

Hernandez Angelica

DC-14-04101

NO. _____

LAMAR ROBINSON, M.D. and
JASBIR AHLUWALIA, M.D.

Plaintiffs,

v.

UGHS DALLAS
HOSPITALS, INC.,

Defendant.

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IN THE DISTRICT COURT

____ JUDICIAL DISTRICT

DALLAS COUNTY, TEXAS

**PLAINTIFFS' ORIGINAL VERIFIED PETITION AND
APPLICATION FOR TEMPORARY RESTRAINING ORDER,
TEMPORARY INJUNCTION, AND OTHER RELIEF**

Lamar Robinson, M.D., and Jasbir Ahluwalia, M.D., Plaintiffs, bring this action for injunctive and other relief under Texas law against UGHS Dallas Hospitals, Inc. (“UGHD”), Defendant, for revoking their admitting privileges on a ground that a Texas statute expressly forbids—because of their willingness to participate in abortion procedures at another facility—and in support of their state-law claim would respectfully show the Court as follows:

Necessity for Action

Section 103.002 of the Texas Occupations Code provides that a hospital “may not discriminate against a physician” either because he or she “*refuses to perform or participate in an abortion procedure*” or “because of the person’s *willingness to participate in an abortion procedure at another facility.*” Tex. Occ. Code § 103.002(a) & (b) (West 2013) (emphasis added). As the Fifth Circuit Court of Appeals recently stressed, the second part of the statute “prohibit[s] hospitals from discriminating against

physicians who perform abortions when they grant admitting privileges.”¹ But four days after the Fifth Circuit’s ruling, UGHD sent Dr. Ahluwalia and Dr. Robinson each a letter in which it “revoked” their admitting privileges because—in the words of the letters— Plaintiffs “perform ‘voluntary interruption of pregnancies’ as a regular part of [their] medical practice” at non-UGHD facilities. Because (i) UGHD’s conduct violates Texas law, (ii) UGHD’s actions have caused irreparable harm to the professional relationships between the doctors and their patients as well as to their professional standing in the medical community and otherwise, and (iii) Dr. Ahluwalia, Dr. Robinson, and their patients will continue to suffer irreparable harm unless the Court takes immediate action, Plaintiffs bring this action for all appropriate non-monetary relief. This includes a temporary restraining order and temporary injunction, to which Chapter 103 of the Texas Occupations Code by its express terms entitles them: “(1) an injunction against any further violation”, “(2) appropriate affirmative relief, including admission or reinstatement” and “(3) any other relief necessary to ensure compliance with this chapter.” Tex. Occ. Code § 103.003 (West 2013).

Discovery Control Plan and Relief Sought

1. Pursuant to Rule 190.1 of the Texas Rules of Civil Procedure, Plaintiffs intend to conduct discovery in this case under Level 2.

¹ *Planned Parenthood of Greater Texas Surgical Health Services v. Abbott*, No. 13-51008, 2014 WL 1257965, at *12 (5th Cir. Mar. 27, 2014) (citing Tex. Occ. Code § 103.002(b)).

2. Pursuant to Rule 47 of the Texas Rules of Civil Procedure, Plaintiffs seek “monetary relief of \$100,000 or less and non-monetary relief.”² Tex. R. Civ. P. 47(c)(2).

Background

3. This action arises from the blatant violation of Texas anti-discrimination law by Defendant, UGHD, which revoked Plaintiffs’ hospital admitting privileges because they perform abortions at other, unrelated facilities. UGHD’s action is expressly prohibited by Texas law. Tex. Occ. Code §§ 103.002(b), 103.003. Indeed, as the Texas Attorney General recently explained, “Texas law... ensur[es] that doctors who perform abortions will not encounter discrimination from the hospitals that must decide whether to award them admitting privileges. Not only does Texas law expressly prohibit hospitals from discriminating against doctors who perform abortions, it also confers a private right of action on victims of this unlawful discrimination.” Brief of the Attorney General of the State of Texas, at 33, *Planned Parenthood of Greater Texas Surgical Health Services v. Abbott*, No. 13-51008 (5th Cir.). The statute expressly provides that the injunctive relief Plaintiffs seek is appropriate to remedy such discrimination. Tex. Occ. Code § 103.003.

