

IN THE CIRCUIT COURT FOR PINELLAS COUNTY, FLORIDA
21-01099-CF
SECTION M

STATE OF FLORIDA

Vs.

CORNELIUS TREVON WHITFIELD Person ID: 1566510,
Defendant.

DEPOSITION OF TROY BARTOW

Taken on Behalf of the Defendant

DATE: March 18, 2025

TIME: 9:11 a.m. to 9:25 a.m.

PLACE: Pinellas County Justice Center
14250 49th Street North
Clearwater, Florida 33762

Examination of the witness taken before:

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1 P R O C E E D I N G S

2 THE REPORTER: Okay. We are on the record.

3 Today is March 18th, 2025, and the time is 9:11 a.m.

4 Mr. Bartow, please raise your right hand.

5 THEREUPON,

6 TROY BARTOW

7 was called as a witness and after having been first

8 duly sworn, was deposed and testified as follows:

9 MS. SEIFER-SMITH: Oh, I think you're on
10 mute, sir.

11 THE REPORTER: Oh, I think you're on mute.

12 THE WITNESS: Yes.

13 THE REPORTER: Thank you. You may begin.

14 BY MS. SEIFER-SMITH:

15 Q. Can you please state your name for the record?

16 A. My name is Troy Bartow.

17 Q. All right. We're here in the matter of
18 Cornelius Whitfield. My name is Julia Seifer-Smith.
19 I'm here together with Lamark McGreen and Margaret
20 Russell. We're assistant public defenders, and we
21 represent Mr. Whitfield. Also signed on to this ZOOM
22 call for the ZOOM deposition is Thomas Koskinas from
23 the State Attorney's Office.

24 Mr. Bartow, before being sworn in for the
25 deposition, was there anything that you reviewed in

1 connection with your involvement in this case in
2 preparation for the deposition?

3 A. I'm sorry. Could you repeat that?

4 Q. Sure. I know it's very early where you are.

5 A. Oh, yeah. Just a little bit.

6 Q. And we really appreciate you making yourself
7 available this morning. Was there anything that you
8 reviewed --

9 A. Yeah.

10 Q. -- to prepare yourself for the deposition in
11 this case?

12 A. Anything I reviewed?

13 Q. Yeah. Did you review any documents, any
14 photographs, records, what have you?

15 A. No, just -- just the PCR that I provided for
16 time of care for that patient.

17 Q. Okay. A PCR, is that a Patient Care Report?

18 A. Yes.

19 Q. Okay. And that was something that was done in
20 connection with, like, Pinellas County Emergency
21 Services?

22 A. Yes.

23 Q. Okay. Do you know if that was a document that
24 you yourself authored when you were, like, actually
25 involved in this case?

1 A. For the Sunstar side, yes.

2 Q. Okay.

3 A. I provided that report.

4 Q. Okay. And having reviewed that document, did
5 that jog your memory as to your involvement?

6 A. To a degree. I'll be honest, it was four
7 years ago.

8 Q. No, that's okay.

9 A. I barely -- I remember that night. I barely
10 remember exactly what happened on that call, as well as
11 all the other calls I had that night, but I do vaguely
12 remember that night.

13 Q. Okay. Before we get into that, can you just
14 give me a little bit of background about, like,
15 yourself in terms of, like, your profession; what your
16 job was in February 2, 2021; who you worked for, like
17 that kind of thing.

18 A. I worked as a paramedic for Sunstar
19 Paramedics. I was a new medic around then. I'd been
20 practicing for probably about a month at that point,
21 but I've had four years prior experience as an EMT for
22 Pinellas County at Sunstar Paramedics as well.

23 Q. Okay. Since you were new --

24 A. I --

25 Q. Oh, I'm sorry. Go ahead.

1 A. No, that's pretty much it, just working in
2 EMS, emergency medical services.

3 Q. Okay. Since you were new to that particular
4 role, did you have any particular responsibilities?

5 A. Yes. I mean, to stabilize any critical
6 patients on 911 calls, anywhere from gunshot wounds
7 to -- to septic patients to the sick and infirm, and
8 provide -- provide the highest quality of advanced life
9 support that I can.

10 Q. Okay. And it looks like this particular
11 report indicates that you completed it. Is that right?

12 A. Yes.

13 Q. Okay. Is there anything that you're -- like,
14 are there certain standards or certain things that you
15 have to put into a report?

16 A. Just what the call was about, what I found
17 medical-wise with the patient and how I treated them,
18 and that is just about it.

19 Q. Okay. So can you tell me now, like, what you
20 remember from this call? Because you said that you
21 remembered a little bit, but maybe not everything.

22 A. I don't remember a whole lot. I vaguely -- I
23 believe these were at apartments, and I think I
24 remember the apartments, but I don't remember any
25 specific outstanding things or anything profound.

1 Q. Okay. So I want to just kind of walk through
2 your report just a little bit. It looks like you were
3 working with at least one other person. Jonathan
4 Schultheiss. I'm probably mispronouncing that.

