

1 these gunshot wounds, can you say the location or the  
2 orientation of the body with respect to where it was in  
3 space at the time that the shooting occurred?

4 A. No. As we discussed, there's no way that I can  
5 tell the positioning of the body at the time a bullet  
6 hits it. Somebody can be standing up, leaning forward,  
7 leaning backward, sideways, upside down. I can't tell.

8 MS. HARVEY: Pass the witness.

9 THE COURT: Mr. Varela.

10 MR. VARELA: No more questions, Your Honor.

11 THE COURT: May this witness be excused?

12 MS. HARVEY: Yes, Your Honor.

13 THE COURT: Thank you, Doctor. You may  
14 step down.

15 Call your next witness.

16 MS. HARVEY: State calls Lori Bradley.

17 THE COURT: You were sworn earlier; is that  
18 correct?

19 THE WITNESS: Yes, ma'am.

20 THE COURT: Okay. You may proceed.

21 MS. HARVEY: Thank you, Your Honor.

22 **LORI CUMMINGS,**

23 having been first duly sworn, testified as follows:

24 **DIRECT EXAMINATION**

25 **BY MS. HARVEY:**

1 Q. Would you tell the jury what your name is?

2 A. Lori Cummings.

3 Q. And did you formerly have a different name?

4 A. Yes, ma'am. It was Lori Bradley.

5 Q. Were you recently married?

6 A. Recently divorced.

7 Q. Recently divorced?

8 A. But --

9 Q. Congratulations on the name change.

10 And how are you currently employed?

11 A. I'm a medical forensic -- sorry. Forensic  
12 nurse examiner with Memorial Hermann.

13 Q. How long have you been a forensic nurse  
14 examiner with Memorial Hermann?

15 A. Three years.

16 Q. And what does a forensic nurse examiner do?

17 A. We are specially trained registered nurses to  
18 provide comprehensive care to sexual assault patients.

19 Q. What kind of educational background do you  
20 have?

21 A. I have my associate's degree in nursing from  
22 Houston Community College. I am licensed as a  
23 registered nurse with the Texas Board of Nursing. I  
24 have -- I'm verified as a trauma nurse core course  
25 provider with the Emergency Nurses Association. And I'm

1 certified as an adult and pediatric sexual assault nurse  
2 examiner with the Office of the Attorney General of  
3 Texas.

4 Q. Back on March 20th of 2011, were you employed  
5 as a forensic nurse examiner?

6 A. Yes, ma'am.

7 Q. And is there a shorthand term that we use for  
8 your job?

9 A. We're also referred to as sexual assault nurse  
10 examiners or a SANE nurse.

11 Q. So, back on March 20th of 2011, did you have  
12 occasion to come into contact with the defendant, Jackie  
13 Dinanno?

14 A. Yes, ma'am.

15 Q. Do you see her here in the courtroom today?

16 A. Yes, ma'am.

17 Q. Would you identify her -- point to her and  
18 identify an item of clothing that she's wearing?

19 A. The black sweater, the lady in the black  
20 sweater.

21 MS. HARVEY: May the record reflect the  
22 witness has identified the defendant?

23 THE COURT: The record will so reflect.

24 Q. (By Ms. Harvey) Now, for what purpose was the  
25 defendant brought to you?

1           A.    To -- I was to see her to perform a medical  
2 forensic exam.

3           Q.    And what was her emotional state?

4           A.    She was crying.

5           Q.    How normally would a sexual assault exam -- how  
6 would that proceed?

7           A.    I'm called out to take care of the patient.  I  
8 introduce myself.  I explain the exam.  I obtain her  
9 consent to care for her.  I obtain a history from her to  
10 find out what happened.  We do a head-to-toe assessment  
11 looking for injury.  We do a genital exam and we collect  
12 evidence throughout the exam.

13          Q.    How long does a proper sexual assault  
14 examination take?

15          A.    It's normally about three hours.

16          Q.    So, back in March of 2011 when you came into  
17 contact with this defendant, how did that sex assault  
18 exam proceed?  Did you -- did you do step one, introduce  
19 yourself?

