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STATE OF SOUTH CAROLINA

IN THE SUPREME COURT

S.C. Supreme Court

Appeal from Orangeburg County

Maite Murphy, Circuit Court Judge

JOHNNY WHITE,

PETITIONER,

V.

STATE OF SOUTH CAROLINA,

RESPONDENT

APPELLATE CASE NO. 2014-002167

SUPPLEMENTAL APPENDIX

JOHN H. STROM
Appellate Defender

ALAN WILSON
Attorney General

South Carolina Commission on Indigent
Defense
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ATTORNEY FOR PETITIONER

ATTORNEYS FOR RESPONDENT

INDEX

INDEX.....i
PLAINTIFF'S EXHIBIT 1.....1
PLAINTIFF'S EXHIBIT 2.....34

MDCI880D
OMINMDCA

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY

05/27/14
FRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 1

** ENCOUNTER: 379 MENTAL HEALTH CLINIC 05/15/14 12:23 LEE COMP
 S: SAYS HE IS OK
 O: NOT SLEEPING WELL. APPETITE IS OK. DENIES HALLUCINATIONS. FEELS OK.
 DENIES SI/HI. DENIES SIDE EFFECTS OF MEDS. TROUBLE STRETCHING OUT LEFT A
 RM. SAYS ARTHRITIS RUNS IN THE FAMILY.
 A: SCHIZOPHRENIA
 P: WILL CHANGE COGENTIN TO BENADRYL
 CONTINUE COGENTIN UNTIL BENADRYL ARRIVES
 SIGNED OFF ON 05/15/14 @ 12:27 BY BEVERLY A WOOD, PSYCHIATRIST
 NOTED
 SIGNED OFF ON 05/15/14 @ 13:54 BY JONI ROGERS, LICENSED PRACTICAL NURSE

** ENCOUNTER: 378 MENTAL HEALTH CLINIC 04/18/14 9:25 LEE COMP
 CCC TX TEAM REVIEW NOTE (MEETING HELD 4/17/14): I/M WHITE WAS DISCUSSED AT
 TX TEAM MEETING. I/M'S DX IS SCHIZOPHRENIA, AND IS ON A MEDS REGIMEN OF ZOL
 OFT, COGENTIN, AND GEODON. TX PLAN RECOMMENDATIONS WERE STAFFED AND APPROVE
 D. TEAM MEMBERS PRESENT: MS. SHARP, MR. BROWN, MS. DELP, NURSE FULTON, WARD
 EN BUSH, AND THIS WRITER. HARD COPY OF TX PLAN PLACED IN I/M MEDICAL FILE.
 SIGNED OFF ON 04/18/14 @ 9:31 BY NOI M ROSSER, HUMAN SERVICES COORD I
 SIGNED OFF ON 04/30/14 @ 15:04 BY YOLANDA R DELGADO, HUMAN SERVICES COORD II

** ENCOUNTER: 377 MENTAL HEALTH CLINIC 04/15/14 12:21 LEE COMP
 D: CCC IV NOTE: I/M WHITE WAS PRESENT FOR HIS ROUTINE 90 DAY CONTACT WITH
 THIS WRITER. I/M REPORTED THAT HE IS MEDICATION COMPLIANT, HAS NOT EXPERIEN
 CED ANY A/V HALLUCINATIONS, AND THE MEDICATION REGIMEN HELPS HIM WITH SLEEP
 . I/M REPORTS THAT HIS APPETITE IS GOOD, GOES TO ALL MEALS. I/M REPORTS THA
 T HE CURRENTLY WORKS IN HIS DORM - CLEANS WALLS AND HANDRAILS. I/M DENIED H
 AVING PROBLEMS COMPLETING HIS JOB DUTIES. I/M REPORTS HE HAS NO PROBLEMS WI
 TH OTHERS, GETS ALONG WITH HIS CELLIE, AND HAS GOOD FAMILIAL SUPPORT.
 A: I/M WAS CALM, COOPERATIVE, RECEPTIVE TO THIS WRITER'S QUESTIONS. MAINTAI
 N GOOD EYE CONTACT THROUGHOUT TODAY'S CONTACT.
 P: ENCOURAGED I/M TO MAINTAIN MED COMPLIANCE, AND TO CONTACT THIS WRITER SHO
 ULD HE HAVE ANY CONCERNS REGARDING HIS MENTAL HEALTH TREATMENT.
 SIGNED OFF TIME 12:32PM ON 4/15/14, BY N. ROSSER, HUMAN SERVICE COORDINATOR
 SIGNED OFF ON 04/15/14 @ 12:33 BY NOI M ROSSER, HUMAN SERVICES COORD I
 SIGNED OFF ON 04/30/14 @ 15:07 BY YOLANDA R DELGADO, HUMAN SERVICES COORD II

