

Michael Laidlaw

September 2, 2022

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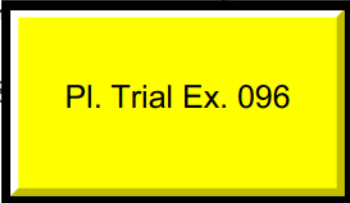
UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON
AT TACOMA

C.P., by and through his parents,)
 Patricia Pritchard and Nolle)
 Pritchard and PATRICIA PRITCHARD,)
 Plaintiffs,)
 vs.) No. 3:20-cv-06145-RJB
 BLUE CROSS BLUE SHIELD OF)
 ILLINOIS,)
 Defendant.)

ZOOM VIDEO DEPOSITION UPON ORAL EXAMINATION
OF
MICHAEL LAIDLAW

9:00 a.m.
September 2, 2022

REPORTED BY: Pat Lessard, CCR #2104



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1 on existing publications and preexisting data.

2 I think that's the distinction that you were
3 drawing in your answer as well, is that correct?

4 A. Yes.

5 Q. So would you be comfortable with that
6 understanding, that shared understanding of -- do you
7 know what I mean by primary research?

8 A. Yes, I understand your meaning.

9 Q. Have you performed any primary research?

10 A. Yes.

11 Q. On what? On what matters?

12 A. There were two studies. One was a magnesium
13 study that had to -- we're looking for an association
14 of low magnesium leading to osteoporosis.

15 And the other study was regarding thyroid
16 cancer where we were looking at thyroid globulin tumor
17 markers and how they correlated with ultrasound
18 findings of the neck.

19 Q. And when did you perform this research?

20 A. This was during my -- it may have begun
21 during my -- I think it began during my residency and
22 then I continued into fellowship.

23 Q. Have you performed any primary research
24 regarding gender dysphoria?

25 A. No.

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1 Q. Have you performed any primary research
2 relating to transgender people?

3 A. No.

4 Q. Have you performed any primary research
5 relating to gender identity?

6 A. No.

7 Q. Do you have any peer-reviewed publications?

8 A. Yes.

9 Q. Do you have a copy of your CV with you?

10 A. No.

11 Q. I will show you what's been marked as
12 Exhibit 2.

13 A. Okay.

14 Q. And this is a copy of your CV, right?

15 Well, it's not showing yet. This is a copy
16 of your CV, right?

17 A. Yes. It's the one we looked at earlier.

18 Q. And you have here a section titled
19 "Research, Publications, and Expert Witness Work," is
20 that right?

21 A. Yes.

22 Q. And we can scroll through it but just go
23 area by area.

24 Can you tell me which the -- within the
25 screen showing right now which of these publications

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1 listed here are peer-reviewed?

2 MS. PAYTON: Object to the form of the
3 question. And the blue print on the question on the
4 screen here, I'm not sure that's easy to follow.

5 But go ahead and answer.

6 THE WITNESS: Understood.

7 Q. (By Mr. Gonzalez-Pagan) Dr. Laidlaw, you
8 have marked in your CV some of these as expert
9 witness --

10 A. Yes.

11 Q. -- brief of Amicus Curiae, Expert Witness,
12 et cetera, is that correct?

13 A. Yes.

14 Q. Okay. So there's a publication listed for
15 2021 --

16 A. Uh-huh.

17 Q. -- it's a Letter to the Editor --

18 A. Uh-huh.

19 Q. -- titled "Erythrocytosis in a Large Cohort
20 of Trans Men Using Testosterone: A Long-Term
21 Follow-Up Study on Prevalence, Determinants and
22 Exposure Years," is that right?

23 A. Yes.

24 Q. It's a Letter to the Editor pertaining to
25 that separate article, is that correct?

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1 A. That's right.

2 Q. And is a Letter to the Editor a peer
3 reviewed publication?

4 A. I don't know. It has to be accepted before
5 they publish it, so I don't know what process they go
6 through. It may be or it may not be.

7 Q. There's another listing or a publication in
8 2020 titled "Correction Transgender Surgery Provides
9 No Mental Health Benefit," is that right?