5 MS. SEIFER-SMITH: Okay. And for our
6 reporter, that's S-C-H-U-L-T-H-E-I-S-S. Jonathan is
7 the normal spelling.

8 BY MS. SEIFER-SMITH:

9 Q. So you were, like, a two-man crew that night?

10 A. Yes.

11 Q. Okay.

12 A. Yes. It's typically a -- it's typically a
13 paramedic and an EMT --

14 Q. Okay.

15 A. -- team.

16 Q. And do you remember -- do you remember, like,
17 if you'd gotten any kind of information about the type
18 of call before you actually arrived at the apartment
19 complex?

20 A. Nothing too specific, just notes indicating
21 that there was a weapon or possibly shots fired. So we
22 usually stage on those types of calls before the scene
23 is cleared by PD --

24 Q. Okay.

25 A. -- or law enforcement.

1 Q. So when you say "stage," does that mean you
2 kind of like wait outside a certain area until PD --
3 like, the police tell you that you can enter?

4 A. Yes.

5 Q. Okay. And so when you did actually enter the
6 scene, do you remember what you observed at that point?

7 A. I do not remember.

8 Q. Okay. So just in looking at your narrative
9 section, it looks as though you come in after scene
10 safety was established and that the police told you
11 that they found the person who needed care next to
12 another person who was shot, who was past care.

13 A. Um-hum.

14 Q. And because there's kind of the active verb of
15 "helping," it sounds as though the police were actually
16 helping the patient that needed care sit up when you
17 arrived. Does that seem about right based on your
18 recollection and how you wrote the report?

19 A. I'm sorry. Could you repeat that?

20 Q. Sure. There's the kind of active for help.
21 It's "helping." Like, police was helping --

22 A. Yes.

23 Q. -- the patient sit up. So to me that means
24 that they are, like, actively helping this person when
25 you arrive. Does that kind of strike you as being

1 accurate in terms of your recollection and the way that
2 you wrote the report?

3 A. I don't remember specifically.

4 Q. Okay.

5 A. What I do remember is them bringing him out --

6 Q. Bringing --

7 A. -- to us.

8 Q. Bringing him out where? Like, from inside to
9 outside?

10 A. I think from inside to outside.

11 Q. Okay. And then the next line I see is
12 "Patient states," and then in quotes, They shot him,
13 period. They shot my brother, end quotes. And so my
14 question is, did you use quotation marks because that
15 was verbatim what this person said out loud?

16 A. Is that -- is that part of my report, or is
17 that part of the fire department's? Because I think
18 the fire department's is attached as well.

19 Q. So I'm looking at -- it says, "Pinellas County
20 Emergency Medical Services Patient Care Report, crew
21 info, report completed by Troy Bartow." That's at the
22 top.

23 A. Okay. Because if that was in there, then that
24 is what -- that was probably what was in the call
25 notes. I was recording what was in the call notes.

1 Q. Okay. So that's you reporting on what's in
2 the call notes?

3 A. Yes.

4 Q. Okay. Do you recall this person saying
5 anything?

6 A. No.

7 Q. Okay. Do you recall, like, the treatment of
8 this person?

9 A. I barely recall the treatment. I do -- I do
10 recall there being a gunshot wound through the cheek.

11 Q. Okay.

12 A. And we were monitoring his airway and the
13 blood pressure and the treatment for that.

14 Q. Okay. And so --

15 A. It was a pretty straightforward call.

16 Q. What was your role with respect to the actual
17 treatment of this person? Like, were you back in
18 the -- like, in the back of the ambulance actually
19 treating this person on the way to the hospital?

20 A. I was part of that. It actually might've been
21 the fire department that did that because they -- this
22 is the type of call that they would've rode in for
23 assistance. One of us would've established the IV
24 while establishing fluid resuscitation as well.

25 Q. Okay. Do you remember any of your engagement

1 with this person while in the back of the ambulance?

2 A. I do not.

3 Q. Okay. And if this person said anything, like,
4 pertinent to what had occurred or how they received the
5 injury, would you have written that down for your
6 report?

7 A. I don't -- I would not. Probably not, because
8 it's not -- it doesn't pertain to the medical side of
9 it. I just write the facts about the medical stuff
10 that happened on the call --

11 Q. Okay.

12 A. -- and the treatment and such.

13 Q. Do you remember the patient going into shock
14 during the transport from the apartment complex to the
15 hospital?

16 A. I don't remember him going into shock. I do
17 remember him having some soft pressures, but I do -- I
18 believe -- I thought I recalled him retaining
19 consciousness.

20 Q. When you say "soft pressures," what do you
21 mean?

22 A. Just some soft blood pressures. I -- I did
23 notice that his blood pressures were what appeared to
24 be 90 over, I think, like, 70, in the range. It's
25 usually a little bit soft for patient sustainability,

1 but it depends on their mean arterial pressure that --
2 that they do that -- it's this little equation with the
3 blood pressures. It depends what that pressure range
4 is, and I don't recall what that pressure range was.