4. Plaintiffs Dr. Robinson and Dr. Ahluwalia are practicing gynecologist-obstetricians who have each provided abortions at private, licensed clinics for over three decades. Plaintiffs applied for admitting privileges at UGHD in order to comply with the newly-passed 2013 Texas House Bill No. 2 (“H.B. 2”), which added to Texas’s extensive

² Plaintiffs seek no monetary relief.

regulation of the practice of abortion a requirement that doctors who provide abortions have admitting privileges at a hospital no more than thirty miles from the location where the abortion is provided. H.B. 2 does not require that abortions be performed in the hospital where a physician has privileges, or that, in the unlikely event of a complication, the patient be transferred to a hospital where the physician has privileges. Accordingly, Plaintiffs applied for privileges relating primarily to their gynecological practices, including for procedures related to the detection and treatment of cysts, abscesses and certain forms of cancer. UGHD is located within 30 miles of the clinics at which Plaintiffs provide abortions, as H.B. 2 requires. *See* H.B. 2 § 2; Health and Safety Code § 171.0031(a)(1)(B).

5. UGHD granted Dr. Robinson's application for privileges on December 10, 2013, and granted Dr. Ahluwalia's application on January 30, 2014. Since receiving their privileges, both doctors have continued to provide abortions exclusively at other facilities unrelated to UGHD. Neither Plaintiff has provided abortions at UGHD.

6. At the end of March, UGHD became the target of anti-abortion protestors who, on information and belief, contacted the hospital and demanded that it revoke Dr. Robinson's admitting privileges and sever any relationship with physicians who provide abortions.

7. UGHD apparently caved to the protestors' demands. On March 31, 2014, UGHD's new Chief Executive Officer ("CEO"), Chuck Schuetz, revoked Plaintiffs' privileges and, on information and belief, assured the protestors that UGHD would be "pro-life" and would not associate with those who provide abortions. UGHD admitted in

its letter to Plaintiffs that it had decided to revoke their privileges because they provide abortions elsewhere. UGHD explained that “[y]our privileges have been revoked at University General Hospital Dallas (“UGHD”)” because “[i]t has come to our attention that you perform ‘voluntary interruption of pregnancies’ as a regular part of your medical practice” and claimed that “performing these procedures is disruptive to the business and reputation of UGHD.”

8. UGHD’s unlawful decision has been devastating for Plaintiffs’ relationships with their patients and standing in the medical community. While hospital admitting privileges are not medically necessary to the safe and effective provision of an abortion—which is an extremely safe medical procedure and, in Texas, is performed primarily in clinics licensed as abortion facilities or ambulatory surgical centers—they are now required by Texas state law. Unless and until H.B.2 is struck down as unconstitutional or otherwise invalid, Plaintiffs cannot provide abortion services in Texas without admitting privileges. UGHD’s decision to revoke those privileges has forced Plaintiffs to suspend the core of their practices indefinitely. Their patients’ ability to obtain timely abortion care has been disrupted, and their patients no longer have access to abortion care from their chosen doctor. Plaintiffs’ reputations have also suffered irreparable damage. Accordingly, Plaintiffs seek an injunction requiring immediate reinstatement of their privileges, as permitted by Tex. Occ. Code §103.003 and alleged below.

The Parties

9. Plaintiff Jasbir Ahluwalia, M.D., an individual citizen of the State of Texas, is a physician licensed to practice medicine in the State of Texas and has been providing reproductive health care, including medication and surgical abortions, to patients for over three decades. Since 2008, he has been the medical director of the Routh Street Women's Clinic in Dallas County, where he is the only full-time physician on staff.

10. Plaintiff Lamar Robinson, M.D., an individual citizen of the State of Texas, is a physician licensed to practice medicine in the State of Texas, with thirty-five years of experience in reproductive health care, including abortion. Dr. Robinson provided medication and surgical abortions at his licensed abortion facility in Dallas County, Abortion Advantage, until he received the letter from UGHD revoking his privileges.

11. Defendant UGHD is a corporation organized and existing under the laws of the State of Texas, with its principal office located at 2929 S. Hampton Road, Dallas, Texas 75224, Dallas County, Texas. It owns and operates the University General Hospital of Dallas. Defendant may be served with process by serving its registered agent for services of process, Edward T. LaBorde, Jr., 7501 Fannin Street, Houston, Texas 77054. On information and belief, UGHD has a department of gynecology and provides gynecological services to patients.

Jurisdiction and Venue

12. Venue properly lies in Dallas County under Texas Civil Practice & Remedies Code section 15.002(a)(1) and (3) in that all or a substantial part of the events or omissions giving rise to the claim occurred in Dallas County and Defendant's principal office in the State of Texas is in Dallas County.