10 A. Yes.

11 Q. And you're a coauthor of this piece, is that
12 right?

13 A. Yes.

14 Q. It was published in the Public Discourse, is
15 that correct?

16 A. That's correct.

17 Q. Is this a peer-reviewed publication?

18 A. Not to my knowledge.

19 Q. There's another publication just below it,
20 in 2020, titled Gender-Affirmation surgery conclusion
21 lacks evidence (letter)."

22 And you're a coauthor of this publication,
23 is that right?

24 A. That's right.

25 Q. This was another letter, is that correct?

1 A. Yes, it's a Letter to the Editor.

2 Q. Okay. Is this peer-reviewed?

3 A. I don't know. It has to be accepted for
4 publication, like I said, so I don't know what process
5 they go through.

6 Q. Below that there's another publication
7 titled "The Pediatric Endocrine Society's Statement on
8 Puberty Blockers isn't just Deceptive. It's
9 Dangerous."

10 And you're the sole author of this
11 publication, is that right?

12 A. Yes.

13 Q. And it was published in Public Discourse, is
14 that correct?

15 A. That's correct.

16 Q. And the next page, the next publication
17 listed is "The Right to Best Care for Children does
18 Not Include the Right to Medical Transition," is that
19 right?

20 A. Yes.

21 Q. And you're a coauthor of this piece?

22 A. Yes.

23 Q. And this is an opinion piece, is that
24 correct?

25 MS. PAYTON: Object to the form.

1 A. My understanding is it's a peer-reviewed
2 piece, but that's the one I would say has to be
3 peer-reviewed to be published but I don't know their
4 process.

5 Q. (By Mr. Gonzalez-Pagan) But is it an
6 opinion piece or is it a research piece?

7 MS. PAYTON: Object to the form.

8 A. I mean it's the Journal of Bioethics, so
9 it's not -- if you're asking is it based on primary
10 research? Because there's two different things. You
11 could have a peer-reviewed -- peer review doesn't
12 necessarily mean it's primary research, to my
13 understanding.

14 Q. No. Understood.

15 I'm asking the question is the Journal of
16 Bioethics a peer-reviewed publication?

17 A. That's my understanding, yes. I mean all
18 the medical journals that you have listed are peer
19 reviewed publications. The exact process they use, I
20 don't know.

21 Q. And this piece in 2019 for which you are a
22 coauthor in the American Journal of Bioethics is not a
23 piece of original research, is that correct?

24 A. When you say that, do you mean did we have
25 patients doing -- collecting data on individual

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1 patients? Is that what you mean by that?

2 Q. Yes. Do you have an understanding of what
3 primary research meant? So I guess I would ask it
4 that way.

5 Is this article based on primary research
6 you conducted?

7 A. It's not based on primary research I
8 conducted.

9 Q. Thank you. There's another publication.
10 It's a Letter to the Editor, "Endocrine Treatment of
11 Gender-Dysphoric/Gender Incongruent Persons: An
12 Endocrine Society Clinical Practice Guideline," is
13 that correct?

14 A. Correct.

15 Q. And you're a coauthor of this piece?

16 A. Yes.

17 Q. And this is another Letter to the Editor,
18 correct?

19 A. Yes.

20 Q. Just below that there's a publication titled
21 "The Gender Identity Phantom," and you are the sole
22 author, is that right?

23 A. Correct.

24 Q. And it appears to be published in the
25 gdworkinggroup.org, is that right?

1 A. Yes, I think so.

2 Q. What's the gdworkinggroup.org?

3 A. They're a collection of different
4 psychologists, psychiatrists and other mental health
5 professionals, and there may have been other
6 physicians, but who were writing pieces with concerns
7 or criticisms about the care of people with gender
8 identity conditions.

9 Q. Is this a publication posting on a
10 discussion board?

11 A. Could you repeat that?

12 Q. Is this a publication posting within a
13 discussion board?

14 A. No. Are you asking me like can you just
15 post something as part of a discussion or are you
16 asking can people discuss the topic below your
17 article? Is that what you're asking?

18 Q. I'm asking if it's a discussion forum for
19 professionals where you are set up, made a post, or
20 whether it's an article.

21 A. Oh, it's an article against -- each author
22 can write -- you have to be a member to be an author
23 and you have to be an author to put something up
24 there.

25 So not just any general member of the public

1 could write something, if that clarifies it.

