

Froedtert Hospital

414-805-3000
www.froedtert.com

MILWAUKEE
2003 SEP 19 PM 3:24
RONALD D. LEONHARDT
CITY CLERK

September 17, 2003

Ronald D. Leonhardt, City Clerk
City of Milwaukee
200 E. Wells Street, Room 205
Milwaukee, WI 53202

Re: Claim for Damages (Wisconsin Statutes section 893.80)
Froedtert Memorial Lutheran Hospital, Inc.
9200 W. Wisconsin Avenue

Dear Mr. Leonhardt:

This letter constitutes a claim against the City of Milwaukee and the City of Milwaukee Police Department under section 893.80 of the Wisconsin Statutes relating to damages to the property of Froedtert Memorial Lutheran Hospital, Inc. ("Froedtert Hospital") on May 26, 2003.

Background of Claim

On May 26, 2003, three City of Milwaukee Police officers, Officers Denise Clark, Paul J. Garhart, and William R. Feely, brought a man identified as Rodric L. Stewart to Froedtert Hospital's emergency room for medical clearance prior to admission to the Milwaukee County Mental Health Complex. The physicians determined that a CT scan of Mr. Stewart's head was needed and the officers accompanied Mr. Stewart to Froedtert's radiology department for that scan. Two of the officers (Officers Garhart and Feely) left the room where the scan was to take place and were not in eye sight of the room when Mr. Stewart tried to grab the gun of the third officer. Two shots were fired and Froedtert's CT scanner and a cabinet were hit and damaged.

Among other things, Froedtert asserts that the officers violated Froedtert's policy that requires at least two officers remain with a prisoner patient during a procedure and that the officers ignored the prior behaviors and conduct of the patient in leaving him alone with only one officer and in not having him handcuffed.

Amount of Claim

Froedtert incurred the following costs in the repairs to its equipment:

GE Medical Systems	\$ 10,378.00	See Exhibit A
Internal Costs	507.00	See Exhibit B

CITY ATTORNEY
03 SEP 19 PM 3:59

Ronald D. Leonhardt, City Clerk
September 17, 2003
Page 2

We request reimbursement for the above expenses. If you have any questions, please contact me.

Sincerely,

A handwritten signature in black ink that reads "Blaine J. O'Connell". The signature is written in a cursive style with a large, prominent initial "B".

Blaine J. O'Connell
Senior Vice President, Finance/CFO



CUSTOMER INVOICE

Make check payable and remit to:
GE Medical Systems

Medical Systems

P. O. BOX 96483
CHICAGO, IL 60693

Charge to Account Number:	INVOICE NO.	BS/OCF	Invoice Date	AMOUNT DUE
	46724700	0320380	2003-JUN-11	10,378.00

SOLD TO: BILLING ACCT # 380299175
 FROEDTERT MEMORIAL LUTH HOSP
 ACCOUNTS PAYABLE
 P.O. BOX 26099
 MILWAUKEE WI 53226

SHIP TO:
 FROEDTERT MEMORIAL LUTH HOSP
 9200 W WISCONSIN AVE
 MILWAUKEE WI 53226

000380299175467247000000103780000001037800032038000019

To ensure proper credit - Detach and return above portion with payment

Please do not staple or fold



CUSTOMER INVOICE

Medical Systems 46724700	INVOICE NO. 0320380	BS/OCF 0320380	Invoice Date 2003-JUN-11	AMOUNT DUE 10,378.00
PAYMENT TERMS		PURCHASE ORDER NO.		INVOICE INQUIRIES
NT 30 AFT SHIP		PO# 03-46B		800-368-7102
Original GE Reference	Bus	Sales Rep	Date Shipped	Transportation Terms
	01	3-00359	2003-06-11	

Quantity	GE Identifier	Description	Extended Amount
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NOTE: EFFECTIVE 1/01/00 ALL HOURLY BILLED SERVICE RATES HAVE CHANGED. PLEASE CONTACT YOUR LOCAL GE OFFICE FOR DETAILS
 SERVICE DISPATCH: 0380-323188 SERVICE COMPLETED: 05-27-03
 ROOM NUMBER: ROOM 2457 EQUIP TYPE: COMPUTERIZED TOMOG
 SERVICE AREA: 2A22 SVC MGR: B J RICHTER
 SYSTEM ID: 414777CT2 AUTH BY: SAMPLASKI LEE

SERVICE PERFORMED:
 DAS BOARD
 ELECTRICAL SHORT
 REPAIR

THE GANTRY WAS SHOT BY GUN FIRE. 1ST TRIP- EVAL'ED DAMAGE, ORDERED PARTS (4.25HRS @\$468). 2ND TRIP- REPLACED DAMAGED PARTS, RAN DIAGS, SHOT CALS, TESTED. SOME DIAGS FAILED, BUT IMAGE QA IS CURRENTLY FINE. IF PROBLEMS IN DAMAGED AREA REOCCUR CUST. AGREED TO BE RESPONSIBLE.

HOURS CHARGED	LABOR	TRAVEL	T & L EXPENSE	Extended Amount
STANDARD	5.5	1.5	.00	4,173.00
OVERTIME	3.0	1.3		

2	T3202GX	HP CONVERTER BD	2,026.00
2	2148018	BRACKET	278.00
2	2148020	BRACKET	54.00
1	2191453	COVER	565.00
6	46-241601G2	FLEX CIRCUIT	3,282.00

NOTICE:

To avoid delays in service response, GE Medical Systems requires a customer purchase order prior to dispatching a service engineer for hourly billed service delivery. We suggest that contract customer establish a standing purchase order for service required outside of contract coverage hours.