13. This Court has jurisdiction of the subject matter pursuant to Texas Occupations Code section 103.003. The Court also has personal jurisdiction of UGHD both because it has continuous and systematic contacts with the State of Texas and because the events giving rise to Plaintiffs' claims occurred within the State of Texas.

Dr. Ahluwalia's Privileges at UGHD

14. In order to comply with the newly-passed H.B. 2, Dr. Ahluwalia applied to UGHD for admitting privileges on or about January 3, 2014. Dr. Ahluwalia's application included a standard "Credentialing Application" as well as the UGHD-specific "Clinical Privileges in Gynecology" application, which identified the specific procedures for which he was requesting privileges at UGHD. UGHD at the time provided and all times since has provided obstetrical or gynecological health care services. *See* H.B. 2 § 2, which added Health and Safety Code § 171.0031(a)(1)(B), which in turn requires that the privilege-granting hospital "provide[] obstetrical or gynecological health care services."

15. Dr. Ahluwalia did not apply to perform abortions at UGHD. The procedures for which he sought privileges—including cervical and vulvar biopsies, pap smears, and procedures related to cysts—are routine gynecological procedures which have nothing to do with pregnancy or its voluntary termination. One of the procedures

for which Dr. Ahluwalia sought privileges, Diagnostic D&C, can be used to determine whether a woman has undergone an incomplete abortion, but is not itself a form of abortion.

16. Although Dr. Ahluwalia did not seek privileges to perform abortions at UGHD, Dr. Ahluwalia's application made clear that he provided abortions at other facilities. As part of his application, Dr. Ahluwalia submitted a case list from the Routh Street Women's Clinic listing the total number of surgical cases he performed over the previous year. The case list clearly indicated, by relevant medical coding, that all of Dr. Ahluwalia's identified surgeries were abortions. It was clear from Dr. Ahluwalia's application that he provided abortion services at the Routh Street Clinic.

17. UGHD interviewed Dr. Ahluwalia as part of the application process. The interviews were conducted by UGHD's then-CEO; its Chief Medical Officer; and its Chief of the Gynecology Department. In addition, an official from UGHD contacted the administrator for the Routh Street Clinic to confirm the Current Procedural Terminology ("CPT") codes used to identify surgeries on the case list, each of which related exclusively to the provision of abortion.

18. UGHD accepted Dr. Ahluwalia's application and qualifications and, on or about January 30, 2014, granted his request for admitting privileges. UGHD informed Dr. Ahluwalia of its decision by letter from its then-CEO.

19. Dr. Ahluwalia has never performed an abortion—or any other procedure—at UGHD.

20. Dr. Ahluwalia has never admitted or referred a patient to UGHD.

21. Since receiving his admitting privileges, Dr. Ahluwalia has had only limited contact with UGHD and has never engaged in any form of “disruptive behavior” as defined in UGHD’s by-laws.

22. Since receiving his admitting privileges at UGHD, Dr. Ahluwalia has continued to provide abortion services at the Routh Street Clinic in Dallas. In the unlikely event that one of his patients experiences a serious complication that requires hospitalization while at the Routh Street Clinic, the clinic and Dr. Ahluwalia would transfer her by ambulance to the nearest hospital that is accepting patients—which, in light of the distances, is unlikely to be UGHD. The Routh Street Clinic is much closer to both Parkland Memorial Hospital and Texas Health Presbyterian Hospital Dallas, either of which would be better suited to provide emergency care to a clinic patient than UGHD, which is more than twice as far away.

Dr. Robinson’s Privileges at UGHD

23. In order to comply with H.B. 2, Dr. Robinson applied to UGHD for admitting privileges on or about November 5, 2013. Dr. Robinson’s application included a standard “Credentialing Application” as well as the UGHD-specific application for “Clinical Privileges in Gynecology.”

24. In his application to UGHD, Dr. Robinson identified the specific procedures for which he was seeking privileges. The vast majority of the procedures for which Dr. Robinson requested privileges were routine gynecological procedures, related to the identification and treatment of abscesses, cysts, and cancers, among other things.

In addition, Dr. Robinson requested privileges to perform certain second-trimester surgical abortion procedures.

25. Dr. Robinson's application to UGHD clearly indicated that he performed abortions at facilities other than UGHD. Among other things, Dr. Robinson submitted a case list to Jose Salas, a Credentialing Specialist at UGHD, which included information about his abortion practice, such as the abortion services he provided at Abortion Advantage.