** ENCOUNTER: 374 MENTAL HEALTH CLINIC 03/18/14 11:34 LEE COMP
 S: DOING WELL
 O: SLEEP IS GOOD. APPETITE IS OK. NO HALLUCINATIONS. MOOD IS OK. DENIE
 S SI/HI. WILL D/C RISPERDAL DUE TO GYNECOMASTIA.
 A: SCHIZOPHRENIA, GYNECOMASTIA
 P: D/C RISPERDAL
 CONTINUE OTHER MEDS
 LABS IN 2 MOS. REPEAT PROLACTIN LEVEL, BMP, LIPID PANEL
 P> ZOLOFT 100MG TABS (SERTRALINE)
 SIG: TAKE ONE PO QHS
 SIG:
 START DATE: 03/18/14 TOTAL DAYS: 180
 MD: WOOD, BEVERLY -

PLAINTIFF'S
EXHIBIT

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 2

BENZTROPINE 1MG TABS (COGENTIN)

SIG: TAKE ONE PO QHS

SIG:

START DATE: 03/18/14 TOTAL DAYS: 180

MD: WOOD, BEVERLY -

GEODON 40MG

SIG: TAKE ONE PO QHS WITH FOOD OR CRACKERS

SIG:

START DATE: 03/18/14 TOTAL DAYS: 180

MD: WOOD, BEVERLY -

SIGNED OFF ON 03/18/14 @ 11:40 BY BEVERLY A WOOD, PSYCHIATRIST

MAR UPDATED FORWARD FOR LABS

SIGNED OFF ON 03/18/14 @ 15:58 BY JONI ROGERS, LICENSED PRACTICAL NURSE

LAB TECH NOTIFIED

SIGNED OFF ON 03/20/14 @ 8:40 BY COURTNEY A DIXON, LICENSED PRACTICAL NURSE

** ENCOUNTER: 372 MENTAL HEALTH CLINIC 02/25/14 8:01 LEE COMP

S: INCREASE IN AH WITH DECREASE IN RISPERDAL. HAS GYNECOMASTIA AND SOME MILK PRODUCTION HE SAYS. PROLACTIN WAS ELEVATED

O: SLEEPS ABOUT 5 HOURS. APPETITE IS OK. HEARS VOICES ABOUT ONCE PER WEEK. LASTS ABOUT 20 MINUTES WHEN IT OCCURS. VOICES JUST HOLD CONVERSATION WITH HIM. NO VH. FEELS OK MOST OF THE TIME. DENIES SI/HI.

A: SCHIZOPHRENIA, GYNECOMASTIA WHICH MAY BE SECONDARY TO RISPERDAL

P: START GEODON

PLAN TO D/C RISPERDAL NEXT VISIT

RTC 2 TO 3 WKS

MEDICAL F/U FOR GYNECOMASTIA

GEODON 20MG

SIG: TAKE ONE PO QHS WITH FOOD FOR 4 DAYS THEN INCREASE

SIG: TO TWO PO QHS

START DATE: 02/25/14 TOTAL DAYS: 30

MD: WOOD, BEVERLY -

PLEASE GIVE HS SNACK OR CRACKERS WITH GEODON

SIGNED OFF ON 02/25/14 @ 8:07 BY BEVERLY A WOOD, PSYCHIATRIST

MAR UPDATED.

SIGNED OFF ON 03/08/14 @ 10:44 BY SHELISSE THOMAS, LICENSED PRACTICAL NURSE

CRT SENT TO CAFETERIA

PLACED ON NEEDS LIST FOR F/U R/T GYNECOMASTIA PER MD HEDGEPATH

C. AYERS, BSN, RN-BC

SIGNED OFF ON 03/09/14 @ 8:34 BY CHARLES E AYERS JR, UNCLASSIFIED

** ENCOUNTER: 371 MENTAL HEALTH CLINIC 02/05/14 9:57 LEE COMP

MED RENEWAL

RISPERDAL 1MG TABS (RISPERIDONE)

SIG: TAKE ONE PO QHS

SIG:

START DATE: 02/05/14 TOTAL DAYS: 180

MD: JUSTICE, DAVID -

SIGNED OFF ON 02/05/14 @ 9:57 BY BEVERLY A WOOD, PSYCHIATRIST

MAR UPDATED.

SCDC# [REDACTED]

WHITE, JOHNNY -

PAGE 3

SIGNED OFF ON 02/06/14 @ 10:40 BY STEPHANIE M BROWN, LICENSED PRACTICAL NURSE

** ENCOUNTER: 368 MENTAL HEALTH CLINIC 01/07/14 10:12 LEE
LAB RESULT: PROLACTIN LEVEL IS 14 (4-15.2)

SIGNED OFF ON 01/07/14 @ 10:12 BY BEVERLY A WOOD, PSYCHIATRIST

** ENCOUNTER: 366 MENTAL HEALTH CLINIC 01/02/14 9:49 LEE
CCC I/C NOTE:

D:I/M ATTENDED THE SESSION AND EXPRESSED TO WRITER THAT HE WAS CONCERNED ABOUT THE HIS BREAST GROWING DUE TO THE SIDE-EFFECTS OF TAKING THE RISPERDAL. I/M STATED THAT HE HAS TAKEN THE MEDS FOR YEARS. I/M EXPLAIN D TO WRITER THAT HIS CURRENT MEDS ARE HELPING HIM TO MANAGE HIS ILLNESS. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. NO SADNESS OR DEPRESSION NOTED.