20          A.    Yes, I did.

21          Q.    And how were you received?

22          A.    She was emotional and crying.

23          Q.    Did you obtain her consent to do an exam?

24          A.    I did.

25          Q.    And then were you allowed to actually examine

1 her?

2 A. We obtained the history. And during the  
3 physical head-to-toe exam, she declined.

4 Q. Now, what history did you obtain from the  
5 defendant?

6 A. Can I see the records, my records?

7 (Documents tendered to witness)

8 A. Thank you.

9 The patient states: I heard bang, bang,  
10 bang, bang. I said "Joe" -- my husband -- and walked  
11 down the hallway. I went into his bedroom and then  
12 looked in his bathroom and he was laying on the floor  
13 and he was bleeding. And then a man grabbed me and  
14 threw me on the carpet. He started taking my clothes  
15 off and I told him: I can't have sex. And he said:  
16 Shut up, bitch. You can have sex with my knife. And I  
17 looked over and I could see my husband's face. He  
18 picked up the gun and told me to get in the bath and  
19 threw the clothes in with me and he started pouring the  
20 soap everywhere. And he said: Put your head under the  
21 water. I put my head under the water and he put shampoo  
22 on my head and I had to step out over my husband without  
23 a towel. He made me get on the bed. He made me walk to  
24 the bed naked and lay down. My dogs were barking, going  
25 crazy. He then ran out the back door.

1 Q. (By Ms. Harvey) Now, after you obtained that  
2 history, did you become concerned that the defendant  
3 might have some sort of injury?

4 A. Yes, ma'am.

5 Q. And what kind of injury were you expecting to  
6 find?

7 A. During the head-to-toe assessment, especially  
8 since she said that she had -- the man had a knife, we  
9 were looking for any injury.

10 Q. I'm going to show you a couple of pictures. I  
11 want to show you what's already been admitted into  
12 evidence as State's Exhibits 7 and 8. Do you recognize  
13 those (indicating)?

14 A. No, ma'am.

15 Q. You didn't --

16 A. Did I take these pictures?

17 Q. No, no, no. Not did you take them. Do they  
18 accurately reflect the injuries that the complainant had  
19 on -- or that the defendant had on that day?

20 A. I did not see those injuries.

21 Q. Okay. Did she allow you to look at her -- at  
22 her body at all?

23 A. No, ma'am.

24 Q. Not even to the extent to look at her arms?

25 A. No, ma'am.

1 Q. Would she allow you to look at any part of her?

2 A. No, ma'am.

3 Q. What was her demeanor towards you during --  
4 during the attempt at the exam?

5 A. She was crying and she wanted to leave.

6 Q. In terms of being sexually assaulted with a  
7 knife, what kinds of injuries might you expect to see?

8 A. I could see abrasions or tears or cuts.

9 Q. Did you want to examine the defendant in order  
10 to see if those sorts of things existed?

11 A. Yes, ma'am.

12 Q. Is that how the -- is that how the exam  
13 terminated?

14 A. Yes, ma'am. She declined the physical exam,  
15 the genital exam, and any evidence collection after I  
16 had collected a couple of other items.

17 Q. And what items did you collect?

18 A. A swab of -- we call it a buccal swab, inside  
19 her mouth, and swabs of her fingernails and clippings  
20 from her fingernails.

21 Q. After those couple of items were collected and  
22 the -- the exam was terminated, did she come back for  
23 additional -- an additional examination?

24 A. Yes, ma'am.

25 Q. And how long was it between the termination of

1 the first examination and the beginning of the second  
2 examination?

3 A. Five, ten minutes.

4 Q. When she came back, how did that examination  
5 proceed?

6 A. She came into our room, the exam room. She  
7 went into the restroom and she sat down and she had  
8 pulled her clothes down. And I, once again, asked her,  
9 you know, can I see to make sure you're okay, I'd like  
10 to see if you have any injuries. And she allowed me a  
11 brief visualization of her genital area.

12 Q. And when you say she allowed you a brief  
13 visualization, how long did she allow you to look at her  
14 genital area?

