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14 Attorneys for Plaintiff
OLIVER KNIGHT

16 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**

17 **HUMBOLDT COUNTY**

19 OLIVER KNIGHT,
20 Plaintiff,

21 v.

22 ST. JOSEPH HEALTH NORTHERN
23 CALIFORNIA, LLC d/b/a ST. JOSEPH
24 HOSPITAL - EUREKA,

25 Defendant.

CASE NO.:

(UNLIMITED CIVIL CASE)

COMPLAINT FOR DAMAGES

**(1) VIOLATIONS OF THE UNRUH
CIVIL RIGHTS ACT;**

**(2) NEGLIGENT INFLICTION OF
EMOTIONAL DISTRESS; and**

**(3) INTENTIONAL INFLICTION OF
EMOTIONAL DISTRESS**

DEMAND FOR JURY TRIAL

INTRODUCTION

1
2 1. Plaintiff Oliver Knight (“Plaintiff” or “Mr. Knight”) sought and was denied
3 access to medical services by Defendant St. Joseph Health Northern California, LLC
4 (“Defendant”), doing business as St. Joseph Hospital – Eureka (“Hospital”), because he is
5 transgender. Defendant’s denial to Mr. Knight of medical services that it regularly provides to
6 non-transgender patients is sex discrimination and violates the Unruh Civil Rights Act, Cal. Civ.
7 Code § 51.

8 2. As part of the medical treatment for Mr. Knight’s diagnosis of gender dysphoria,
9 Mr. Knight’s surgeon, Dr. Deepak Stokes, scheduled a bilateral hysterectomy for Mr. Knight at
10 St. Joseph Hospital – Eureka on August 30, 2017. Upon information and belief, Dr. Stokes
11 regularly performs hysterectomies (and related procedures, such as oophorectomies) at the
12 Hospital. Dr. Stokes, however, told Mr. Knight mere minutes before his scheduled surgery that
13 he would not be permitted to perform Mr. Knight’s hysterectomy at the Hospital on that day, or
14 on any day.

15 3. According to Hospital personnel, Mr. Knight would not be able to receive the
16 hysterectomy because he did “not meet [its] parameters for a sterilization.” Dr. Stokes
17 confirmed to Mr. Knight that this meant the procedure was being denied because Mr. Knight is
18 transgender. That is, Mr. Knight was denied care provided to other Hospital patients because he
19 is a transgender man who sought the hysterectomy as treatment for his diagnosed gender
20 dysphoria. Gender dysphoria is a serious medical condition resulting from the incongruence
21 between one’s gender identity and one’s sex assigned at birth.

22 4. Because Defendant routinely allows Dr. Stokes and other physicians to perform
23 hysterectomies for cisgender patients at the Hospital to treat diagnoses other than gender
24 dysphoria, Defendant’s refusal to allow Dr. Stokes to perform Mr. Knight’s hysterectomy at St.
25 Joseph Hospital – Eureka constitutes discrimination against Mr. Knight due to his gender
26 identity.

27 5. Defendant’s discrimination violates California’s Unruh Civil Rights Act, which
28 broadly prohibits business establishments from discriminating in the provision of services to the

1 general public. The Unruh Act prohibits discrimination based on sex, which is explicitly defined
2 to include gender identity. Cal. Civ. Code § 51(b). Refusing Mr. Knight’s medically necessary
3 hysterectomy because he is a transgender man seeking the procedure as treatment for gender
4 dysphoria therefore violates California law.

5 6 **THE PARTIES**

7 6. Plaintiff Oliver Knight resides in Eureka, California. Mr. Knight is a transgender
8 man, which means that he was assigned the sex female at birth, but he has a male gender identity
9 and identifies as a man. Mr. Knight sought and was denied access to necessary medical services
10 by Defendant St. Joseph Health Northern California, LLC d/b/a St. Joseph Hospital - Eureka.

11 7. Defendant St. Joseph Health Northern California, LLC is registered as a tax-
12 exempt non-profit corporation. Defendant operates five hospitals in Northern California, all of
13 which are Catholic facilities. In Humboldt County, California, where Mr. Knight sought and was
14 denied access to medical services, St. Joseph Health Northern California, LLC does business as
15 St. Joseph Hospital - Eureka. In Humboldt County, St. Joseph Hospital - Eureka is the only
16 hospital within 20 miles. St. Joseph Health Northern California, LLC is wholly owned by
17 Providence St. Joseph Health Network, one of the largest health systems in both the country—
18 operating 51 hospitals, with over 25,000 physicians—and in California, where it operates 18
19 hospitals.