26. UGHD accepted Dr. Robinson's application and qualifications and, on or about December 10, 2013, approved his request for admitting privileges. UGHD informed Dr. Robinson of its decision by letter from its then-CEO.

27. Dr. Robinson has never performed an abortion or any other procedure at UGHD. Dr. Robinson has not admitted or referred any patient to UGHD.

28. Since receiving his admitting privileges, Dr. Robinson has had only limited contact with UGHD and has never engaged in any form of "disruptive behavior" as defined in UGHD's by-laws.

29. Dr. Robinson provided abortion services at Abortion Advantage in Dallas after receiving his admitting privileges at UGHD, but was forced to stop doing so after he received the letter from the hospital revoking his privileges. The clinic is less than a half-mile from St. Paul University Hospital and less than a mile from Parkland Memorial Hospital, either of which would be closer and better suited to provide emergency care to a clinic patient than UGHD, which is more than seven miles away.

30. In the unlikely event that one of his patients experiences a serious complication that requires hospitalization while at his clinic, the clinic and Dr. Robinson would transfer her by ambulance to the nearest hospital that is accepting patients—which, in light of the distances, is unlikely to be UGHD.

UGHD's Illegal Acts

31. At the end of March, UGHD became the target of anti-abortion protestors. On information and belief, activists opposed to abortion contacted the hospital and demanded that it revoke Dr. Robinson's admitting privileges and sever any relationship with physicians who provide abortion. On information and belief, the hospital was threatened with an April 1, 2014 protest outside its Dallas facility if it refused to give in to the activists' demands.

32. The day before the threatened protest, March 31, 2014, UGHD did exactly what the protesters had demanded. In a letter from its new CEO, Chuck Schuetz, UGHD informed Dr. Robinson that the hospital had decided to revoke his privileges "based on" the fact that he performs "voluntary interruption of pregnancies" as a regular part of his medical practice. The letter asserted that UGHD's revocation was effective as of March 28, 2014, although Dr. Robinson did not receive the letter until April 2, 2014. A true and correct copy of the March 31 letter from Mr. Schuetz to Dr. Robinson is attached as Exhibit "A" to this petition.

33. UGHD sent an identical letter, also dated March 31, 2014, to Dr. Ahluwalia. In it, Schuetz informed Dr. Ahluwalia that his admitting privileges had been revoked effective March 28, 2014 because he performs "voluntary interruption of

pregnancies” as a regular part of his medical practice. Dr. Ahluwalia did not receive UGHD’s letter until April 3, 2014. A true and correct copy of the March 31 letter from Mr. Schuetz to Dr. Ahluwalia is attached as Exhibit “B” to this petition.

34. There is no legitimate non-discriminatory explanation for UGHD’s revocation of Plaintiffs’ privileges. UGHD’s decision was motivated by the fact that Plaintiffs provide abortion at facilities other than UGHD and/or by UGHD’s discriminatory animus toward abortion and abortion providers.

35. UGHD knew that Plaintiffs provided abortion elsewhere, at the Routh Street Clinic and at Abortion Advantage, and intentionally acted to sever its ties with Plaintiffs and to prevent them from carrying on their clinical practices and providing abortion elsewhere. UGHD would not have revoked Plaintiffs’ gynecological privileges at the hospital at the time UGHD did but for the fact that they provide abortions as part of their medical practices elsewhere.

36. UGHD’s attempts to excuse its unlawful act are patently pretextual. In its letter to each Plaintiff, UGHD points to the lack of abortion services at its own facilities—a lack that is wholly irrelevant to Plaintiffs’ ability or right to provide gynecological procedures, such as the detection and treatment of abscesses, cysts, or cancers. Completely disregarding the nature of Plaintiffs’ privileges, UGHD offers a host of inapt excuses for its decision, including that does not provide abortion services, that “obstetric procedures are not within UGHD’s scope of services” and that UGHD “does not have the capacity to treat complications that may arise from voluntary interruption of pregnancies.” None of that has any bearing on Plaintiffs’ provision of abortions at other

facilities. The privileges that Plaintiffs had at UGHD—and that UGHD revoked—were, with one exception, for gynecological procedures that have nothing to do with abortion.