A/DX: SCHIZOPHRENIA. I/M WAS CALM AND COOPERATIVE. HE IS ORIENTED TO PLACE, YEAR AND DATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/ PSYCHOLOGICAL DISTRESS. I/M SPEECH IS CLEAR, THOUGHTS ORGANIZED. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME. GAF: 80

F: CCC WILL CONTINUE TO MONITOR I/M PRN.

F: DENNIS CCCIV.

SIGNED OFF ON 01/02/14 @ 9:55 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 364 MENTAL HEALTH CLINIC 11/13/13 16:25 LEE
PATIENT REPORTS "I'M GOOD." HE DENIES MOOD OR PSYCHOTIC SYMPTOMS. HE NOTES NO CHANGE IN GYNECOMASTIA.

MSE: APPEARS HEALTHY. SPEECH NORMAL. MOOD CALM, RHYTHMIC. AFFECT APPROPRIATE. THOUGHT PROCESS LOGICAL, SEQUENTIAL. THOUGHT CONTENT NO SI/HI, NO A/V HALLUCINATIONS.

I/M: SCHIZOPHRENIA.

NO CHANGE IN MEDICATIONS. HE WILL NEED PROLACTIN LEVEL DRAWN, NOT DONE YET

SIGNED OFF ON 11/13/13 @ 16:27 BY DAVID A JUSTICE, UNCLASSIFIED

SIGNED OFF ON 11/14/13 @ 15:37 BY MARIA C ANDERSON, LICENSED PRACTICAL NURSE

SIGNED OFF ON 11/16/13 @ 9:23 BY KAREN MAROUSSON SABAGHA, REGISTERED NURSE

** ENCOUNTER: 363 MENTAL HEALTH CLINIC 11/12/13 13:29 LEE
MED RENEWAL

DOSE OF RISPERDAL HAS BEEN DECREASED TWICE. WILL DECREASE COSENTIN. NOT SURE IF HE NEEDS IT AT ALL.

SIG: TAKE ONE PO QPM

ZOLOFT 100MG TABS (SERTRALINE)

SIG: DECREASE TO ONE PO QPM

MD: WOOD, BEVERLY -

START DATE: 11/12/13 TOTAL DAYS: 180

MD: WOOD, BEVERLY -

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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 4

SIGNED OFF ON 11/12/13 @ 13:30 BY BEVERLY A WOOD, PSYCHIATRIST
MAR UPDATED

SIGNED OFF ON 11/12/13 @ 15:20 BY JONI ROGERS, LICENSED PRACTICAL NURSE

- ** ENCOUNTER: 362 MENTAL HEALTH CLINIC 10/25/13 10:06 LEE COMP
RESPONSE TO LIFE GROUP NOTE: GROUP WAS HELD ON 10/21/2013 BY E. BROWN GROUP
LEADER. THE SESSION WAS #5 WHAT WORKS VERSUS WHAT DOES NOT. INMATE WILL
CONTINUE GROUP.
E. BROWN CCC IV
SIGNED OFF ON 10/25/13 @ 10:11 BY EARNEST BROWN, HUMAN SERVICES COORD I
- ** ENCOUNTER: 359 MENTAL HEALTH CLINIC 10/14/13 10:56 LEE COMP
RESPONSE TO LIFE GROUP NOTE: SESSION #4 INMATE LEARNED PROCESSING SKILLS AS
A RESULT OF THEIR TIME IN THE CHARACTER DORM. INMATE PARTICIPATED WELL IN
GROUP. INMATE WILL CONTINUE GROUP.
E. BROWN CCC IV
SIGNED OFF ON 10/14/13 @ 11:05 BY EARNEST BROWN, HUMAN SERVICES COORD I
- ** ENCOUNTER: 358 MENTAL HEALTH CLINIC 10/14/13 10:53 LEE COMP
GROUP NOTE RESPONSE TO LIFE GROUP: GROUP WAS CANCELLED DUE TO LOCKDOWN OF
KERSHAW DORM. 10/7/13 AND 10/11/13 WERE THE DATES THAT THEY WERE LOCKED
DOWN.
E. BROWN CCC IV
SIGNED OFF ON 10/14/13 @ 10:56 BY EARNEST BROWN, HUMAN SERVICES COORD I
- ** ENCOUNTER: 357 MENTAL HEALTH CLINIC 10/14/13 10:49 LEE COMP
LATE ENTRY RESPONSE TO LIFE GROUP NOTE: GROUP WAS HELD ON 10/04/13 BY E.
BROWN. SESSION WAS ON "WHAT ARE WE FACING AND HOW ARE DEALING WITH IT".
INMATE PARTICIPATED WELL IN THE SESSION AND HE WILL CONTINUE WITH GROUP.
E. BROWN CCC IV
SIGNED OFF ON 10/14/13 @ 10:53 BY EARNEST BROWN, HUMAN SERVICES COORD I
- ** ENCOUNTER: 355 MENTAL HEALTH CLINIC 10/11/13 11:38 LEE COMP
CCC TX. TEAM REVIEW NOTE: I/M WAS DISCUSSED IN TX. TEAM. I/M CARRIES A DX. OF
SAD. MEDS PRESCRIBED: RISPERDAL, BENZTROPINE, ZOLOFT. TX. PLAN STAFFED AND
APPROVED. MEMBERS PRESENT: BROWN. FOR ANY ADDITIONAL INFO SEE HARD COPY IN
MEDICAL RECORDS. UPDATE: 04-02-14.
P. DENNIS CCCIV.
SIGNED OFF ON 10/11/13 @ 11:40 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 352 MENTAL HEALTH CLINIC 10/10/13 7:34 LEE COMP
CCC I/C NOTE:
D: I/M JOHNNY WHITE ATTENDED THE SESSION WELL GROOMED AND ANSWERED ALL
QUESTIONS APPROPRIATELY. I/M STATED THAT HE IS COMPLIANT WITH TAKING HIS
PRESCRIBED MEDS. I/M INFORMED WRITER THAT HE WAS EAGER TO GET HIS
PRIVILEGES RESTORED. I/M WHITE INFORMED WRITER THAT TO REMAIN PATIENT
AND ALLOW THE ADMINISTRATION TO RESOLVE HIS SITUATION. I/M DENIED
EXPERIENCING A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. NO
SADNESS OR DEPRESSION NOTED.
A/DX: SAD. I/M WAS CALM AND COOPERATIVE. HE IS ORIENTED TO PLACE, YEAR AND