20 21 **JURISDICTION AND VENUE**

22 8. This Court has jurisdiction over all causes of action asserted herein pursuant to
23 the California Constitution, Article VI, Section 10, which grants the Superior Court original
24 jurisdiction in all cases except those given to other trial courts. This Court also has jurisdiction
25 pursuant to Cal. Code. Civ. Proc. §§ 410.10, 525, 526, 1060 and 1085.

26 9. Plaintiff Knight seeks damages in this case in an amount exceeding the
27 jurisdictional minimum of this Court.

28 10. Venue in Humboldt County is proper under California Code of Civil Procedure §

1 395.5 because the unlawful conduct at issue in this case occurred in Humboldt County. In
2 addition, Defendant conducted and continues to conduct substantial business in this County and
3 its liability arose, in whole or in part, in this County.

4 5 **FACTUAL ALLEGATIONS**

6 **Gender Dysphoria Diagnosis and Treatment**

7 11. Gender identity is a well-established medical concept, referring to one's
8 belonging to a gender (or, in some cases, multiple genders or no gender at all).

9 12. Often, people who are designated female at birth based on external anatomy
10 identify as girls or women, and people who are designated male at birth based on external
11 anatomy identify as boys or men. For someone who is transgender, however, gender identity
12 differs from the sex assigned to that person at birth. Transgender men are typically men who
13 were assigned female at birth and have a masculine, or male, gender identity.

14 13. The medical diagnosis for the incongruence between one's gender identity and
15 one's sex assigned at birth, and the resulting distress caused by the incongruence is gender
16 dysphoria (previously known as "gender identity disorder"). Gender dysphoria is a serious
17 medical condition codified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-
18 V) and International Classification of Diseases (ICD-10). The criteria for diagnosing gender
19 dysphoria are set forth in the DSM-V (302.85).

20 14. The widely accepted standards of care for treating gender dysphoria are published
21 by the World Professional Association for Transgender Health ("WPATH"). The WPATH
22 Standards of Care have been recognized as the authoritative standards of care by leading medical
23 organizations, the United States Department of Health and Human Services, and federal and
24 numerous state courts.

25 15. Under WPATH Standards of Care, treatment for gender dysphoria may require
26 medical steps to affirm one's gender identity and help an individual transition from living as the
27 gender of their sex assigned at birth to their gender identity. This treatment, often referred to as
28 transition-related care, may include hormone therapy, surgery (sometimes called "sex

1 reassignment surgery” or “gender affirming surgery”), and other medical services that align
2 individuals’ bodies with their gender identities. The exact medical treatment varies based on the
3 individualized needs of the person.

4 16. Hysterectomy is surgery to remove a patient’s uterus and is performed to treat a
5 number of health conditions, including uterine fibroids, endometriosis, pelvic support problems,
6 abnormal uterine bleeding, chronic pelvic pain, and gynecological cancer.¹ A hysterectomy
7 where the ovaries and fallopian tubes are also removed is called a hysterectomy with salpingo-
8 oophorectomy.² A patient can no longer become pregnant after undergoing a hysterectomy.³
9 Thus, hysterectomy is an inherently sterilizing procedure, regardless of the reason for which it is
10 performed. According to the Centers for Disease Control and Prevention, hysterectomy is very
11 common—one in three women have a hysterectomy.⁴

12 17. Transgender men often pursue a hysterectomy and/or oophorectomy as gender-
13 affirming surgical treatment for gender dysphoria. The United States Discrimination Survey,
14 which surveyed almost 28,000 transgender people in 2015, found that 14% of transgender men
15 surveyed had undergone a hysterectomy, and 57% wanted to undergo a hysterectomy.⁵
16 According to every major medical organization and the overwhelming consensus among medical
17 experts, treatment for gender dysphoria, including surgical procedures such hysterectomy and
18 oophorectomy, are effective and safe.

19 **Defendant Refuses to Provide Gender-Affirming Care for Transgender Patients Because**
20 **Such Care is Prohibited by Policy of the Catholic Church**

21 18. All Catholic health care facilities, including Defendant, must adhere to policy
22

23 ¹ *Hysterectomy*, American College of Obstetricians and Gynecologists (March 2015) (available
24 at <https://www.acog.org/Patients/FAQs/Hysterectomy>).