The national holidays listed below are billable at GEMS current holiday hourly rates:
 1/1/03; 5/26/03; 7/3 & 4/03; 9/1/03; 11/27 & 28/03; 12/24 & 25/03;
 Other holidays based on regional tradition may be billable as well.

GEMS requires a 30 day advanced written notice to remove equipment off of a contract.
 Please contact your GEMS representative with any questions ~~CONTINUED~~ details.

F3842X R406

Goods and services or reimbursements associated with the ordered products or services and provided under contract without separately identified charge constitute discounts or other reductions in price under applicable federal law. It is the customer's responsibility to disclose such discounts or other reductions in price in the manner required under any state or federal program which provides reimbursement to the customer for or related to the products or services provided under the contract.



CUSTOMER INVOICE

Make check payable and remit to:
GE Medical Systems

Medical Systems

P. O. BOX 96483
CHICAGO, IL 60693

Charge to Account Number:	INVOICE NO.	BS/OCP	Invoice Date	AMOUNT DUE
	46724700	0320380	2003-JUN-11	10,378.00

SOLD TO: BILLING ACCT # 380299175
 FROEDTERT MEMORIAL LUTH HOSP
 ACCOUNTS PAYABLE
 P.O. BOX 26099
 MILWAUKEE WI 53226

SHIP TO:
 FROEDTERT MEMORIAL LUTH HOSP
 9200 W WISCONSIN AVE
 MILWAUKEE WI 53226

000380299175467247000000103780000001037800032038000019

To ensure proper credit - Detach and return above portion with payment

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CUSTOMER INVOICE

Medical Systems	INVOICE NO.	BS/OCP	Invoice Date	AMOUNT DUE
46724700		0320380	2003-JUN-11	10,378.00

PAYMENT TERMS		PURCHASE ORDER NO.		INVOICE INQUIRIES		Svc Loc	page
NT 30 AFT SHIP		PO# 03-46B		800-368-7102		0380	2
Original GE Reference	Bus	Sales Rep	Date Shipped	Transportation Terms			
	01	3-00359	2003-06-11				

Quantity	GE Identifier	Description	Extended Amount
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RECEIVED
 JUN 13 2003
 BY _____

Buy Accessories @ gemedicalsystems.com	Tax	.00
INCLUDE THIS INVOICE NO. FOR PROPER CREDIT: 46724700 Internal use only 316200565		TOTAL AMOUNT BILLED
		10,378.00

F3942X R495

Goods and services or reimbursements associated with the ordered products or services and provided under contract without separately identified charge constitute discounts or other reductions in price under applicable federal law. It is the customer's responsibility to disclose such discounts or other reductions in price in the manner required under any state or federal program which provides reimbursement to the customer for or related to the products or services provided under the contract.



Room Number ROOM 2457		Dispatch Number 0380323188	Customer FROEDTERT MEMORIAL LUTH HOSP		System ID# 414777CT2
TRIP LOG					
Date	Start Time	End Time	System Status	Travel Time	T&L Expense
05/26/03	23:00	02:00	91	1.3	\$0.00
05/27/03	08:00	13:30	90	1.5	\$0.00
					Covered Hours STD Billed Labor Travel 5.5 1.5
					Non-Covered Hours O.T. Billed O.T. Labor O.T. Travel 3.0 1.3
SVC CLS 705	FMI No.	FMI Code	Model Number	Serial Number	Account Number

SYMPTOM

DAS IS DAMAGED

DIAGNOSIS AND SERVICE PERFORMED

THE GANTRY WAS SHOT BY GUN FIRE. 1ST TRIP- EVAL'ED DAMAGE, ORDERED PARTS (4.25HRS @\$468). 2ND TRIP- REPLACED DAMAGED PARTS, RAN DIAGS, SHOT CALS, TESTED. SOME DIAGS FAILED, BUT IMAGE QA IS CURRENTLY FINE. IF PROBLEMS IN DAMAGED AREA REOCCUR CUST. AGREED TO BE RESPONSIBLE. (7HRS @ \$312/HR.

PARTS USED

Qty.	Part Number	Consignment No.	Description	Unit Price	Total Price
1	T3202GX	0380323188A	HP CONVERTER BD	\$1013.00	\$1013.00
1	T3202GX	0380323188A	HP CONVERTER BD	\$1013.00	\$1013.00
2	2148018		BRACKET	\$139.00	\$278.00
2	2148020		BRACKET	\$27.00	\$54.00
1	2191453	0380323188A	COVER	\$565.00	\$565.00
6	46-241601G2		FLEX CIRCUIT	\$547.00	\$3282.00

Thank You for choosing GE service. For further assistance, please call us at 1-800-437-1171

Total Charge to Customer	Customer P.O. Number PO# 03-46B	Accepted By	Serviced By: Lee Saruplaski
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This Is Not An Invoice

Froedtert Hospital

FACILITY PLANNING AND DEVELOPMENT

5-30-03

DAMAGE FROM 5-26-03 MPD INCIDENT TO CT# 2 Plant Operations and Environmental Services costs

Enviromental Services

\$67.00-Cleanup of room

Plant Operations

\$200.00- Paint room

\$120.00-Temporary repair to base cabinet door from bullet and supply/install one base cabinet shelf due to bullet damage

\$120.00-Supply and install new base cabinet door (On order, not yet installed)

\$507.00- TOTAL