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SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY

05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 5

DATE. I/M SPEECH IS CLEAR, THOUGHTS ORGANIZED AND GOAL DIRECTED. I/M APPEARS STABLE. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME. GAF:85
P:CCC WILL CONTINUE TO MONITOR I/M PRN.
P.DENNIS CCCIV.
SIGNED OFF ON 10/10/13 @ 7:52 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 347 MENTAL HEALTH CLINIC 08/30/13 14:40 LEE COMP
CCC RESPONSE TO LIFE GROUP. TODAY'S GROUP FOCUSED ON FEELINGS. I/M WAS ABLE TO COMMUNICATE EFFECTIVELY DURING GROUP.
P.DENNIS CCCIV.
SIGNED OFF ON 08/30/13 @ 14:42 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 346 MENTAL HEALTH CLINIC 08/30/13 13:51 LEE COMP
CCC I/C NOTE:

D:I/M JOHNNY WHITE ATTENDED THE SESSION WELL-GROOMED AND ANSWERED ALL QUESTIONS APPROPRIATELY. I/M WHITE INFORMED WRITER THAT HE WAS ANXIOUS ABOUT HAVING THE OPPORTUNITY OF HAVING HIS VISITS RESTORED. CCC ENCOURAGED I/M WHITE TO REMAIN DISCIPLINARY FREE. I/M REPORTS THAT HE IS COMPLIANT WITH TAKING HIS PRESCRIBED MEDS. I/M DENIED ANY SIDE-EFFECTS. I/M DENIED HAVING ANY SYMPTOMS FROM HIS ILLNESS AT THIS TIME. CCC PRAISED I/M WHITE FOR HIS PARTICIPATION IN THE RESPONSE TO LIFE GROUP. NO PSYCHOSIS NOTED.

A/DX: SCHIZOAFFECTIVE. HE IS ORIENTED TO PLACE, YEAR AND DATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. HYGIENE WAS GOOD. THOUGHTS ORGANIZED. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME. GAF:85

P:CCC WILL CONTINUE TO MONITOR I/M PRN.

P.DENNIS CCCIV.

SIGNED OFF ON 08/30/13 @ 13:59 BY PAUL N DENNIS, HUMAN SERVICES COORD I.

** ENCOUNTER: 345 MENTAL HEALTH CLINIC 08/20/13 12:35 LEE COMP
A RESPONSE TO LIFE GROUP NOTE: GROUP LEADER E. BROWN. SESSION #2 WAS ON ADMIT TO ILLEGAL OR UNETHICAL BEHAVIORS AND CONFRONT THEM. INMATE GAVE GOOD FEEDBACK IN THE SESSION. INMATE UNDERSTANDS THE IMPORTANTS OF FACING UP TO HE PART OF A PROBLEM. INMATE WILL CONTINUE GROUP.
E. BROWN CC IV
SIGNED OFF ON 08/20/13 @ 12:41 BY EARNEST BROWN, HUMAN SERVICES COORD I