25 ² *Id.*

26 ³ *Id.*

27 ⁴ *Women’s Reproductive Health*, Centers for Disease Control and Prevention (2017) (available at
28 <https://www.cdc.gov/reproductivehealth/womensrh/index.htm#Hysterectomy>).

⁵ James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The Report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality (available at <https://transequality.org/sites/default/files/docs/usts/USTS-Full-Report-Dec17.pdf>).

1 proscriptions issued by the United States Conference of Catholic Bishops (the “Conference of
2 Catholic Bishops”), some of which are spelled out in the Ethical and Religious Directives for
3 Catholic Health Care Services (the “ERDs”). Indeed, Defendant is “guided by the traditions . .
4 . of St. Joseph of Orange” and acts in accordance with “the Roman Catholic Church moral
5 traditions and the Ethical and Religious Directives for Catholic Health Care Services.”⁶

6 19. The ERDs⁷ are promulgated by the United States Conference of Catholic Bishops
7 and “provide authoritative guidance.” They are “concerned primarily with institutionally based
8 Catholic health care services . . . and address the sponsors, trustees, administrators, chaplains,
9 physicians, health care personnel, and patients or residents of these institutions and services,”
10 including Defendant.

11 20. Specifically, the ERDs state that “direct sterilization” is “intrinsically evil.”⁸
12 According to the ERDs, sterilization is to be performed only when it “alleviat[es] [] a present
13 and serious pathology.”⁹ Yet, upon information and belief, cisgender women routinely undergo
14 hysterectomies or other “sterilizations” for diagnoses other than gender dysphoria at Defendant
15 and other Catholic hospitals. Such diagnoses include uterine fibroids, endometriosis, pelvic
16 support problems, chronic pelvic pain, and gynecological cancer.

17 21. Meanwhile, the Catholic Church has also disseminated other recommendations to
18 Catholic health care providers stating that transgender patients should be prohibited from
19 receiving gender-affirming, medically necessary care. According to the National Catholic
20 Bioethics Center, “[g]ender transitioning of any kind is intrinsically disordered” and Catholic
21 health care providers should refuse to provide *any* gender-affirming care, including but not
22 limited to: providing hormone therapy, maintaining hormone therapy prescribed by other
23

24 ⁶ Cal. Sec. of State, Articles of Incorporation - Providence St. Joseph Health Network, at 1–2
(Nov. 28, 2017); Cal. Sec. of State, Articles of Incorporation - St. Joseph Health System, at 1
25 (June 16, 2017).

26 ⁷ *Ethical and Religious Directives for Catholic Health Care Services*, United States Conference
of Catholic Bishops (6th ed. 2018) (available at [http://www.usccb.org/about/doctrine/ethical-
27 and-religious-directives/upload/ethical-religious-directives-catholic-health-service-sixth-edition-
2016-06.pdf](http://www.usccb.org/about/doctrine/ethical-and-religious-directives/upload/ethical-religious-directives-catholic-health-service-sixth-edition-2016-06.pdf))

28 ⁸ *Id.* at 30 (ERD No. 70 n. 48).

⁹ *Id.* at 14 (ERD No. 28).

1 health care providers, allowing access to facilities, including the bathrooms associated with
2 their gender identity, using a transgender patient’s preferred pronouns, or referring transgender
3 patients to other medical providers for gender-affirming care.¹⁰

4 22. The Conference of Catholic Bishops has been very clear that the policy and
5 practice of Catholic hospitals is to deny equal access to their services and facilities to
6 transgender patients. In comments submitted to the U.S. Department of Health and Human
7 Services in 2015, the Conference of Catholic Bishops explained as follows: “mandating
8 coverage of gender transition services will violate the religious and moral convictions of many
9 stakeholders, including religiously-affiliated health care providers.”¹¹ The comments also state:
10 “[W]e believe . . . that medical and surgical interventions that attempt to alter one’s sex are, in
11 fact, detrimental to patients. Such interventions are not properly viewed as health care because
12 they do not cure or prevent disease or illness. Rather they reject a person’s nature at birth as
13 male or female.”¹² And: “‘Sex change’ is biologically impossible. People who undergo sex
14 reassignment surgery do not change from men to women or vice versa Claiming that this
15 is a civil-rights matter and encouraging surgical intervention is in reality to collaborate with
16 and promote a mental disorder.”¹³

17 23. Upon information and belief, Defendant abides by the policies and guidance of
18 the Catholic Church as described herein. Upon information and belief, it is because Defendant
19 as a matter of religious policy is prohibited from providing gender affirming care that it
20 categorized Mr. Knight’s hysterectomy as a “sterilization” and refused to provide this
21 medically necessary treatment.

