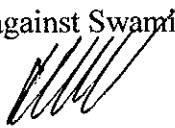


AFFIDAVIT OF MARK W. VOGEL, M.D., F.A.C.S.

I, MARK VOGEL, M.D., declare as follows:

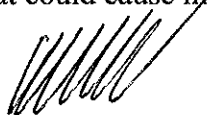
1. I have over 31 years of experience as an urologist. A true and correct copy of my full Curriculum Vitae is attached hereto as Exhibit A.
2. I am board-certified urologist in the State of California (USA) and a member of the teaching faculty for the Urology Residency Program at Cedars-Sinai Medical Center.
3. I was the past chief of the Division of Urology and Vice-Clinical Chief of the Department of Surgery at Cedars-Sinai Medical Center, with staff positions at Cedars-Sinai and University of Southern California (USC).
4. My practice emphasizes in all areas of urology.
5. I am a Qualified Medical Evaluator (QME) for the State of California.
6. In addition to being a fellow of the American College of Surgeons, I am a member of numerous local, state and national medical organizations.
7. I completed my medical education at the USC Keck School of Medicine and completed my internship and residency at the Los Angeles County-USC Medical Center.
8. I actively teach at the University of Southern California, where I am a clinical professor of Urology and Family Medicine.
9. I have reviewed the medical records of Sri Nithyananda Swami (the "Patient"), produced by the Bangalore Medical College & Research Institute, Victoria Hospital, Bangalore ("Victoria Hospital Report") attached hereto as Exhibit B. I also reviewed the medical records of the Patient, produced by Fortis Hospital ("Fortis test results") which is attached hereto as Exhibit C. (collectively, "Victoria Hospital Report" and "Fortis test results" are referred herein as the "Medical Reports").
10. I also reviewed the deposition testimony of Vinay Keshavan Bharadwaj specific to his allegations of sexual abuse against Swami from 2005 through 2009.



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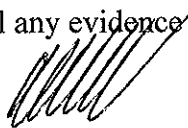
Specifically, Mr. Bharadwaj alleges to have been forced into giving oral sex on numerous occasions, that he was touched and kissed by the Patient and that in the course of these acts, he sometimes swallowed semen. The references are found in the transcript of the first volume deposition at pages 38 through 41, pages 161 to 167, 173 through 176, and 192. Further references are found in the transcript of the third volume of Mr. Bharadwaj's deposition at pages 629 to 633 and 683 to 684 and also in his second amended verified complaint at pages 22, 29 to 39. Attached as Exhibit D are pertinent excerpts from those depositions.

11. Based on a comparison of Mr. Bharadwaj's claims and the Patient's Medical Reports, I find Mr. Bharadwaj's claims of sexual abuse by the Patient to be unbelievable as the Medical Reports indicate that the Patient has a longstanding history of erectile dysfunction based on the following:
 - a. The Medical Reports clearly indicate that the Patient has very low levels of testosterone (anorchid levels) and low levels of luteinizing hormone ("LH"). Sex drive or "Libido" is triggered by an arousal mechanism relating to these hormones in the brain. The Patient's condition leaves the Patient with extremely low hormone levels sufficient to establish any libido and is a strong indicator of erectile dysfunction. If there is no/low libido, then there is no need for any sexual gratification.
 - b. There is ample evidence in current medical literature of a cut off peak systolic velocity of 15 cm/sec in the flaccid penile Doppler test. There are also studies done on Indian patients in India who have taken a lower cut off of 10 cm/sec. The Doppler test results indicate that Sri Nithyananda Swami's peak systolic velocity, in a flaccid state, is only 6.7 cm/sec on the right side, which indicates insignificant blood flow and is significantly lower than normal and is sufficient to be considered a vascular cause of erectile dysfunction. The same test recorded the left side was recorded at 14.1 cm/sec. Normally, the peak systolic velocity is near equal on both sides, but this is not the case with Sri Nithyananda Swami and this is also indicative of erectile dysfunction. [Source: D Golijanin , et al, Doppler evaluation of erectile dysfunction – Part 2, *International Journal of Impotence Research*, (2007) 19, 43–48]
 - c. The Victoria Hospital report regarding the physical examination described "moon faced" (facies) and gynecomastia, which could also be evidence of an endocrine disorder that could cause impotence.