** ENCOUNTER: 344 MENTAL HEALTH CLINIC 08/19/13 8:33 LEE COMP
A RESPONSE TO LIFE GROUP NOTE: GROUP LEADER E. BROWN. INMATE PARTICIPATED IN A NEW PROGRAM THAT FOCUSES ON CLIENTS LEARNING HOW TO EXPRESS THEMSELVES AND WAYS TO COMMUNICATE MORE EFFECTIVELY. INMATE INERACTED WITH OTHER INMATES FROM THE BLIC DORM IN A MENTORING SESSION ASSISTING YOUNGER INMATES IN EXPRESSING THEIR NEGATIVE FEELINGS IN ODER TO BRING ABOUT A POSITIVE CHANGE INMATE REPORTED THAT HE FELT GOOD ABOUT THE INTERACTION WITH BLIC DORM INMATES.
E. BROWN CC IV
SIGNED OFF ON 08/19/13 @ 8:47 BY EARNEST BROWN, HUMAN SERVICES COORD I

** ENCOUNTER: 341 MENTAL HEALTH CLINIC 08/07/13 14:09 LEE COMP

SCDC# [REDACTED]

WHITE, JOHNNY -

PAGE 6

PATIENT REPORTS "I'M GOOD." HE REPORTS NO ILL EFFECTS FROM THE LOWER DOSE OF RISPERDAL, BUT HAS NOTED NO CHANGE THUS FAR IN GYNECOMASTIA.
MSE: APPEARS HEALTHY. SPEECH NORMAL. MOOD CALM, EUTHYMIC. AFFECT APPROPRIATE. THOUGHT PROCESS LOGICAL, SEQUENTIAL. THOUGHT CONTENT NO SI/HI, NO A/V HALLUCINATIONS.
TIME: SCHIZOAFFECTIVE DISORDER.
HE IS DOING WELL AND WE DISCUSSED OPTIONS. I WILL LOWER HIS DOSE OF RISPERDAL FURTHER AND HE WILL NEED REPEAT PROLACTIN LEVEL DONE IN ONE MONTH'S TIME.

RISPERDAL 1MG TABS (RISPERIDONE)
SIG: ONE PILL BY MOUTH DAILY AT 8PM PILL TIME

SIG: START DATE: 08/07/13 TOTAL DAYS: 180

MD: JUSTICE, DAVID -

SIGNED OFF ON 08/07/13 @ 14:11 BY DAVID A JUSTICE, UNCLASSIFIED

MAR UPDATED

SIGNED OFF ON 08/08/13 @ 11:58 BY COURTNEY A DIXON, LICENSED PRACTICAL NURSE

C. AYERS, BSN, RN-BC
LAB SCHEDULER NOTIFIED VIA NEEDS LIST

SIGNED OFF ON 08/10/13 @ 6:52 BY CHARLES E AYERS JR, UNCLASSIFIED

** ENCOUNTER: 340 MENTAL HEALTH CLINIC 06/19/13 17:43 LEE
LABS REVIEWED, PROLACTIN LEVEL EVALUATED AT 23.1. I WILL REDUCE RISPERDAL DOSE AND HE SHOULD BE SEEN WITHIN ONE MONTH.

RISPERDAL 2MG TABS (RISPERIDONE)
SIG: ONE PILL BY MOUTH EVERY EVENING

SIG: START DATE: 06/19/13 TOTAL DAYS: 180

MD: JUSTICE, DAVID -

SIGNED OFF ON 06/19/13 @ 17:44 BY DAVID A JUSTICE, UNCLASSIFIED

MAR UPDATED

SIGNED OFF ON 06/19/13 @ 18:40 BY STEPHANIE M BROWN, LICENSED PRACTICAL NURSE

** ENCOUNTER: 336 MENTAL HEALTH CLINIC 06/04/13 15:12 LEE
CCC I/C NOTE:

D: I/M WAS SEEN ON THE YARD AFTER HIS BEER WALK WITH THE ELIC DORM WORKERS. I/M REPORTED THAT HE WAS ADJUSTING WELL IN THE GENERAL POPULATION. I/M ACKNOWLEDGED THAT HE EXPERIENCES SOME DEPRESSION AT TIMES DUE TO THE SEPARATION OF FAMILY. I/M IS REQUESTING TO BE PLACED IN THE OUTSIDE GARDEN SO THAT HE COULD WORK TO EARN HIS PRIVILEGES. CCC EXPLAINED TO I/M WHILE THAT HE NEEDED TO TAKE HIS MEDS DAILY AS PRESCRIBED. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME

A/DX: SCHIZOAFFECTIVE D/O. I/M MOOD WAS STABLE. I/M THOUGHTS ORGANIZED AND GOAL DIRECTED. I/M SPEECH IS CLEAR. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. HYGIENE WAS APPROPRIATE. NO SIGNS OR SYMPTOMS OF DECOMPENSATION NOTED. I/M APPEARS STABLE. GAF: 85

P: CCC WILL CONTINUE TO MONITOR I/M PRN.
P: DENNIS CCCIA.