37. UGHD’s alternative excuse—that Plaintiffs’ “practice of performing these procedures is disruptive to the business and reputation of UGHD and, therefore, violates UGHD’s bylaws as ‘disruptive behavior’ defined therein”—is just another blatant pretext for discrimination. Plaintiffs had privileges at UGHD, but did not need to use them. They had virtually no contact with the hospital, and certainly did not engage in “disruptive behavior,” which by UGHD’s own definition consists of verbal or physical “personal conduct” such as “rude or abusive behavior,” “sexual harassment,” “refusal to accept Medical Staff assignments,” and the like—not the legal (and legally protected) practice of providing medicine at another facility.

38. Plaintiffs are not aware of any similarly qualified physicians who do not perform abortion whose privileges have been revoked by UGHD.

Texas Abortion Laws

39. Texas Occupations Code Chapter 103 is even-handed in dealing with discrimination relating to abortions. It prohibits hospitals from discriminating against physicians who refuse to provide abortions as well as against physicians who do provide them. It states that a hospital “may not discriminate against a physician . . . who *refuses* to perform or participate in an abortion procedure” and that “[a] hospital or health care facility may not discriminate against a physician, nurse, staff member, or employee because of the person’s willingness to participate in an abortion procedure at another facility,” Tex. Occ. Code § 103.002(a) & (b) (emphasis added). The Code provides for

injunctive and monetary relief to remedy discrimination, whether in favor of abortion or against it. *Id.* § 103.003.

40. The Attorney General recently confirmed that Texas Occupations Code section 103.002(b) prohibits discrimination against abortion providers. In his brief to the United States Court of Appeals for the Fifth Circuit defending the requirement that doctors who provide abortions obtain hospital admitting privileges, the Attorney General explained that: “Texas law... ensur[es] that doctors who perform abortions will not encounter discrimination from the hospitals that must decide whether to award them admitting privileges. ***Not only does Texas law expressly prohibit hospitals from discriminating against doctors who perform abortions, it also confers a private right of action on victims of this unlawful discrimination.***” Brief of the Attorney General of the State of Texas, at 33, *Planned Parenthood of Greater Tex. Surgical Health Svcs. v. Abbott*, No. 13-51008 (5th Cir.) (emphasis added). The Fifth Circuit adopted the Attorney General’s statement of Texas law, stressing that section 103.002(b) of the statute “prohibit[s] hospitals from discriminating against physicians who perform abortions when they grant admitting privileges.” *Planned Parenthood of Greater Texas Surgical Health Services v. Abbott*, No. 13-51008, 2014 WL 1257965, at *12 (5th Cir. Mar. 27, 2014).

41. As the Attorney General recognized, Texas’s prohibition of discrimination by hospitals against doctors willing to provide abortion is critical to protect doctors seeking to comply with H.B. 2, which requires a physician performing or inducing an

abortion to have admitting privileges at a hospital no more than thirty miles from the location where the abortion is provided.

Plaintiffs' Injuries

42. UGHD's wrongful termination of Plaintiffs' admitting privileges has caused them to suffer immediate, irreparable, and continuing harm because it has forced each Plaintiff to completely suspend a substantial portion of his medical practice—the provision of abortion services. Neither Dr. Ahluwalia nor Dr. Robinson has admitting privileges at another hospital, and obtaining admitting privileges is a difficult and time-consuming process. Dr. Ahluwalia and Dr. Robinson have had to cancel dozens of appointments each day since receiving UGHD's letter.

43. Since Dr. Ahluwalia is the only full-time physician at the Routh Street Clinic, UGHD's revocation of his privileges has had a drastic impact on the Clinic and its patients as well as on Dr. Ahluwalia personally. The Clinic is relying on part-time assistance from another physician, but that arrangement is only temporary and unsustainable, and in any event is insufficient to prevent the clinic from having to turn patients away. If Dr. Ahluwalia is unable to return immediately to full time work, the Clinic will continue to have a shortage of physicians and will likely be forced to close or substantially curtail its operations. Dr. Ahluwalia and the Clinic will lose not just revenue, but also reputation and standing with patients and among physicians, and his ability to provide care to all of the women who seek services from the Clinic.

44. The revocation of Dr. Robinson's privileges has had a similarly broad and damaging effect on his practice and patients, as well as on Dr. Robinson. Dr. Robinson's

clinic, Abortion Advantage, will likely be forced to close if his privileges are not reinstated. He has had to cancel approximately 80% of the appointments at his practice since receiving UGHD's letter, and it will be exceedingly difficult to maintain funds and staff to continue to operate unless he can return to practice. If Dr. Robinson's privileges are not promptly reinstated, his clinic will likely be forced to lay off staff, shut down or substantially curtail operations, and turn away patients. Such a disruption would be devastating to Dr. Robinson's practice and his ability to resume when the litigation is over.