23 ¹⁰ *Transgender Issues in Catholic Health Care*, The National Catholic Bioethics Center (Feb.
24 2017) (available at [https://www.ncbcenter.org/files/4515/2459/6063/2017-
25 Transgender_Issues_in_Catholic_Health_Care.pdf](https://www.ncbcenter.org/files/4515/2459/6063/2017-Transgender_Issues_in_Catholic_Health_Care.pdf)).

26 ¹¹ *Comment Letter on Department of Health and Human Services Proposed Rule on
27 Nondiscrimination in Health Programs and Activities*, U.S. Conference of Catholic Bishops et al
(Nov. 6, 2015) (available at [http://www.usccb.org/about/general-
28 counsel/rulemaking/upload/Comments-Proposal-HHS-Reg-Nondiscrimination-Federally-
Funded-Health.pdf](http://www.usccb.org/about/general-counsel/rulemaking/upload/Comments-Proposal-HHS-Reg-Nondiscrimination-Federally-Funded-Health.pdf)).

¹² *Id.*

¹³ *Id.*

1 **Mr. Knight’s Gender Dysphoria and Treatment**

2 24. Mr. Knight first began to identify as male and take social steps, such as wearing
3 masculine clothing, in 2013. He was subsequently diagnosed with gender dysphoria. Pursuant to
4 this diagnosis and on the recommendation of his treating medical personnel, Mr. Knight began
5 hormone replacement therapy in August 2015 and had a bilateral mastectomy—the removal of
6 both breasts—in August 2016.

7 25. Mr. Knight’s next planned step for the treatment of his gender dysphoria was a
8 hysterectomy with bilateral salpingo-oophorectomy. This procedure involved the removal of his
9 uterus, fallopian tubes, and ovaries. In Mr. Knight’s case, hysterectomy was medically necessary
10 care to treat his gender dysphoria. This was the professional opinion of Mr. Knight’s surgeon and
11 mental health professionals who assessed Mr. Knight during his transition.

12 **Defendant’s Discrimination Against Mr. Knight on the Basis of his Gender Identity**

13 26. After consulting further with his primary care provider and his surgeon, Dr.
14 Deepak Stokes, Mr. Knight scheduled his hysterectomy at St. Joseph Hospital – Eureka for
15 August 30, 2017.

16 27. Upon information and belief, Dr. Stokes has been practicing as a board-certified
17 obstetrician/gynecologist for over thirty years and regularly performs hysterectomies at St.
18 Joseph Hospital.

19 28. On the day of the scheduled surgery, Mr. Knight was instructed and required by
20 the Hospital to complete pre-op procedures that caused him to feel significant anxiety and
21 extreme dysphoria. First, he was required to complete an at-home vaginal douche. Then, after
22 Mr. Knight was admitted to St. Joseph Hospital, Hospital staff required Mr. Knight to wear a
23 pink gown. When Mr. Knight asked to instead wear a blue gown, a Hospital nurse refused,
24 telling him that a pink gown was required because he was receiving a “female” procedure.
25 Hospital staff also repeatedly mis-gendered Mr. Knight despite his preferred pronouns, his
26 traditionally masculine appearance, and *the fact that his medical records clearly identify Mr.*
27 *Knight as male.*

28 29. After undergoing approximately three hours of anxiety-inducing pre-op

1 procedures, Mr. Knight was informed by Dr. Stokes—minutes before he was scheduled to begin
2 his surgery—that his surgery had been cancelled by Defendant and would not ever be
3 rescheduled at the Hospital because it was a Catholic Hospital. Mr. Knight, sobbing and
4 shaking, asked Dr. Stokes if the reason his surgery was cancelled was because he is a transgender
5 man, to which Dr. Stokes replied, “Yes.”

6 30. Mr. Knight’s medical records show that the decision to cancel Mr. Knight’s
7 medically necessary care was initiated by an “Ethics Assessment” completed by David Groe.
8 Upon information and belief, Mr. Groe is a reverend, with no medical training or medical
9 licensure.