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SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY

05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 7

SIGNED OFF ON 06/04/13 @ 15:36 BY PAUL N DENNIS, HUMAN SERVICES COORD I

- ** ENCOUNTER: 334 MENTAL HEALTH CLINIC 05/09/13 9:13 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE STATES HE IS DOING OK. NOTES HIS KNEES AND ELBOWS HAVE BEEN BOTHERING HIM. ALSO ASKS ABOUT IF RISPERDAL CAN MAKE YOU GROW BREASTS. WE DISCUSSED IT CAN INCREASE PROLACTIN LEVELS WHICH COULD CAUSE TENDERNESS AND GALACTORRHEA. HE STATES MILD TENDERNESS AT TIMES BUT DENIES ANY GALACTORRHEA.
C: ALERT, ORIENTED, MOOD OK, DENIES SI/AVH
A: SCHIZOAFFECTIVE D/O
P: RENEW ZOLOFT, COGENTIN. CONTINUE RISPERDAL FOR NOW. WILL CHECK PROLACTIN LEVELS WITH OTHER LABS. IF ELEVATED COULD REDUCE DOSE OF RISPERDAL.
***LABS: FASTING LIPID PANEL, GLUCOSE, PROLACTIN LEVEL.
ZOLOFT 100MG TABS (SERTRALINE)
SIG: ONE PO QPM
SIG:
START DATE: 05/09/13 TOTAL DAYS: 180
MD: POLLOCK, RALPH C
BENZTROPINE 2MG TABS (COGENTIN)
SIG: ONE PO QPM
SIG:
START DATE: 05/09/13 TOTAL DAYS: 180
MD: POLLOCK, RALPH C
SIGNED OFF ON 05/09/13 @ 9:15 BY RALPH C POLLOCK, UNCLASSIFIED
MARS UPDATED/RETURNED TO NURSES SCREEN FOR REVIEW
SIGNED OFF ON 05/09/13 @ 14:39 BY SANDRA T JONES, LICENSED PRACTICAL NURSE
LAB TECH NOTIFIED
SIGNED OFF ON 05/10/13 @ 14:12 BY COURTNEY A DIXON, LICENSED PRACTICAL NURSE
- ** ENCOUNTER: 330 MENTAL HEALTH CLINIC 04/04/13 13:22 LEE COMP
CCC TX TEAM REVIEW NOTE: I/M WAS DISCUSSED IN TX TEAM. I/M CARRIES A DX OF SAD. MEDS PRESCRIBED: RISPERDAL, BENZTROPINE, ZOLOFT. TX PLAN STAFFED AND APPROVED. MEMBERS PRESENT: BREON, ZIMMERMAN, JONES, DELP, BROWN, INABINET. FOR ANY ADDITIONAL INFO SEE HARD COPY IN MEDICAL RECORDS. UPDATE: 10-02-13
P. DENNIS CCCIV.
SIGNED OFF ON 04/04/13 @ 13:24 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 329 MENTAL HEALTH CLINIC 03/04/13 15:03 LEE COMP
CCC NOTE: I/C SESSION
D: I/M SEEN FOR OUTPATIENT MH F/UP IN ABSENCE OF PRIMARY CCC. I/M WHITE WAS ON TIME & WELL GROOMED FOR SESSION. HE WAS A&O IN ALL SPHERES W/GOOD EYE CONTACT. HIS MOOD/AFFECT WAS CALM/RELAXED. "I'M DOING PRETTY GOOD". HE HAD NO MH OR OTHER C/O TODAY. HE REPORTED GETTING/TAKING PSYCH MEDS AS RX WITH NO PROBLEMS NOTED. HE DENIED SXS OF PSYCHOSIS OR H/S THOUGHTS/PLANS. HE REPORTED SLEEP & APPETITE WNL. HIS SPEECH WAS LOGICAL & THOUGHTS WELL PRESENTED. REPORTED DOING WELL W/CURRENT ROOMATE & NO PROBLEMS IN MHSLU. I/M WAS POLITE/COOPERATIVE W/ASSESSMENT. ASKED ABOUT PRIMARY CCC'S RETURN & ADVISED WILL BE IN A FEW WEEKS. I/M PLEASANT/STABLE.
A: DX = SAFD. GAF - 74. I/M WHITE APPEARS TABLE ON MEDS & DOING WELL.
P: PRIMARY CCC WILL CONTINUE TO MONITOR PER TX PLAN. G. BREON, CCCIII

MDCI880D
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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 8

SIGNED OFF ON 03/04/13 @ 15:07 BY SUSAN V BREON, HUMAN SERVICES COORD I

** ENCOUNTER: 328 MENTAL HEALTH CLINIC 02/25/13 9:31 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE STATES HE IS DOING WELL. DENIES SIDE EFFECTS FROM MEDS. MOOD IS GOOD. HE ASKS TO GET ON BENADRYL FOR ITCHING AND ALLERGI ES. EXPLAINED HE WOULD NEED TO SEE MEDICAL FOR THIS.

