 16 17 18 19 20 21 22</p>

<p style="text-align: right;">21</p> <p>1 A I don't recall specifics, but there have 2 been some cases where individuals have been under 3 the influence of substances at the time an offense 4 was committed, and I have commented on the 5 potential relationship between their behavior and 6 the substance. 7 Q And did you talk to the individuals before 8 you gave your opinion as to the potential impact 9 of the drugs on the individuals? 10 A Yes. 11 Q And was this in a criminal matter? 12 A It was. 13 Q Have you ever offered testimony on the 14 risk factors associated with perpetrators of 15 intimate partner violence? 16 A No. 17 Q And could we -- I may refer to "intimate 18 partner violence" at other times. Can we agree 19 that we can call it IPV? You'll know what that 20 means? 21 A Yes. 22 MR. NADELHAFT: Could we put up</p>	<p style="text-align: right;">23</p> <p>1 A I did. 2 Q Okay. Could we turn to page 34. 3 And, Dr. Shaw, do you recognize this as 4 the first part of a disclosure of you? 5 A Yes. 6 Q Okay. And I'll represent that this 7 disclosure was served on February 10, 2022. Does 8 that sound right? 9 A Yes. 10 Q Okay. Do you know when you were retained 11 by Mr. Depp? 12 A It was at the very end of January or 13 beginning of February. 14 Q How were you retained? 15 A I was contacted by Ms. Calnan. 16 Q Had you ever worked with Ms. Calnan 17 before? 18 A No. 19 MS. CALNAN: And, Adam, sorry, I'm just 20 going to interrupt. I know both parties have 21 agreed that the substance of the communications 22 between our experts and counsel are privileged, so</p>
<p style="text-align: right;">22</p> <p>1 Attachment 2, please. 2 AV TECHNICIAN: All right. Stand by. 3 (Shaw 2, Plaintiff's Designation/ 4 Identification of Opposing Expert Witnesses, was 5 marked for identification and is attached to the 6 transcript.) 7 BY MR. NADELHAFT: 8 Q Dr. Shaw, I'm showing you what's been 9 marked as Shaw Exhibit 2. The first page is 10 Plaintiff's Designation/Identification of Opposing 11 Expert Witnesses. 12 Do you recognize this document? 13 A Yes. 14 Q And you understand that these -- this is 15 Mr. Depp's designation and identification of 16 opposing expert witnesses? 17 A Yes. 18 Q Did you read the entire document? 19 A Yes. 20 Q So you read about other experts that 21 Mr. Depp was designating in addition to yourself; 22 is that right?</p>	<p style="text-align: right;">24</p> <p>1 I just want to -- 2 Dr. Shaw, just keep that in mind, of 3 course, questions about when we talked or who you 4 talked with is fine, but just not the substance. 5 THE WITNESS: Thank you. 6 MR. NADELHAFT: Thanks. 7 BY MR. NADELHAFT: 8 Q Did you speak to Ms. Calnan over the 9 phone? 10 A Yes. 11 Q And how long after the initial 12 conversation were you retained? 13 A Two or three days, I believe. 14 Q And what did you understand your 15 assignment was? 16 A My assignment was to give an opinion about 17 the conduct and opinion offered by Dr. Spiegel in 18 this matter. 19 Q Did you know Dr. Spiegel at all before 20 this? 21 A No. 22 Q Did you speak to -- have you ever spoken</p>