2 Q. Okay. Is this peer-reviewed?

3 A. No.

4 Q. The next publication is titled "Gender
5 Dysphoria and Children: An Endocrinologist's
6 evaluation of 'I am Jazz,'" and you're the sole
7 author, is that right?

8 A. That's correct.

9 Q. And it was published in Public Discourse, is
10 that correct?

11 A. Yes.

12 Q. Are there any other publications that you
13 have in relation to gender dysphoria or transgender
14 issues?

15 A. Not that I can think of. I did have this --
16 I think I put it somewhere with my subpoena response,
17 but there's gendersanity.org where I explained myself
18 and coauthors explained the most recent Letter to the
19 Editor.

20 Q. Sorry? What is that?

21 A. Gendersanity.org I believe is the name.

22 Q. And is that a self-published website?

23 A. Yes.

24 Q. We've established that three of your
25 publications are for Public Discourse, is that

1 correct?

2 MS. PAYTON: Object to the form.

3 A. Yeah. Three -- I think it was three, yeah,
4 three publications for Public Discourse.

5 Q. (By Mr. Gonzalez-Pagan) Who publishes,
6 Public Discourse?

7 A. I believe at the time I submitted my
8 articles that -- I don't know who the publisher is but
9 the editor was Ryan Anderson, I believe.

10 Q. Are you familiar with the Witherspoon
11 Institute?

12 A. Only that I saw their name associated with
13 Public Discourse.

14 Q. I'm going to show you what's been marked as
15 Exhibit 4.

16 A. Okay.

17 (Marked Deposition Exhibit No. 4.)

18 Q. (By Mr. Gonzalez-Pagan) Do you see the
19 document in front of you?

20 A. Yes.

21 Q. This is the Mission Statement for Public
22 Discourse, is that right?

23 A. It says "Our Mission," so I suppose it is.

24 Q. Okay. And just to clarify, this is a
25 printout on September 2nd, 2022, 8:30 a.m., off the

1 website www.the public discourse.com/our mission, is
2 that correct?

3 MS. PAYTON: Object to the form, foundation.

4 A. You are posting -- or I can see on the
5 screen a mission statement from Public Discourse as of
6 today. Today is the first time I've ever seen it.

7 Q. (By Mr. Gonzalez-Pagan) Yes. On the
8 screen?

9 A. Yeah.

10 Q. And do you understand Public Discourse to be
11 an online journal?

12 A. Yes.

13 Q. And are you aware that their mission is to
14 enhance public understanding of the moral foundations
15 of free society?

16 MS. PAYTON: Object to the form.

17 A. You know, I'm looking at it now and I can
18 say you just read what is on there. But I don't have
19 any affiliation with them in particular.

20 I think, but I don't recall exactly, that
21 anything I publish at the bottom, I think, says
22 something like "This does not necessarily represent
23 the views of the Public Discourse," so --

24 Q. Is there any reason why you chose to publish
25 in the Public Discourse?

PAGE
BREAK

1 THE VIDEOGRAPHER: We're going off the
2 record at 10:00 a.m.

3 (Recess.)

4 THE VIDEOGRAPHER: We're back on the record
5 at 10:07 a.m.

6 Q. (By Mr. Gonzalez-Pagan) We left off
7 discussing your publications. Do you recall that,
8 Dr. Laidlaw?

9 A. Yes, I do.

10 Q. Just to sum up, none of your publications
11 pertaining to gender dysphoria are based on original
12 primary research, is that correct?

13 A. That's correct.

14 Q. And with the exception of the piece in the
15 Journal of Bioethics none of your publications
16 pertaining to gender dysphoria are peer-reviewed?

17 A. Well, a number are published in peer-reduced
18 journals.

19 Q. Sorry. The Letters to the Editor, is that
20 right?

21 A. The Letters to the Editors are in
22 peer-reviewed journals, yes.

23 Q. We've established that you have a private
24 practice dedicated to endocrinology, is that correct?

25 A. That's correct.

1 Q. As part of your practice do you treat any
2 pediatric patients?

3 A. I have some patients who are under the age
4 of 18, so later teens or mid teens.

5 Q. What percentage of your practice are
6 patients under the age of 18?

7 A. Probably, like, less than five percent.

8 Q. Have you ever provided care to a transgender
9 patient?

10 A. Yes.

11 Q. Have you provided them with care relating to
12 their gender dysphoria?

13 A. Only once.

14 Q. What care did you provide that one patient?

15 A. The patient needed a refill of estrogen.

16 Q. Did you provide them with the refill?

17 A. Yes.

18 Q. About how many transgender patients have you
19 treated for other conditions besides this one patient
20 for gender dysphoria?