45. For physicians like Dr. Ahluwalia and Dr. Robinson, the personal and professional consequences of a formal revocation of hospital privileges are severe and incalculable. Revocation has damaged, and will continue to damage, Plaintiffs' standing with their patients and in the medical community, and will impair their ability to maintain and build their practices going forward. Revocation of privileges may also be reportable to the state medical board and in future applications to other clinics and hospitals, further damaging their reputation and limiting their opportunities for practice.

46. UGHD's unlawful actions affect not only the doctors but their patients, who, due to the nature of Plaintiffs' practices, are by definition in time-sensitive situations. While both clinics arranged for coverage, that coverage is partial, temporary and likely unsustainable, and the patients have been deprived of abortion care from the doctor of their choice in the interim. As of April 17, 2014, Dr. Robinson no longer has any coverage at his practice.

47. Patients who would have seen Dr. Robinson or Dr. Ahluwalia will be unable to do so, and will have to seek care from someone else if they wish to proceed—which not only deprives them of treatment by the doctor of their choice, but also may require an additional wait, if rescheduling is possible at all. The scarcity of operating abortion clinics in the state and the strict restrictions on the timing of abortions make seeking care elsewhere particularly burdensome for women in Texas. In short, UGHD’s unlawful revocation has had severe repercussions not just for Plaintiffs, but for their patients as well.

48. Securing admitting privileges at another hospital is not a viable alternative for Plaintiffs, nor is it a remedy for Defendant’s unlawful discrimination. Hospitals in Texas have varying requirements for privileges: some require a certain number of patient admissions each year, some require physicians to reside within a certain distance, other limit privileges to employees or those under contract, while still others require board certification. Determining a hospital’s criteria and finding a match are a difficult and time-consuming process. In addition, once an application for privileges is submitted, hospitals in Texas, by law, have almost half a year (up to 170 days) from the receipt of an application to inform a physician of their decision. *See* Tex. Health & Safety Code § 241.101(k). Even physicians who are well-qualified to provide abortion care and have decades of experience, like Plaintiffs, may be precluded from obtaining privileges at additional hospitals.

49. As a result of Defendant’s conduct in terminating Plaintiffs’ admitting privileges in violation of the Texas Occupational Code, Plaintiffs will suffer immediate

and irreparable harm for which no adequate remedy at law exists, absent a temporary restraining order and temporary injunction. The threatened injury to Plaintiffs' professions and livelihoods outweighs any possible harm to Defendant from the issuance of temporary or permanent injunctive relief.

Cause of Action – Unlawful Discrimination
under Tex. Occ. Code § 103.002(b)

50. Plaintiffs repeat and reallege all of the allegations above.

51. Plaintiffs are physicians licensed to practice medicine in the State of Texas.

52. Plaintiffs were granted admitting and clinical privileges by Defendant UGHD as of January 30, 2014, for Dr. Ahluwalia, and December 10, 2013, for Dr. Robinson.

53. Defendant UGHD wrongfully discriminated against Plaintiffs by revoking their hospital privileges based on the fact that they perform abortion procedures at other facilities.

54. As a result of UGHD's unlawful discrimination, Plaintiffs have suffered irreparable harm to their practices, their relationships, and their standing in the medical community, for which harm there is no adequate remedy at law.

PRAYER FOR RELIEF

Therefore, Plaintiffs respectfully request that Defendant be cited to appear and answer, and that on final hearing, this Court grant:

a. Injunctive relief, including a temporary restraining order and temporary injunction, restraining Defendant and its officers, agents, servants, employees, and attorneys, and those persons in active concert or participation with them who receive actual notice of the orders by personal service or otherwise from further discrimination against Plaintiffs and other abortion providers, ordering the immediate reinstatement of Plaintiffs' admitting privileges at UGHD, and any other relief necessary to ensure compliance with Chapter 103 of the Texas Occupations Code; and

b. All other relief to which Plaintiffs are entitled.