<p style="text-align: right;">29</p> <p>1 MR. NADELHAFT: You have Attachment 2. So 2 just keep it ready. But could you put up 3 Attachment 9, please. 4 AV TECHNICIAN: All right. Stand by. 5 (Shaw 3, References, was marked for 6 identification and is attached to the transcript.) 7 AV TECHNICIAN: All right. That should be 8 it. 9 BY MR. NADELHAFT: 10 Q Dr. Shaw, I'm showing you what's been 11 marked as Shaw Exhibit 3. Do you recognize this 12 document? 13 A Yes. 14 Q What is this? 15 A It's a list of References that I referred 16 to in my designation. 17 Q Okay. And these documents that are on 18 pages 1 and 2 are articles and cases; is that 19 right? 20 A Yes. 21 Q And is this a totality of the documents 22 you reviewed in this matter?</p>	<p style="text-align: right;">31</p> <p>1 deposition testimony. 2 Q Do you know if that was disclosed in the 3 expert disclosures? 4 A I don't know. 5 Q Okay. What depositions did you review? 6 A Can I go through this list that I have? 7 Q Yeah, sure. 8 A So there was the videotaped deposition of 9 Mr. Depp, depositions of Dr. Kipper, Dr. Cowan, 10 Dr. Blaustein, Dr. Banks, Dr. Anderson, and Debbie 11 Lloyd, and Erin Falati. 12 Q And are those depo- -- did those 13 depositions -- are you relying on them at all as a 14 basis for your opinions in this matter? 15 A I'm -- certainly the records by 16 Dr. Blaustein and the other mental health 17 providers are material that I relied on to some 18 degree, yes. 19 Q How did you -- how are the medical records 20 that you reviewed for Dr. Blaustein -- how did you 21 rely on them for your opinions? 22 A His records were important to me because</p>
<p style="text-align: right;">30</p> <p>1 A I have reviewed some documents that 2 Dr. Spiegel referred to in his designation and 3 rebuttal. 4 Q Were those additional articles? 5 A Yes. 6 Q Do you recall what articles you reviewed? 7 A There was one that was referred to 8 yesterday by Dr. McLaughlin. 9 Q Anything else you recall? 10 A That's what I recall. 11 Q Okay. You did not review any depositions 12 in this matter, correct? 13 A I reviewed many depositions, but -- I have 14 a list of documents if you want me to go through 15 those. 16 Q So you did review -- you reviewed 17 depositions in this matter? 18 A I did, yes. 19 Q As part of your expert opinion? 20 A Yes. Well, not as part -- well, I don't 21 know if I'm using these as part of my opinion. My 22 opinion is fairly limited. But I did review</p>	<p style="text-align: right;">32</p> <p>1 Dr. Spiegel had referred to them in his 2 designation and had stated that he had relied upon 3 his records. And he'd also made the point in his 4 rebuttal that opinions can be expressed in a case 5 without specifically personally evaluating a 6 patient. And I thought it was important to 7 understand the quality and nature of the records 8 that Dr. Blaustein had kept since I -- since I do 9 think it is reasonable to render opinions about a 10 case based on review of medical records, if the 11 medical records are of good quality and rigorous 12 and meet the standard of care. 13 Q So are you going to be giving an expert 14 opinion as to the quality of the records of 15 Dr. Blaustein? 16 A My -- you know, my scope is to talk about 17 Dr. Spiegel's opinions and his methodology. So 18 insofar as these records were relied on by him, I 19 would be -- certainly would have opinions about 20 the quality of the records that he used to render 21 his opinion. 22 Q In your designation did you disclose</p>

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1 anywhere regarding the quality of any medical
2 records in this case?
3 **A I don't know.**
4 Q Do you recall writing that in your
5 designation, about the quality of the medical
6 records in this case?
7 **A No, I do not. But I did, certainly in my**
8 **review of Dr. Spiegel's rebuttal, take note of the**
9 **fact that he was -- his opinion was that it's**
10 **reasonable to conduct an evaluation without seeing**
11 **someone based on record review. And he gave**
12 **several examples, like insurance agents and**
13 **malpractice cases. And I agree that in those**
14 **cases it is reasonable to render an opinion, but I**
15 **do think that the records that are relied upon**
16 **have to be certainly of a -- you know, what I**
17 **would consider meeting the community standard of**
18 **care.**
19 **And so in this case, I -- you know, I**
20 **would have opinions about those records in the**
21 **context of this case that are relevant to my**
22 **opinions.**

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1 Q You've not disclosed your opinions on the
2 quality of the medical records in this case,
3 correct?
4 **A I have not, no.**
5 Q Okay. Did you review the video deposition
6 of Mr. Depp?
7 **A Yes, I did.**
8 Q So you reviewed -- do you recall how long
9 the dep- -- in total the deposition was?
10 **A I don't.**
11 Q Do you recall that there were four
12 separate days of deposition testimony?
13 **A Yes.**
14 Q And you don't have an estimate as to how
15 many hours the deposition was?
16 **A I don't.**
17 Q For the other depositions did you review
18 the transcripts or the videos?
19 **A The transcripts.**
20 Q Did you review any medical records of
21 Ms. Heard?
22 **A No.**

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1 Q Did you review any contemporaneous audio
2 recordings --
3 MS. CALNAN: Objection; vague.
4 Q -- of Mr. Depp?
5 MS. CALNAN: Objection; vague.
6 THE WITNESS: No.
7 Q Did you review any contemporaneous video
8 recordings of Mr. Depp?
9 MS. CALNAN: Objection; vague.
10 THE WITNESS: Aside from the video
11 deposition, no.
12 Q Did you review any contemporaneous photos
13 of Mr. Depp or Ms. Heard?
14 **A I do recall seeing some photographs of**
15 **Ms. Heard.**
16 Q What photographs did you see of Ms. Heard?
17 **A Of her face.**
18 Q And how were -- are the photos of her face
19 in any way affecting your opinion?
20 **A No.**
21 Q Did you review any contemporaneous text
22 messages that were produced in this case?