15 A. At the most, maybe five seconds.

16 Q. And am I understanding you correctly, this is  
17 while she's seated on the commode?

18 A. Yes.

19 Q. Did she allow you to touch her in any way?

20 A. No, ma'am.

21 Q. What injuries, if any, were you able to  
22 visualize?

23 A. She had an abrasion on her labia minora at four  
24 o'clock. It was a 0.5 centimeter. And she also had  
25 multiple linear acute red abrasions from 3 to 6



1 centimeters on both of her inner thighs.

2 Q. And when we're talking about linear abrasions  
3 on her inner thighs, can you describe what type of an  
4 injury an abrasion is, what that looks like?

5 A. It's the -- basically, it's from friction and  
6 it's the rubbing off of the top layer of the tissue.  
7 You might know it as a scratch.

8 Q. So, she had some scratches to her inner thighs?

9 A. Yes.

10 Q. As part of your exam -- let me ask you this.  
11 Are those the notes from your exam?

12 A. Yes, ma'am.

13 Q. Do you make those notes personally?

14 A. Yes, I do.

15 Q. Do you do it at -- with personal knowledge of  
16 the exam and what went on in the exam?

17 A. Yes, ma'am.

18 Q. Are those records then kept by the hospital in  
19 the regular course of business?

20 A. No, ma'am. We keep these, actually, in our  
21 office.

22 Q. Okay. So, are they kept by your office then --

23 A. Yes.

24 Q. -- in the regular course of business?

25 A. Yes, ma'am.

1 Q. And are they made at or near the time of the  
2 exam?

3 A. Yes, ma'am.

4 MS. HARVEY: I am going to mark these  
5 State's Exhibit 109 and tender to opposing counsel.

6 **(State's Exhibit No. 109 Offered)**

7 MR. VARELA: No objection to 109.

8 THE COURT: It will be admitted.

9 **(State's Exhibit No. 109 Admitted)**

10 Q. (By Ms. Harvey) Now, as part of your exam, do  
11 you do a diagram?

12 A. Yes, ma'am.

13 Q. And in this particular instance, did you  
14 diagram some of the injuries?

15 A. Yes, ma'am.

16 Q. And as we're looking at your diagram here in  
17 State's 109, can you orient the jury and explain to them  
18 what we're looking at (indicating)?

19 A. If the patient was laying on her back with her  
20 legs up like as in child birth, you see -- I don't know  
21 if you can. Going out to in, you'll see her thighs, her  
22 labia majora, the labia minora. At the top you'll see  
23 the urethra where you pee from. At the bottom, you'll  
24 see your anus where you poop from. And then directly  
25 under that urethra would be your hymen.

1 Q. And you've noted here some diagonal notations.

2 And what are those diagonal --

3 A. Those --

4 Q. -- representations?

5 A. I apologize.

6 Those are the linear abrasions on her  
7 thighs.

8 Q. And in terms of you made one other note of a  
9 small injury. And can you describe for the jury what  
10 that injury was?

11 A. That is an acute red abrasion on her labia  
12 minora.

13 Q. And what -- what would an acute red abrasion  
14 consist of?

15 A. It's the layer -- the skin has been rubbed off  
16 with friction.

17 Q. Did any of her injuries seem severe?

18 A. Well, they were bleeding.

19 Q. They were bleeding?

20 A. There was a little bit of blood, yes.

21 Q. Okay. I want to refer your attention back to  
22 State's Exhibits 7 and 8. And I know you said she  
23 wouldn't let you look at her arms, but if you could  
24 compare the injuries that you see on her arms there to  
25 the injuries that you see -- or that you saw as part of

1 the exam. Were they the same or similar?

2 A. Yes.

3 Q. Now, when you say that they were bleeding, do  
4 you mean that they were actively bleeding or that you  
5 could see that they were scabbing over like these are?

6 A. I can't tell those just by that, but on mine  
7 they were not actively bleeding.

8 Q. Okay. Now, as a SANE nurse, do you see folks  
9 infrequently or frequently who have undergone a sexual  
10 assault?