21 A. So I would say that in my practice I have
22 patients with, I would use a more general term and say
23 "gender incongruence," who I'm seeing for other
24 conditions.

25 For example, they may have a pituitary

PAGE
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1 A. Or there would be one who had -- well, I
2 would say two because the detransition person I am
3 treating as a consequence of gender dysphoria. So I
4 would say two.

5 Q. Okay. So there's the one person who has
6 detransitioned and then the one person who you
7 provided a refill for estrogen, is that correct?

8 A. Those are two patients who received hormones
9 related to a gender incongruence condition.

10 Q. How old was the patient that detransitioned?

11 A. In his 20s. He was diagnosed in his early
12 teens.

13 Q. Do you know how this patient came about
14 connecting with you?

15 A. He has had a very difficult time finding an
16 endocrinologist who will treat him. He had an
17 orchiectomy or testicles removed and vaginal plasty.

18 He had a difficult time finding a physician
19 who would prescribe testosterone so he had made a
20 search and somehow found me.

21 Q. Have you ever diagnosed any patient with
22 gender dysphoria?

23 A. Being that it's a psychological diagnosis, I
24 do not make psychological diagnoses, so no.

25 Q. Have you ever diagnosed a person with gender

1 identity disorder?

2 A. The same answer. A psychological, you know,
3 diagnosis that I do not make.

4 Q. Just to clarify, for the patient who
5 detransitioned, you're not providing care for
6 treatment of gender dysphoria, is that correct?

7 A. Well, I guess it depends how you define
8 treatment for gender dysphoria.

9 Q. Well, what do you understand gender
10 dysphoria to be?

11 A. Well, this would be a discomfort arising
12 from a person's, you know, true feeling of their
13 gender identity versus their physical body.

14 So I don't think this person has fully
15 resolved that issue within himself, but he feels very
16 poorly not receiving testosterone so I'm treating him.
17 So in a sense I am treating his gender -- I mean he
18 feels better. He's doing better.

19 So I believe I am treating his gender
20 dysphoria. That's not my primary purpose but it's a
21 secondary consequence.

22 Q. Are you working in conjunction with a mental
23 health therapist or mental health provider in
24 providing this care to this individual?

25 A. He just moved to Southern California and in

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1 last two sentences. It states "WPATH claims to be a
2 scientific organization while explicitly acting as an
3 advocacy group. These are incompatible goals."

4 A. Yes.

5 Q. What is the basis for your opinion that a
6 scientific organization cannot engage in advocacy?

7 A. I think a scientific organization can -- for
8 example, the American Cancer Society, which we talked
9 about earlier, they can advocate for eliminating
10 cancer or better treatments for cancer. But they
11 would not -- one would expect them not to exclusively
12 follow one, say, politically based point of view.

13 There could be a variety of points of view
14 within the American Cancer Society, I'm just giving
15 you an example, or Endocrine Society. Whatever the
16 society is should be open to a variety of points of
17 view.

18 And what I've seen is that the WPATH is not.

19 Q. You're not a member of WPATH, is that right?

20 A. That's correct.

21 Q. Do you know, are you privy to the debates
22 that occur within WPATH?

23 A. I've seen some online debates. I've spoken
24 to a psychologist who was a member and quit basically
25 because of this problem.

1 Q. But you're not privy to the actual internal
2 conversations of WPATH, is that correct?

3 A. I've spent time looking at the WPATH
4 standards of care.

5 Q. That wasn't my question, though. Have you
6 participated in any WPATH conferences?

7 A. I do not participate in WPATH conferences.
8 I'm not a member.

9 Q. Have you participated in internal discussion
10 forums?

11 A. I do not participate with WPATH. I'm not a
12 member.

13 Q. So what is the basis for your opinion that
14 there are no diverse -- no differences of opinion
15 within WPATH?

16 A. I'm basing it on their standards of care.

17 Q. The Endocrine Society has a variety of
18 clinical practice guidelines, is that not correct?

19 A. They do.

20 Q. Some people disagree with many of those
21 variety of clinical practice guidelines, is that not
22 correct?

23 A. Are you saying that the members of the
24 Endocrine Society disagree with practice guidelines?

25 Q. Yes.

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1 allowed for a variety of viewpoints in my opinion.