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- d. Further, it should be noted that it takes a long time for hormonal levels to reach such low levels, particularly with the presence of gynecomastia, as indicated by the Victoria Hospital report. This is a definite indicator of a chronic and longstanding disorder.
- e. In addition, Sri Nithyananda Swami's results indicate that he has diabetes, hypertension and dyslipidemia—all of which are well known in the medical literature to cause erectile dysfunction.
- f. The testicular volumes, recorded by Victoria Hospital on the ultrasound study at 12.04 cc's (right) and 11.4 cc's (left), are lower than accepted normal volumes for functional male testes, ranging from 12.5 cc's to 19 cc's. which is supportive of hypogonadism. [Sources: Kim, W. et al, US MR Imaging Correlation in Pathologic Conditions of the Scrotum. *Radiographics* 27 (5) 1239-53; Vinayaka U. S, et al "Correlation Between Testicular Volume & Sperm Count in Infertile South Indian Male Patients". *Journal of Evolution of Medical and Dental Sciences* 2014; Vol. 3, Issue 36, August 18; Page: 9478-9483, DOI: 10.14260/jemds/2014/3223.]
- g. The Scrotal Doppler examination in the Victoria Hospital report shows, "significant varicocele seen on either side", another contributing factor to erectile dysfunction.
- h. The Fortis test results indicate that the Patient also has poor nocturnal tumescence, which indicates that the Patient is unable to have sexual intercourse or sustain an erection (erectile dysfunction).
- i. The Victoria Hospital Report also refers to the psychological assessment of Sri Nithyananda Swami. When questioned during his psychological examination, the Patient gives a clear history of his body being unresponsive to sexual urge, no sexual activities during his lifetime, no history of masturbation or wet dreams or any erections. The Victoria Hospital medical team refers to the psychological exam in their report and has not disputed these unique findings in their report.
- j. Further, the systemic examination conducted by the Victoria Hospital medical examination team observed the Patient's judgment to be "intact" and that his thought stream as "Normal". Also, the psychological examination did not reveal any evidence of psychopathology. In my



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opinion and experience, these findings go to the reliability of the Patient's statements referred to in the previous point.

k. The Victoria Hospital records conclude that there is no evidence of "unnatural sex"

12. The Patient manifests all the three causes of erectile dysfunction: vasculogenic, hormonal and psychological. Further, the Patient's low hormone levels and poor nocturnal tumescence could not manifest overnight. Rather, it is likely he has had these conditions for a number of years.

13. Mr. Bharadwaj's allegations indicate that the Patient has a strong sex drive, yet there is nothing in the medical facts to support these claims. To the contrary, the Medical Reports provide clear medical and psychological evidence to support the Patient's claim that he is physically incapable of sexual acts and has no desire for sex, including oral sex.

I declare under penalty of perjury under all the laws of the United States of America that the foregoing is true and correct.

This declaration is signed July 28th, 2015 at Beverly Hills, California.



MARK VOGEL, M.D.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

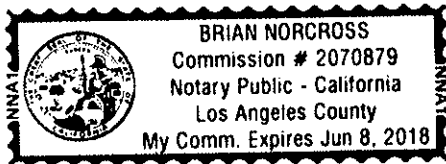
State of California)

County of Los Angeles)On July 28, 2015 before me, Brian Norcross, Notary Public,
Date Here Insert Name and Title of the Officerpersonally appeared Mark Vogel, M.D.
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature [Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached DocumentTitle or Type of Document: Affidavit of Mark Vogel Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

☐ Corporate Officer — Title(s): _____☐ Partner — ☐ Limited ☐ General☐ Individual ☐ Attorney in Fact☐ Trustee ☐ Guardian or Conservator☐ Other: _____

Signer Is Representing: _____

Signer's Name: _____

☐ Corporate Officer — Title(s): _____☐ Partner — ☐ Limited ☐ General☐ Individual ☐ Attorney in Fact☐ Trustee ☐ Guardian or Conservator☐ Other: _____

Signer Is Representing: _____