5 Q. Okay. I imagine --

6 A. I don't remember -- I don't remember him going
7 into shock. That was -- that was -- I apologize. It
8 was such a long time ago.

9 Q. No, that's fine. I imagine that every patient
10 is a little bit different in terms of their blood
11 pressure?

12 A. Yes.

13 Q. Okay. When you say "soft pressure," does that
14 affect somebody, like, if they -- if their blood
15 pressure is kind of really dipping because of, like, a
16 loss of pressure, can that affect their cognition in
17 terms of, like, their reactivity to speech, like how
18 responsive they are, things like that?

19 A. Yes. Yes, it can.

20 Q. And do you recall anything like that with
21 regards to Mr. Green?

22 A. No, I do not.

23 Q. Okay. And just in terms of the identification
24 of your patient, do you recall how that occurred?
25 Like, if he was able to tell you his name, his date of

1 birth, other identifying information?

2 A. I don't recall that either. I believe we got
3 the information from law enforcement.

4 Q. Okay. And do you remember anything else about
5 his treatment or his care?

6 A. No.

7 Q. Okay.

8 A. I recall that we went emergency -- to
9 Bayfront.

10 Q. Okay.

11 A. That's about it.

12 Q. And once you got to Bayfront, do you know what
13 occurred at that point?

14 A. Once we got to Bayfront, we took him straight
15 to the trauma room, and we gave our report. We
16 transferred care, and that was about the end of the
17 call there.

18 Q. Okay. And it sounds as though we've covered
19 just about everything that you actually remember in
20 terms of your involvement in this call. Is that right?

21 A. Yeah.

22 Q. Okay. And so I just wanted to kind of like
23 double-check with you. So in terms of the Patient Care
24 Report that you wrote, I have it as five pages for your
25 two-man crew, yourself and Jonathan. Is that right?

1 Is that what you had for review for this deposition?

2 A. Yes, I believe -- yeah, there appears to be --
3 well, let me check because it looks like the -- the
4 fire department's is attached to this too.

5 Q. Um-hum. So you received both for review, but
6 you only authored the one. Is that right?

7 A. Yes.

8 Q. Okay.

9 A. Yeah. So the first five pages are -- is my
10 report.

11 Q. Okay.

12 A. Yeah. So that -- that is accurate.

13 Q. Okay. Is there anything else that you think
14 is important or relevant to your involvement in this
15 case that we haven't had an opportunity to discuss yet?

16 A. Nothing that I can (indiscernible) at this
17 time.

18 MS. SEIFER-SMITH: Okay. Do my colleagues
19 have any questions?

20 MS. RUSSELL: No.

21 MS. SEIFER-SMITH: Okay. My colleagues don't
22 have any questions.

23 Mr. Koskinas, do you have any questions for
24 Mr. Bartow?

25 MR. KOSKINAS: That's it. You're all set,

1 Mr. Bartow. We appreciate your time.

2 MS. SEIFER-SMITH: Thank you so much. Mr.
3 Bartow. We appreciate you making it to speak with us
4 so early.

5 THE WITNESS: Of course.

6 MS. SEIFER-SMITH: Okay. Thanks.

7 THE REPORTER: Thank you. We're off the
8 record at 9:25 a.m.

9 (Deposition concluded at 9:25 a.m.)

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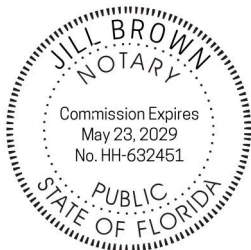
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CERTIFICATE OF OATH

STATE OF FLORIDA
COUNTY OF PINELLAS

I, Jill Brown, the undersigned authority, certify that
TROY BARTOW appeared before me via videoconference on March
18, 2025, and was duly sworn.

WITNESS my hand and official seal this 26th day of
March, 2025.



Jill Brown

Notary Public, State of Florida

Commission No.: HH 132691

Commission Expires: 5/23/2025

Produced Identification X Type of Identification Produced FL DL X Appeared X physically

CERTIFICATE OF TRANSCRIBER

STATE OF FLORIDA

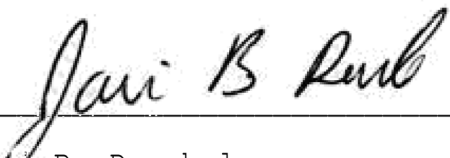
COUNTY OF PALM BEACH

I, Jani B. Drushal, transcriber for the Executive
Reporting Service:

Do Hereby Certify that the foregoing transcript, pages
1 through 18, inclusive, constitutes a true and correct copy
of the proceedings (transcribed to the best of my ability).

I FURTHER CERTIFY I am neither an attorney or counsel
of any of the parties hereto, nor a relative or employee of
any attorney or counsel employed by the parties hereto, nor
financially interested in the event of said cause.

DATED this 26th day of March, 2025.



Jani B. Drushal

AAERT CER-2242

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