2 Q. (By Mr. Gonzalez-Pagan) And I'm asking
3 whether you know whether, know from a first hand basis
4 whether WPATH allows for a variety of opinions?

5 A. My impression is that they do not.

6 Q. What's the basis for your impression?

7 A. Their standards of care and my conversation
8 with the psychologist that I mentioned.

9 Q. So the standards of care itself is proof
10 there's no debate?

11 A. Right. Because it doesn't offer any
12 alternatives.

13 Q. Let's turn to page 31 -- sorry, paragraph 31
14 of your report.

15 A. Okay.

16 Q. There you state -- is there an echo? There
17 you state that the assertion by Dr. Etner that a
18 growing assemblage of research documents that gender
19 identity is immutable and biologically based lacks
20 scientific support and therefore impairs the
21 credibility of Dr. Etner's opinions?

22 A. Yes.

23 Q. Okay. Are you saying that gender identity
24 is not biologically based?

25 A. I'm saying there's no evidence of it at this

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1 A. I'm not sure. I think some of the earlier
2 studies were in the United States but I'm not a
3 hundred percent sure.

4 Q. Are you aware that the desistance studies
5 only involve youth that were diagnosed or were sub
6 threshold for gender identity disorder rather than
7 gender dysphoria?

8 A. Well, the gender dysphoria diagnosis was
9 not, you know, hadn't been published at that point,
10 so.

11 Q. It didn't exist at that time, is that
12 correct?

13 A. Well, I mean it may have existed but it
14 didn't exist as a term in the DSM.

15 Q. Sure. What I'm trying to say, the gender
16 dysphoria diagnosis as contained within the DSM-5 did
17 not exist at the time that these studies were
18 conducted?

19 A. Yes.

20 Q. Okay. And the diagnostic criteria of gender
21 identity disorder contained in the DSM-3 and 4 is
22 different than the diagnostic criteria for gender
23 dysphoria in the DSM-5, is that correct?

24 A. At that time I believe they had a term
25 gender identity disorder.

1 Q. Yes. And I'm asking whether the diagnostic
2 criteria are different.

3 A. There were different diagnostic criteria, to
4 my knowledge.

5 Q. I'm going to show you what's been marked as
6 Plaintiffs' Exhibit 6.

7 (Marked Deposition Exhibit No. 6.)

8 Q. (By Mr. Gonzalez-Pagan) I apologize. This
9 is actually a pretty enormous PDF.

10 Can you see my screen?

11 A. Yes.

12 This is a publication titled "Understanding
13 the Well-Being of LGBTQI Populations," from 2020,
14 published by the National Academies of Sciences,
15 Engineering and Medicine.

16 Do you see that?

17 A. I see it.

18 Q. Are you familiar with this document?

19 A. Only briefly looking at it this morning but
20 I had not heard of it before.

21 Q. Okay. And in your report you relied on
22 reported reviews from the United kingdom, Sweden and
23 Finland relating to the scientific evidence of the
24 care of gender dysphoria, is that right?

25 A. Yes.

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BREAK

1 looked at primarily up to age twelve population.

2 So I'm asking if you know any desistance
3 rates or studies pertaining to desistance rates, you
4 know, above age twelve?

5 A. Well, I don't -- well, let's say from the
6 age of 13 to 18 I'm not aware of any study that looks
7 at desistance.

8 Q. Do you know of any study that looks at
9 desistance above age 18?

10 A. I don't know if there's any published study.
11 I know there was a professor in the UK who wanted to
12 publish something and he was obstructed from doing
13 that. I don't remember his name, Caspin, I think.

14 So I'm not aware that there's any out there.

15 Q. (By Mr. Gonzalez-Pagan) I'm going to refer
16 you again to Exhibit 6. This is the National
17 Academies study report. I'm on page 302 of the
18 document.

19 And it states that while interest in the
20 so-called desistance of transgender identity has been
21 informed by studies suggesting that as high as 80
22 percent of prepubertal youth presenting to pediatric
23 gender clinics ultimately do not identify as
24 transgender, many of the youth included in the studies
25 did not meet full DSM criteria for a gender

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1 on minor C.P."