10 31. Upon information and belief, Defendant allows doctors to perform medically
11 necessary hysterectomies for cisgender patients who have diagnoses other than gender dysphoria.

12 32. Defendant’s refusal to allow Dr. Stokes to perform Mr. Knight’s hysterectomy at
13 the Hospital on August 30, 2017 caused Mr. Knight great anxiety and grief. After he learned that
14 he would not be allowed to have the surgery, Mr. Knight suffered an anxiety attack. In response
15 to his anxiety attack, Defendant gave Mr. Knight Ativan, an anti-anxiety medication.

16 33. Defendant discharged Mr. Knight approximately fifteen to thirty minutes after he
17 was given Ativan. Mr. Knight informed the Hospital that he was not accompanied by any
18 support person or companion, but the Hospital discharged him anyway. As a result, Mr. Knight
19 was required to sit outside the Hospital alone, under the influence of medication administered by
20 the Hospital, and experiencing a panic attack, until he was able to secure a ride home.

21 **Mr. Knight Eventually Received his Hysterectomy at a Hospital Not Affiliated with**
22 **Defendant**

23 34. After Defendant cancelled Mr. Knight’s surgery at St. Joseph Hospital - Eureka,
24 Mr. Knight was uncertain as to when, or if, he would be able to undergo his hysterectomy. At the
25 same time, Mr. Knight was painfully aware that he had been denied full and equal access to the
26 operating room and related facilities at St. Joseph Hospital - Eureka because he was seeking a
27 hysterectomy to treat his gender dysphoria and because of his transgender status. Indeed, Mr.
28 Knight suffered—and continues to suffer— severe emotional distress caused by Defendant’s

1 actions, and the dignitary harm of having been denied full and equal access to medical treatment
2 by Defendant.

3 35. Luckily, Dr. Stokes also had surgical privileges at Mad River Community
4 Hospital (“Mad River”) in Arcata, California, which is about a 30-minute drive from Mr.
5 Knight’s home. Mad River is not affiliated with Defendant.

6 36. Mr. Knight was hesitant to have the surgery at Mad River because he was
7 unfamiliar with the staff and facilities, and because moving the procedure to Mad River
8 increased the time and travel burden on him and his family.

9 37. Seeing no other options, however, Mr. Knight scheduled his surgery at Mad River
10 on September 3, 2017. The hysterectomy was successful, but Mr. Knight contracted an infection
11 while at Mad River.

12
13 **FIRST CAUSE OF ACTION**
14 **VIOLATIONS OF THE UNRUH CIVIL RIGHTS ACT, CIVIL CODE § 51(B)**

15 38. Plaintiff incorporates by reference and realleges as if fully stated here the
16 allegations set out in all prior paragraphs.

17 39. The Unruh Act prohibits discrimination on the basis of sex in all business
18 establishments. Specifically, it guarantees that Californians are entitled to the “full and equal
19 accommodations, advantages, facilities, privileges, or services in all business establishments of
20 every kind whatsoever” regardless of their sex. Cal. Civ. Code § 51(b).

21 40. The Unruh Act defines “sex” to include a person’s gender. “Gender” means sex
22 and includes a person’s gender identity and gender expression. Cal. Civ. Code § 51(e)(5).

23 41. Discrimination against an individual on the basis of his or her gender identity is
24 discrimination on the basis of “sex” under the Unruh Act.

25 42. Defendant prevented Dr. Stokes from performing Mr. Knight’s hysterectomy at
26 St. Joseph Hospital – Eureka to treat his diagnosis of gender dysphoria, a medical condition
27 unique to individuals whose gender identity does not conform to the sex they were assigned at
28 birth and thus usually experienced by transgender people.

1 43. Defendant does not prohibit physicians at its hospitals from performing
2 hysterectomies on cisgender people with diagnoses other than gender dysphoria.

3 44. By preventing Dr. Stokes from performing Mr. Knight’s hysterectomy at St.
4 Joseph Hospital - Eureka, Defendant discriminated against Mr. Knight on the basis of his gender
5 identity as a transgender man.

6 45. By preventing Dr. Stokes from performing Mr. Knight’s hysterectomy at St.
7 Joseph Hospital - Eureka, Defendant violated the Unruh Act, Cal. Civ. Code § 51(b).