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1 **A Yes.**
2 Q What text messages did you review?
3 **A I don't recall the exact sequence of**
4 **messages, but there were text messages between**
5 **many of the parties, including Ms. Heard,**
6 **Mr. Depp. Some of these may have been referred to**
7 **in the depositions and I may not have actually**
8 **looked at the specific text, but I do recall**
9 **seeing some text messages including some text**
10 **messages between Mr. Depp and, I believe,**
11 **Dr. Kipper and Debbie Lloyd.**
12 Q Did the text message -- did any of the
13 text messages you reviewed -- did you rely on any
14 of the text messages for your opinions in this
15 case?
16 **A No.**
17 Q Did you review any diary entries that were
18 produced in this matter?
19 **A I'm sorry, did you say diary entries?**
20 Q Diary, yup.
21 **A I don't recall those, no.**
22 Q Okay. And did you review -- the documents

<p>61</p> <p>1 MS. CALNAN: Sorry. 2 Objection; improper hypothetical. 3 THE WITNESS: I don't think there are 4 different interpretations. I think it's pretty 5 clear what it states. I think there are people 6 who have disagreed with it and -- but I think the 7 Goldwater Rule is -- it states clearly what is 8 expected of a psychiatrist. 9 Q Your designation says that Dr. Spiegel did 10 not thoroughly evaluate Mr. Depp. What's your 11 basis for that opinion? 12 A Well, a psychiatric evaluation -- there 13 are several components to a psychiatric 14 evaluation, particularly in the context of a legal 15 case. It requires a full history, a review of 16 medical records. It requires a full mental status 17 examination. 18 The components of the evaluation depend to 19 some degree on what opinions are being expressed. 20 So I would give you an example, that if one was to 21 make a diagnosis of narcissistic personality 22 disorder or reference narcissistic personality</p>	<p>63</p> <p>1 conduct a thorough evaluation. He reviewed a 2 deposition, a long deposition, in which Mr. Depp 3 had to sit for many hours and answer very personal 4 questions that at times were difficult for him and 5 exposing and -- in which he was, you know, 6 frequently interrupted and told that he was not 7 answering the questions appropriately, and in 8 which there were arguments between the attorneys 9 that were upsetting to him. And, you know, 10 knowing what we know about his history of exposure 11 to trauma in his past, this is clearly upsetting 12 to him. 13 And so I think that relying on that 14 deposition was not proper and not necessarily 15 representative of who Mr. Depp is. And, again, 16 I'm not expressing an opinion one way or another 17 about Mr. Depp's mental status since I also would 18 not want to violate the Goldwater Rule, but this 19 was not a clear evaluation by Dr. Spiegel. 20 Q Do mental status exams ask patients 21 personal questions? 22 A Yes.</p>
<p>62</p> <p>1 traits, there would be specific questions that 2 would have to be asked of the individual. And 3 those could be done in the course of an interview 4 by a competent psychiatrist or it could be done 5 with the assistance of structured interviews or 6 other measures, such as the Narcissistic 7 Personality Inventory. 8 If the expert is expressing an opinion 9 about -- sorry I'm being a bit repetitive here, 10 but I'll say it one more time. If they're giving 11 opinions about cognition, memory, attention, 12 word-finding difficulties, and -- and also as in 13 the case of Dr. Spiegel who was directly 14 attributing all of these deficits to alcohol and 15 substance use, it's incumbent on the expert to, 16 first of all, have their own thorough history 17 about which substances were used, for how long, 18 and to what degree and how recently. And to have 19 testing which would normally in this case be 20 neuropsychological testing to document those 21 deficits. 22 So on that basis I believe he did not</p>	<p>64</p> <p>1 Q So a person would have to answer personal 2 questions in a mental status exam, correct? 3 A Yes. 4 MS. CALNAN: Objection; asked and 5 answered. 6 Q Okay. 7 A It would be an incomplete mental status 8 examination without these core questions that 9 every psychiatrist knows are part of their own 10 mental status examination. 11 Q Okay. And what are the core questions 12 that are part of a thorough mental status 13 examination? 14 MS. CALNAN: Objection; outside the scope 15 of Dr. Shaw's opinion. Sorry. 16 THE WITNESS: Okay. Sorry. 17 Yeah, well, certainly questions about 18 current mood, or what we call affect, presence of 19 suicidal ideation, questions about delusional 20 ideation or the presence of audio-visual 21 hallucinations. And with regard to the cognitive 22 portion of the mental status examination,</p>