Respectfully Submitted,

DEBEVOISE & PLIMPTON LLP



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VERIFICATION

STATE OF TEXAS *

COUNTY OF DALLAS *

BEFORE ME, the undersigned notary public in and for the State of Texas, personally appeared on this date Dr. Lamar Robinson, the Affiant, a person whose identity is known to me, and after being duly sworn, deposed and stated the following:

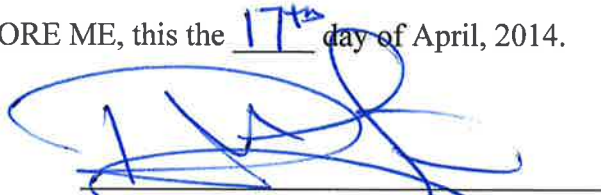
“My name is Lamar Robinson. I am a licensed physician and a plaintiff in the above-styled and captioned lawsuit. I am over the age of eighteen years and am not under or subject to any court-imposed disability. I am capable of making this verification. I have read the above and foregoing Plaintiffs’ Original Verified Petition and Application for Injunctive Relief. All matters set forth in paragraphs 4, 5, 7, 8, 10, 23–30, 32, 38, 42, 44–49, and 51–54 are within my personal knowledge as they pertain to me and are true and correct. The attached Exhibit A is a true and correct copy of the original as stated in this petition.”



Dr. Lamar Robinson

SUBSCRIBED and SWORN TO BEFORE ME, this the 17th day of April, 2014.





Notary Public, State of Texas

VERIFICATION

STATE OF TEXAS *

COUNTY OF DALLAS *

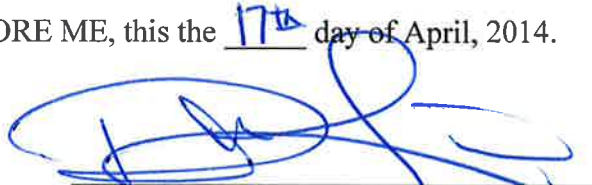
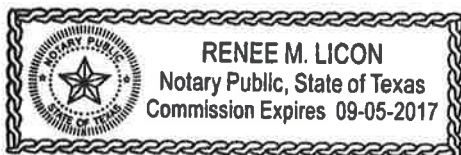
BEFORE ME, the undersigned notary public in and for the State of Texas, personally appeared on this date Dr. Jasbir Ahluwalia, the Affiant, a person whose identity is known to me, and after being duly sworn, deposed and stated the following:

“My name is Jasbir Ahluwalia. I am a licensed physician and a plaintiff in the above-styled and captioned lawsuit. I am over the age of eighteen years and am not under or subject to any court-imposed disability. I am capable of making this verification. I have read the above and foregoing Plaintiffs’ Original Verified Petition and Application for Injunctive Relief. All matters set forth in paragraphs 4, 5, 7–9, 14–22, 33, 38, 42–43, 45–49, and 51–54 are within my personal knowledge as they pertain to me and are true and correct. The attached Exhibit B is a true and correct copy of the original as stated in this petition.”



Dr. Jasbir Ahluwalia

SUBSCRIBED and SWORN TO BEFORE ME, this the 17th day of April, 2014.


Notary Public, State of Texas

LOCAL RULE 2.02 CERTIFICATE

In accordance with Dallas County Local Rule 2.02, I hereby certify that I notified Defendant of Plaintiffs' Original Verified Petition and Application for Temporary Restraining Order, Temporary Injunction, and Other Relief and the proposed Temporary Restraining Order at least two hours before presenting the Petition and Order to the Court for decision.

I further represent that, to the best of my knowledge, the case in which this application is presented is not subject to transfer under Local Rule 1.06.


Kaitlin T. Farrell

Exhibit A



UNIVERSITY
GENERAL
HOSPITAL
DALLAS

March 31, 2014

Lamar Robinson, MD
1929 Record Crossing Road
Dallas, TX 75235

Certified Mail #: 7108 2133 3937 1610 3008

Dear Dr. Robinson:

Your privileges have been revoked at University General Hospital Dallas (“UGHD”) by the Medical Executive Committee effective March 28, 2014 based on the following:

It has come to our attention that you perform “voluntary interruption of pregnancies” as a regular part of your medical practice. As a matter of policy, UGHD does not perform these procedures due to the fact that obstetric procedures are not within UGHD’s scope of services and that UGHD does not have the capacity to treat complications that may arise from voluntary interruption of pregnancies.