11 A. Frequently.

12 Q. And do you also see them exhibit a range of  
13 emotion?

14 A. I do.

15 Q. Did this defendant's presentation seem out of  
16 the ordinary for what you were accustomed to?

17 A. It was uncommon.

18 Q. And can you explain to the jury why her  
19 presentation was uncommon?

20 A. A lot of times the patients that I see just  
21 have -- are not as emotional and usually will accept and  
22 follow through with the exam.

23 Q. Did you find it unusual that she wouldn't  
24 follow through with the exam at all?

25 A. I did.

1 Q. How normally would you visualize someone's  
2 genitalia after a sexual assault?

3 A. As I explained earlier, with her laying on her  
4 back with the legs up on the bed so that we could get a  
5 good visualization.

6 Q. And is that how you were allowed to conduct the  
7 visualization in this case?

8 A. No, ma'am.

9 MS. HARVEY: Pass the witness.

10 THE COURT: Mr. Varela.

11 **CROSS-EXAMINATION**

12 **BY MR. VARELA:**

13 Q. Ms. -- you're not Bradley anymore. What is  
14 your name? I'm sorry.

15 A. Cummings.

16 Q. Cummings?

17 A. Yes.

18 Q. All right. Ms. Cummings, following up with  
19 what the prosecutor was talking about, again, you've  
20 seen a number of emotional reactions to people who have  
21 been sexually assaulted, correct?

22 A. Yes, sir.

23 Q. Some of those people are hysterical?

24 A. Yes, sir.

25 Q. Some of them are irrational?

1 A. Yes, sir.

2 Q. Some of them are quite calm and rational,  
3 correct?

4 A. Yes, sir.

5 Q. Some of them -- well, that's just to be  
6 expected, isn't it, from that sort of traumatic event?

7 A. Yes, sir.

8 Q. And there's no way to predict in advance how a  
9 person is going to react to some situation like that,  
10 right?

11 A. No, sir.

12 Q. Some people actually resist examining, right?

13 A. It's uncommon, but, yes.

14 Q. I guess from their standpoint it might be  
15 viewed as one more insult to their person, correct?

16 A. I would imagine, yes.

17 Q. Okay. And part of your training takes that  
18 into account, right?

19 A. Correct.

20 Q. Who was present during this exam?

21 A. Myself and the patient.

22 Q. And that's it?

23 A. Yes, sir.

24 Q. There's no doctor present or anything like  
25 that?

1 A. No, sir.

2 Q. No other witness is present?

3 A. No, sir.

4 Q. So, anything that's in your report is your own  
5 personal knowledge recorded by your own personal notes,  
6 correct?

7 A. Yes, sir.

8 Q. Was she ever examined by a Memorial Hospital  
9 doctor?

10 A. Yes, sir.

11 Q. But that wouldn't be reflected in your report,  
12 would it?

13 A. No, sir.

14 Q. Let's talk about 109. Let's look at the page  
15 that contains some diagrams that you've already -- I  
16 think you've already discussed those during the direct  
17 examination. Is that oriented correctly or do I need to  
18 turn it upside down? Yeah. Let's talk about that.

19 Here we've got indications on the labia  
20 minora of a fresh abrasion, correct (indicating)?

21 A. Yes, sir.

22 Q. And that was a recently-bleeding abrasion, in  
23 fact, correct?

24 A. Yes, sir.

25 Q. Let me talk about the labia.

1 A. Okay.

2 Q. Let's talk about that. And I want you to  
3 correct me if my description is inaccurate. There are  
4 two sets of labia, correct?

5 A. Yes, sir.

6 Q. There's the outer labia, which is a larger  
7 structure?

8 A. Yes, sir.

9 Q. And then there is the inner labia, the labia  
10 minora is the inner labia, correct?

11 A. Yes, sir.

12 Q. And that's a much more delicate set of tissues?

13 A. Yes, sir.

14 Q. And those are actually kind of up inside to an  
15 extent, correct?

16 A. Yes, sir.

17 Q. So, if you're just looking at it head-on, you  
18 don't see the labia minora ordinarily, correct? If you  
19 just look at a normal person in a normal posture, you  
20 wouldn't see the labia minora?