2 That's a mode of treatment. And I'm asking
3 how is that consistent with your critique on paragraph
4 180?

5 A. Well, my critique was of Dr. Karasic.

6 Q. Did that apply to you?

7 A. No.

8 Q. You're not a mental health provider, right?

9 A. I'm sorry?

10 Q. You're not a mental health provider, right?

11 A. No.

12 Q. And you're not a surgeon, right?

13 A. Correct.

14 Q. Look at paragraph 195. You conclude
15 "Therefore, it appears that Dr. Hatfield had begun
16 pubertal suppression at Tanner Stage 1, which was not
17 advised by either the ESG or even the WPATH's SOC."

18 Did I read that correctly?

19 A. Yes.

20 Q. That is not something you know, that is
21 speculation based on some gaps you appear to have
22 found in the medical records, is that right?

23 A. No. I'm basing my opinion on the medical
24 record.

25 Q. Okay. So are you saying that with

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1 that question, do you consider a person to be
2 transgendered to be troubling?

3 MS. PAYTON: I'll object to the form.

4 A. I'm not sure what you mean by that. Are you
5 saying medically or are they troubled, you know, at
6 risk for hormones? Is that what you're saying?

7 Q. (By Mr. Gonzalez-Pagan) I am making
8 reference to your own publication.

9 A. Well, you'd have to show me exactly what it
10 is. I'm not sure what you're referencing.

11 MR. Gonzalez-Pagan: Okay. Those are all my
12 questions.

13 MS. PAYTON: No questions. We'll reserve.
14 No video, please.

15 THE VIDEOGRAPHER: Did Ele have some
16 questions?

17 MS. HAMBURGER: No. I have no questions.

18 THE VIDEOGRAPHER: Okay. I thought she said
19 hold on a few minutes.

20 This concludes the video-recorded deposition
21 of Dr. Michael Laidlaw.

22 We are off the record at 3:21 p.m.

23 (Deposition recessed at 3:21 p.m.)

24

25

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1 S I G N A T U R E

2 I declare under penalty of perjury under the
3 laws of the State of Washington that I have read my within
4 deposition, and the same is true and accurate, save and
5 except for changes and/or corrections, if any, as indicated
6 by me on the CHANGE SHEET flyleaf page hereof.

7 Signed in _____, Washington,
8 this _____ day of _____, 2022.

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12 MICHAEL LAIDLAW

13 Taken: September 2, 2022

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22 Re: C.P. versus Blue Cross Blue Shield
Cause No.: 3:20-cv-06145-RJB
23 Pat Lessard, CCR 2104

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1 C E R T I F I C A T E

2 STATE OF WASHINGTON)
) ss.
3 COUNTY OF KING)

4 I, the undersigned Washington Certified Court
5 Reporter, hereby certify that the foregoing deposition upon
6 oral examination of MICHAEL LAIDLAW was taken
7 stenographically by me on September 2, 2022, and transcribed
8 under my direction;

9 That the witness was duly sworn by me pursuant to
10 RCW 5.28.010 to testify truthfully; that the transcript of
11 the deposition is a full, true, and correct transcript to
12 the best of my ability; that I am neither attorney for nor
13 relative or employee of any of the parties to the action or
14 any attorney or counsel employed by the parties hereto, nor
15 am I financially interested in its outcome.

16 I further certify that in accordance with
17 CR 30(e) the witness was given the opportunity to examine,
18 read and sign the deposition within 30 days upon its
19 completion and submission, unless waiver of
20 signature was indicated in the record.

21 IN WITNESS WHEREOF, I have hereunto set my hand
22 12th day of September, 2022.

23 *Pat Lessard*

24 Pat Lessard,
pat@court-reporter.com
25



Michael Laidlaw

September 2, 2022

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1 CHANGE SHEET

2 PLEASE MAKE ALL CHANGES OR CORRECTIONS ON THIS SHEET,
3 SHOWING PAGE, LINE AND REASON.

4 PAGE LINE CORRECTION AND REASON

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22 MICHAEL LAIDLAW
Taken: September 2, 2022
23 Re: C.P. versus Blue Cross Blue Shield
Cause No.: 3:20-cv-06145-RJB
24 Pat Lessard, CCR 2104.

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