O: ALERT, ORIENTED, MOOD OK, DENIES SI/AVH

A: SCHIZOAFFECTIVE D/O

P: RENEW RISPERDAL, CONTINUE COGENTIN, ZOLOFT
RISPERDAL 3MG TABS (RISPERIDONE)

SIG: ONE PO QPM

SIG:

START DATE: 02/25/13 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 02/25/13 @ 9:32 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED

SIGNED OFF ON 02/27/13 @ 12:10 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 325 MENTAL HEALTH CLINIC 12/12/12 9:56 LEE COMP
CCC I/C NOTE (12-04-12)

D: I/M WAS SEEN IN MEDICAL. I/M REPORTS THAT HE WAS COMPLIANT WITH TAKING HIS PRESCRIBED MEDS. CCC EXPLAINED TO I/M WHITE THAT TAKING HIS MEDS DAILY WILL HELP WITH MANAGING HIS ILLNESS. CCC ENCOURAGED I/M TO REMAIN DISCIPLINARY FREE. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. I/M REPORTED EATING AND SLEEPING WITH NO DISTRESS. CCC PRAISED I/M WHITE FOR ATTEMPTING T IMPORVE HIS INTERACTI ON WITH PEERS. NO PSYCHOSIS NOTED.

A/DX: SAD. I/M EXPRESSED A BRIGHT AFFECT. HE IS ORIENTED TO PLACE, YEAR AND DATE. NO EVIDENCE OF HALLUCINATIONS OR DELUSIONS. THOUGHTS ORGANIZED AND GOAL DIRECTED. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/ PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE. GAF: 80

P: CCC WILL CONTINUE TO MONITOR I/M PRN.

P. DENNIS CCCIV.

SIGNED OFF ON 12/12/12 @ 10:01 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 322 MENTAL HEALTH CLINIC 11/26/12 10:04 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE STATES HE IS DOING WELL. DENIES SIDE EFFECTS FROM MEDS. MOOD IS GOOD.

O: ALERT, ORIENTED, MOOD GOOD, DENIES SI/AVH

A: SCHIZOAFFECTIVE D/O

P: CONTINUE CURRENT RX

***LABS: FASTING LIPID PANEL, GLUCOSE

SIGNED OFF ON 11/26/12 @ 10:05 BY RALPH C POLLOCK, UNCLASSIFIED

SO NOTED/RETURNED TO NURSES SCREEN FOR LABS

SIGNED OFF ON 11/29/12 @ 12:20 BY SANDRA T JONES, LICENSED PRACTICAL NURSE
ON SCHEDULED NEEDS LIST

R LAPOINTE, RN

SIGNED OFF ON 12/02/12 @ 11:45 BY ROXANNE F LAPOINTE, UNCLASSIFIED

** ENCOUNTER: 321 MENTAL HEALTH CLINIC 11/19/12 8:13 LEE COMP

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SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY

05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 9

RENEW

BENZTROPINE 2MG TABS (COGENTIN)

SIG: ONE PO QPM

SIG:

START DATE: 11/19/12 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

ZOLOFT 100MG TABS (SERTRALINE)

SIG: ONE PO QPM

SIG:

START DATE: 11/19/12 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 11/19/12 @ 8:14 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED

SIGNED OFF ON 11/19/12 @ 13:39 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 320 MENTAL HEALTH CLINIC 10/11/12 15:10 LEE COMP
CCC TX. TEAM REVIEW NOTE: I/M WAS DISCUSSED IN TX. TEAM. I/M CARRIES A DX. OF
SAD. MEDS PRESCRIBED: RISPERDAL, BENZTROPINE, ZOLOFT. TX. PLAN STAFFED AND
APPROVED. MEMBERS PRESENT: BREON, DELP, JONES, LT. BRADLY. FOR ANY ADDITIONAL INFO
SEE HARD COPY IN MEDICAL RECORDS. UPDATE: 04-04-13
P. DENNIS CCCIV.
SIGNED OFF ON 10/11/12 @ 15:12 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 319 MENTAL HEALTH CLINIC 09/04/12 12:58 LEE COMP
CCC I/C NOTE (09-04-12)
D: I/M JOHNNY WHITE ATTENDED THE SESSION WELL-GROOMED AND ANSWERED ALL
QUESTIONS APPROPRIATELY. I/M REPORTED EATING AND SLEEPING WITH NO
DISTRESS. I/M WHITE REPORTS THAT HE WAS COMPLIANT WITH TAKING HIS
PRESCRIBED MEDS. CCC COUNSELED I/M WHITE ON THE IMPORTANCE OF TAKING HIS
MEDS DAILY. I/M WHITE INFORMED CCC THAT HE WOULD LIKE TO BE CONSIDERED
FOR WORKING ON THE YARD CREW WHERE HE COULD EARN PRIVILEGES FOR PAST
INFRACTIONS. I/M DENIED ANY MENTAL HEALTH CONCERNS AT THIS TIME.
A/DX: SCHIZOAFFECTIVE D/O. I/M WAS CALM AND COOPERATIVE. HE IS ORIENTED TO
PLACE, YEAR AND DATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE
EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M SPEECH IS CLEAR,
THOUGHTS ORGANIZED. NO SIGNS OR SYMPTOMS OF DECOMPENSATION. I/M APPEARS
STABLE. GAF: 70
P: CCC WILL CONTINUE TO MONITOR I/M PRN.
P. DENNIS CCCIV.
SIGNED OFF ON 09/04/12 @ 13:05 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 318 MENTAL HEALTH CLINIC 08/27/12 9:45 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE STATES HIS LEG IS HURTING. HE STATES HE WAS
TOLD HE HAD TO TALK WITH MENTAL HEALTH TO GET PAIN MEDS SUCH AS NEURONTIN.
EXPLAINED THAT I DO NOT RX PAIN MEDS. WAS UNABLE TO FIND WHERE ANY DOCUM
ENTATION RECENTLY ABOUT BEING SEEN IN MEDICAL FOR PAIN. HE DENIES SIDE EFF
ECTS OF CURRENT PSYCH MEDS. MOOD IS GOOD
O: ALERT, ORIENTED, MOOD OK, DENIES SI/AVH
A: SCHIZOAFFECTIVE D/O
P: RENEW RISPERDAL, CONTINUE COGENTIN/ZOLOFT. ENCOURAGED HIM TO SIGN UP FO