<p style="text-align: right;">93</p> <p>1 A I said, No. They could hire any expert 2 they choose. 3 Q And that expert can give an opinion on the 4 psychiatry of a person -- on the psychiatry of a 5 person even without an interview? 6 A Well, yes, of course, they could express 7 any opinion they wish. The issue is whether or 8 not they are -- you know, whether that opinion is 9 based on typical accepted practice of a 10 psychiatrist, and that the methodology by which 11 they obtained that information would be something 12 that would be considered the standard of care for 13 someone in that profession. 14 Q You also say in your designation that 15 Dr. Spiegel does not indicate whether he believes 16 his opinions can be rendered to a reasonable 17 degree of medical certainty, or specify that 18 further information would be needed to confirm 19 these opinions. 20 What's your basis for that opinion? 21 A I'm sorry, would you mind repeating that 22 question.</p>	<p style="text-align: right;">95</p> <p>1 would cause some doubt about the validity of those 2 opinions and -- and certainly would make that 3 statement that there was reasonable medical 4 probability suspect. 5 Q And the Goldwater Rule is concerned about 6 the public perception of psychiatry, correct? 7 MS. CALNAN: Objection; outside the scope 8 of Dr. Shaw's opinion, and vague and ambiguous. 9 THE WITNESS: I don't believe that's the 10 full intention of the Goldwater Rule, although 11 some people who object to the rule had stated 12 that. 13 I think that the purpose of the Goldwater 14 Rule was really to ensure that psychiatrists were 15 practicing in an ethical and proper manner 16 following the accepted standard of care so that 17 the, you know, psychiatric opinions that they 18 express can be considered trustworthy and obtained 19 in a proper manner and -- really also to protect 20 people from being defamed on the basis of 21 inadequate or incomplete information. 22 Q And when you say defamed on incomplete or</p>
<p style="text-align: right;">94</p> <p>1 Q Sure. You say that Dr. Spiegel does not 2 indicate whether he believes his opinions can be 3 rendered to a reasonable degree of medical 4 certainty or specified that further information 5 would be needed to confirm these opinions. 6 What is that statement based on? 7 A Well, I'm not sure exactly what statement 8 I'm -- I made. What -- what I would want to state 9 clearly is Dr. Spiegel believes he was expressing 10 an opinion to a degree of medical certainty as was 11 reflected in his designation. 12 The problem that I see in his designation 13 is that he did not acknowledge the limitations of 14 his methodology and qualify that his opinions 15 actually needed to be, you know, really considered 16 in the light of the fact that he had not done the 17 standard evaluation that would normally be 18 required, and as it's specified earlier in the 19 previous attachment where we talked about various 20 recommendations about how important it is to, you 21 know, very clearly outline where someone has 22 deviated from the standard practice and which</p>	<p style="text-align: right;">96</p> <p>1 inadequate information, that would be statements 2 to the media, correct? 3 MS. CALNAN: Objection; calls for a legal 4 conclusion. 5 THE WITNESS: Initially, the first, you 6 know, version of the Goldwater Rule did have to do 7 with public opinion. But I believe it has been 8 subsequently revised to reflect opinions about 9 individuals, including in legal matters. So it 10 doesn't have to be published in the media, 11 although, of course in this case, there was 12 possibility that that might happen. 13 Q Okay. 14 MR. NADELHAFT: Could you put up, please, 15 Attachment 5. 16 AV TECHNICIAN: All right. Stand by. 17 (Shaw 6, Opinions of the Ethics Committee 18 on The Principles of Medical Ethics, 2017 Edition, 19 was marked for identification and is attached to 20 the transcript.) 21 Q Dr. Shaw, I'm showing you what's been 22 marked as Shaw Exhibit 6. Have you seen this</p>