8 46. Specifically, Mr. Knight was denied full and equal access to Defendant’s facilities
9 and services because he was barred from undergoing a medically necessary hysterectomy at St.
10 Joseph Hospital – Eureka on the basis of his gender identity.

11 47. Defendant’s discriminatory practices caused Mr. Knight considerable harm.
12 Therefore, Mr. Knight seeks treble his actual damages in an amount to be proven at trial,
13 injunctive relief, statutory damages, and attorneys’ fees and costs under the Unruh Act.

14
15 **SECOND CAUSE OF ACTION**
16 **NEGLIGENT INFLICTION OF EMOTIONAL DISTRESS**

17 48. Plaintiff incorporates by reference and realleges as if fully stated here the allegations
18 set out in all prior paragraphs.

19 49. Defendant owed a duty of reasonable care to Mr. Knight in its actions and
20 conduct towards him. It was foreseeable and probable that Mr. Knight would suffer severe
21 emotional distress as a result of Defendant’s conduct as described above.

22 50. Defendant was negligent by breaching the duty of care it owed Mr. Knight when
23 it discriminated against Mr. Knight based on his gender identity and transgender status.

24 51. Mr. Knight has suffered severe emotional distress as a direct and proximate result
25 of Defendant’s negligent actions towards him.

26 52. Defendant’s actions were a substantial factor in causing Mr. Knight’s severe
27 emotional distress.

28 53. The actions alleged herein were done with malice, fraud, and oppression, and in

1 reckless disregard of Mr. Knight's rights.

2 54. As a result of Defendant's conduct, Plaintiff has incurred and will continue to
3 incur damages in an amount to be proven at trial.

4
5 **THIRD CAUSE OF ACTION**
6 **INTENTIONAL INFLICTION OF EMOTIONAL DISTRESS**

7 55. Plaintiff incorporates by reference and realleges as if fully stated here the allegations
8 set out in all prior paragraphs.

9 56. Defendant's conduct alleged herein is extreme and outrageous and is beyond the
10 bounds of that tolerated in a decent society.

11 57. Defendant engaged in the conduct alleged herein with the intent to cause Mr.
12 Knight extreme emotional distress, or at a minimum, with reckless disregard as to whether it
13 would cause extreme emotional distress.

14 58. The actions alleged herein were done with malice, fraud, oppression, and in
15 reckless disregard of Mr. Knight's rights.

16 59. As a result of Defendant's conduct, Mr. Knight has incurred and will continue to
17 incur damages in an amount to be proven at trial.

18
19 **PRAYER FOR RELIEF**

20 WHEREFORE, Plaintiff Knight prays for judgment against Defendant as follows:

- 21 1) For a declaratory judgment stating that Defendant's actions preventing Mr.
22 Knight's physician from performing his medically necessary hysterectomy at St.
23 Joseph Hospital violated the Unruh Act, Civil Code § 51(b);
- 24 2) An order enjoining Defendant, its agents, employees, successors, and all others
25 acting in concert with it from (a) discriminating on the basis of gender identity or
26 expression, transgender status, and/or diagnosis of gender dysphoria in the
27 provision of health care services, treatment and facilities; and (b) preventing
28

1 doctors from performing hysterectomies and related procedures in its hospitals on
2 the basis of a diagnosis of gender dysphoria;

- 3 3) For general and special damages;
4 4) For damages up to three times the amount of actual damages pursuant to Cal. Civ.
5 Code § 52;
6 5) For statutory damages;
7 6) For punitive damages;
8 7) For restitution available under state law;
9 8) For attorneys' fees and costs under Civil Code § 52.1(h); Civil Code § 52(a);
10 Code of Civil Procedure § 1021.5), and any other applicable statutes;
11 9) For equitable relief as the Court deems appropriate;
12 10) For interest on all sums at the maximum legal rate;
13 11) For such other relief as the Court deems just and proper.

14
15 **DEMAND FOR JURY TRIAL**

16 Plaintiff Knight demands a trial by jury.

17
18
19 Dated: March 20, 2019

RUKIN HYLAND & RIGGIN LLP

20 By: _____

21 Jessica Riggin
22 Dylan Cowart
23 Attorneys for Plaintiff Oliver Knight

24 Dated: March 20, 2019

ACLU FOUNDATION OF NORTHERN
CALIFORNIA

25 By: _____

26 Elizabeth Gill
27 Attorneys for Plaintiff Oliver Knight