In addition, UGHD has determined that your practice of performing these procedures is disruptive to the business and reputation of UGHD and, therefore, violates UGHD’s bylaws as “disruptive behavior” as defined therein. Specifically, Article I, section 1.2 of the Bylaws of the Medical Staff of UGHD states the following:

“Disruptive Behavior: Personal conduct, whether verbal or physical, that adversely impacts, or potentially may impact, the operation of the Hospital, adversely affects, or potentially may affect, the ability of others to get their jobs done, creates a “hostile work environment” for Hospital employees or other individuals working in the Hospital, or begins to interfere with the disruptive individual’s own ability to practice competently. Such conduct may include rude or abusive behavior or comments to staff members or patients; negative comments to patients about other physicians, nurses, or other staff or about their treatment in the Hospital; threats or physical assaults; sexual harassment; refusal to accept Medical Staff assignments; disruption of committee or departmental affairs; inappropriate comments written in patient medical records or other official documents; behavior that increase the probability of malpractice, or other tort or regulatory liability exposure, damages the reputation of the Hospital and its medical staff, and causes a disproportionate expenditure of time, resources, and money.”

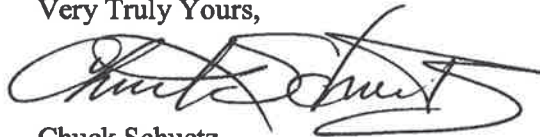
Your practice of voluntary interruption of pregnancies violates this provision of UGHD’s bylaws because, among other things, the practice creates significant exposure and damages to UGHD’s

reputation within the community. UGHD cannot afford to defend your privileges in light of this practice. In addition, your membership on UGHD's medical staff also increases the probability of malpractice and the resulting liability exposure because UGHD is unable to treat complications from these procedures.

This action must be taken to limit the liability and exposure of UGHD resulting from the association your practice has with "voluntary interruptions of pregnancies".

We regret the necessity of this action but deem it necessary and in the best interest of UGHD.

Very Truly Yours,

A handwritten signature in black ink, appearing to read "Chuck Schuetz", written in a cursive style.

Chuck Schuetz
Chief Executive Officer

Exhibit B



UNIVERSITY
GENERAL
HOSPITAL
DALLAS

March 31, 2014

Jasbir Ahluwalia, MD
P.O. Box 1297
Stephenville, TX 76401

Certified Mail #: 7108 2133 3937 1610 2995

Dear Dr. Ahluwalia:

Your privileges have been revoked at University General Hospital Dallas (“UGHD”) by the Medical Executive Committee effective March 28, 2014 based on the following:

It has come to our attention that you perform “voluntary interruption of pregnancies” as a regular part of your medical practice. As a matter of policy, UGHD does not perform these procedures due to the fact that obstetric procedures are not within UGHD’s scope of services and that UGHD does not have the capacity to treat complications that may arise from voluntary interruption of pregnancies.

In addition, UGHD has determined that your practice of performing these procedures is disruptive to the business and reputation of UGHD and, therefore, violates UGHD’s bylaws as “disruptive behavior” as defined therein. Specifically, Article I, section 1.2 of the Bylaws of the Medical Staff of UGHD states the following:

“Disruptive Behavior: Personal conduct, whether verbal or physical, that adversely impacts, or potentially may impact, the operation of the Hospital, adversely affects, or potentially may affect, the ability of others to get their jobs done, creates a “hostile work environment” for Hospital employees or other individuals working in the Hospital, or begins to interfere with the disruptive individual’s own ability to practice competently. Such conduct may include rude or abusive behavior or comments to staff members or patients; negative comments to patients about other physicians, nurses, or other staff or about their treatment in the Hospital; threats or physical assaults; sexual harassment; refusal to accept Medical Staff assignments; disruption of committee or departmental affairs; inappropriate comments written in patient medical records or other official documents; behavior that increase the probability of malpractice, or other tort or regulatory liability exposure, damages the reputation of the Hospital and its medical staff, and causes a disproportionate expenditure of time, resources, and money.”

Your practice of voluntary interruption of pregnancies violates this provision of UGHD’s bylaws because, among other things, the practice creates significant exposure and damages to UGHD’s

reputation within the community. UGHD cannot afford to defend your privileges in light of this practice. In addition, your membership on UGHD's medical staff also increases the probability of malpractice and the resulting liability exposure because UGHD is unable to treat complications from these procedures.

This action must be taken to limit the liability and exposure of UGHD resulting from the association your practice has with "voluntary interruptions of pregnancies".

We regret the necessity of this action but deem it necessary and in the best interest of UGHD.

Very Truly Yours,

A handwritten signature in black ink, appearing to read "Chuck Schuetz", written over a horizontal line.

Chuck Schuetz
Chief Executive Officer