

**REQUEST FOR ADJUDICATION  
COMPLEX LITIGATION DOCKET (CLD)**

JD-CL-77 Rev. 4-13

**STATE OF CONNECTICUT  
JUDICIAL BRANCH**  
www.jud.ct.gov

For Court Use Only

**RADJCLD**



**INSTRUCTIONS**

1. Fill out a form for each motion or objection (or request) that you want decided.
2. File in the CLD location where the case is assigned.
3. In all cases that require e-filing, Requests For Adjudication shall be e-filed and the filer must select "Request for Adjudication Complex Litigation" when naming the form in e-filing.

The Court will **only** act on or schedule a motion or objection (or request) if a *Request for Adjudication* form is filed. A Request for Adjudication form should be filed **after** the time for filing a response to the motion or objection has passed (unless the matter needs immediate action or the parties agree, in which case it may be filed before the time for filing a response has passed).

Judicial District of <b>Waterbury</b>	Name of case <b>Robin Sherwood et al. v. Stamford Health System</b>	Docket number <b>UWY-CV-14-6025333S</b>
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Title of motion or objection that you want decided <b>Caseflow Request</b>	Date of motion or objection <b>03/17/2016</b>	Motion or objection entry number <b>138.00</b>
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Print the name of the party filing this request  
**Simon I. Allentuch**

- |   |                                     |                                     |
|---|-------------------------------------|-------------------------------------|
|   | Yes                                 | No                                  |
| 1. May the motion or objection be granted or sustained by agreement or consent?.....  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 2. Has opposing counsel or self-represented party already filed a response to the motion or objection?.....   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <i>If yes, provide the date of the response: _____ and entry number: _____</i>  |                                     |                                     |
| <i>If no, indicate the agreed date, if any, when the response will be filed: _____</i>  |                                     |                                     |
| 3. Is oral argument requested? .....  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 4. Is testimony required?.....  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <i>If yes, how much time will be needed: _____</i>  |                                     |                                     |
| 5. Does the matter need immediate action? .....   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <i>If yes, explain why it is necessary. A telephonic conference may be requested for matters that need immediate action. Like the Lemay case, defendants have had some trouble obtaining medical records and discovery responses. Trial is scheduled for approximately 9 months from now and very little discovery has been completed. In addition, Ethicon and AMS are now parties and this has further complicated the case. The defendants would therefore like a status conference to set a new scheduling order and move the trial date. Counsel will file a proposed new schedule with the Court.</i> |                                     |                                     |
| 6. Are there any other motions or pleadings directly related to the Court's consideration of the motion or objection? .....   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <i>If yes, give the title, date and entry number of the motion(s) or pleading(s):</i>   |                                     |                                     |

**Certification**

I certify that a copy of this document was mailed or delivered electronically or non-electronically on (date) 03/29/2016 to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery.

Name and address of each party and attorney that copy was mailed or delivered to\*  
**See attached certification**

Signed (Individual attorney or self-represented party)

▶ /s/ Simon I. Allentuch

Print or type name of person signing

**Simon I. Allentuch**

\* If necessary, attach additional sheet or sheets with the name and address the copy was mailed or delivered to.

<b>(For Court Use Only)</b>	File date
Response filed by (date): _____ Reply briefs filed by (date) : _____	
Argument to be held on (date): _____	
For Office use:	
Complete : _____ Withdrawn on (date) : _____	

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact the court clerk of the Judicial District above. [www.jud.ct.gov/ADA/](http://www.jud.ct.gov/ADA/)

**Print Form**

**Reset Form**

**CERTIFICATION**

This is to certify that a copy of the foregoing was sent electronically, this 29<sup>th</sup> day of

March, 2016 to the following counsel of record:

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**/s/ Simon I. Allentuch**  
Simon I. Allentuch  
Neubert, Pepe & Monteith, P.C.