21 A. Correct.

22 Q. That would actually have to be exposed for  
23 examination?

24 A. Correct.

25 Q. In other words, if I were a woman and I were



1 standing, you wouldn't be able to see my labia minora  
2 ordinarily?

3 A. Correct.

4 Q. And so, if damage is going to be done -- direct  
5 your attention to your diagram. May I borrow this from  
6 you, please?

7 If damage is going to be done to the inside  
8 of the labia minora, something has to go up in there,  
9 correct?

10 A. Yes, sir.

11 Q. Some sort of object?

12 A. Yes, sir.

13 Q. Okay. You can't tell by looking what kind of  
14 object did that damage to Ms. Dinanno, can you?

15 A. No, sir.

16 Q. All you know is there was some damage to the  
17 inside?

18 A. Yes, sir.

19 Q. During the normal examination, it's common for  
20 you to touch that area of the body, correct, to  
21 facilitate observation, right?

22 A. Yes, sir.

23 Q. It's really hard to do an exam if you don't do  
24 that?

25 A. Correct.

1 Q. All right. And if the patient refuses to let  
2 you touch her, you can't do a full examination?

3 A. Correct.

4 Q. But you were able to see with the naked eye  
5 this abrasion to the inside of the labia minora, right?

6 A. Yes, sir.

7 Q. Now, you testified on direct, Nurse Cummings,  
8 that if a person were attacked in that area with a knife  
9 blade, you could see -- you could anticipate several  
10 types of injuries, correct?

11 A. Yes, sir.

12 Q. And you testified that one of those was an  
13 abrasion?

14 A. Yes, sir.

15 Q. So, the damage to the labia minora in this  
16 diagram with Ms. Dinanno is, to an extent, consistent  
17 with the events she described, isn't it?

18 A. Yes, sir.

19 MR. VARELA: Pass the witness.

20 THE COURT: Ms. Harvey.

21 **REDIRECT EXAMINATION**

22 **BY MS. HARVEY:**

23 Q. In terms of -- you talked about these injuries  
24 as having been recently bleeding. To -- how much  
25 blood -- how much blood was it that would have been

1 coming from these injuries?

2 A. I don't know.

3 Q. Were they slicing type wounds?

4 A. No, ma'am.

5 Q. Did they damage more than just the top layer of  
6 skin?

7 A. I couldn't tell.

8 Q. Based on what you could see -- and you've  
9 described them as abrasions, yes?

10 A. Yes.

11 Q. And you've described that as just the top layer  
12 of skin being rubbed off, correct?

13 A. Correct.

14 Q. If someone were genuinely raped with a knife,  
15 would you not expect to see injuries more severe than  
16 what you're seeing here?

17 A. I would think so.

18 MS. HARVEY: Pass the witness.

19 THE COURT: Mr. Varela.

20 MR. VARELA: No further questions, Your  
21 Honor.

22 THE COURT: May this witness be excused?

23 MS. HARVEY: Yes, Your Honor.

24 THE COURT: Thank you, ma'am. You may step  
25 down.

1 THE WITNESS: Thank you.

2 THE COURT: Call your next witness.

3 MS. HARVEY: State calls Deputy Glover.

4 THE BAILIFF: This witness has not been  
5 sworn, Judge.

6 (Witness sworn)

7 THE COURT: You may be seated.

8 THE WITNESS: Thank you, ma'am.

9 THE COURT: You may proceed.

10 MS. HARVEY: Thank you, Your Honor.

11 **ROY GLOVER,**

12 having been first duly sworn, testified as follows:

13 **DIRECT EXAMINATION**

14 **BY MS. HARVEY:**

15 Q. Would you tell the jury what your name is?

16 A. My first name is Roy. My last name is Glover.

17 Q. Are you currently employed?

18 A. Yes.

19 Q. How are you employed?

20 A. I'm employed with the Harris County Sheriff's  
21 Office as a sheriff's deputy.

22 Q. How long have you been a sheriff's deputy with  
23 the Harris County Sheriff's Department?

24 A. Fifteen years.

25 Q. What are your current duties?