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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 10

R SICK CALL IF LEG PAIN PERSISTS.

RISPERDAL 3MG TABS (RISPERIDONE)

SIG:ONE PO QPM

SIG:

START DATE: 08/27/12 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 08/27/12 @ 9:47 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED

SIGNED OFF ON 08/30/12 @ 16:37 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 306 MENTAL HEALTH CLINIC 06/04/12 12:53 LEE COMP
CCC I/C NOTE:

D: I/M JOHNNY WHITE ATTENDED THE SESSION WELL-GROOMED AND ANSWERED ALL QUESTIONS APPROPRIATELY. I/M REPORTS EATING AND SLEEPING WITH NO DISTRESS. CCC ADDRESSED WITH I/M WHITE ABOUT THE IMPORTANCE OF IMPROVING HIS MED COMPLIANCE. CCC EXPLAINED TO I/M WHITE THAT HE NEEDS TO TAKE HIS MEDS DAILY AS PRESCRIBED. I/M AGREED TO IMPROVE HIS MED. COMPLIANCE. CCC ALSO ENCOURAGED I/M WHITE TO TRY TO OBTAIN A JOB SO THAT HE CAN GET SKILLS NEEDED FOR HIS REENTRY BACK INTO THE COMMUNITY.

A/DX: SCHIZOAFFECTIVE D/O. I/M WAS COOPERATIVE DURING INTERVIEW. I/M SPEECH IS CLEAR, THOUGHTS ORGANIZED. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. NO EVIDENCE OF HALLUCINATIONS OR DELUSIONS NOTED. GAF:65

P: CCC WILL CONTINUE TO MONITOR I/M PRN.

P. DENNIS CCCIV.

SIGNED OFF ON 06/04/12 @ 13:00 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 305 MENTAL HEALTH CLINIC 05/31/12 10:54 LEE COMP

S: I/M SEEN FOR FOLLOW-UP. HE STATES HE IS DOING OK. RECENTLY WENT BACK TO COURT FOR PCR AND STATES HE GOT CONTINUANCE. HE DENIES ANY SIDE EFFECTS SINCE CHANGING HALDOL TO RISPERDAL. MINIMAL HALLUCINATIONS.

O: ALERT, ORIENTED, MOOD GOOD, BRIGHT AFFECT, DENIES SI/AVH

A: SCHIZOAFFECTIVE D/O

P: RENEW COGNETIN/ZOLOFT, CONTINUE RISPERDAL

***LABS: FASTING LIPID PANEL, GLUCOSE

BENZTROPINE 2MG TABS (COGENTIN)

SIG: ONE PO QPM

SIG:

START DATE: 05/31/12 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

ZOLOFT 100MG TABS (SERTRALINE)

SIG: ONE PO QPM

SIG:

START DATE: 05/31/12 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 05/31/12 @ 10:56 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED/RETURNED TO NURSE SCREEN FOR LABS

SIGNED OFF ON 06/01/12 @ 15:08 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

LABS ENTERED ON SCHEDULING LIST

SIGNED OFF ON 06/07/12 @ 17:24 BY GWENDOLYN T STOKES, REGISTERED NURSE II

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 11

- ** ENCOUNTER: 301 MENTAL HEALTH CLINIC 05/18/12 8:18 KIRKLAND COMP
 MEDS FOR COURT
 ZOLOFT 100MG TABS (SERTRALINE)
 SIG: TAKE ONE PO QHS
 SIG:
 START DATE: 05/18/12 TOTAL DAYS: 5
 MD: WOOD, BEVERLY -
 BENZTROPINE 2MG TABS (COGENTIN)
 SIG: TAKE ONE PO QHS COURT
 SIG:
 START DATE: 05/18/12 TOTAL DAYS: 5
 MD: WOOD, BEVERLY -
 RISPERDAL 3MG TABS (RISPERIDONE)
 SIG: TAKE ONE PO QHS COURT
 SIG:
 START DATE: 05/18/12 TOTAL DAYS: 5
 MD: WOOD, BEVERLY -
 SIGNED OFF ON 05/18/12 @ 8:20 BY YOLANDA R DELGADO, HUMAN SERVICES COORD II
 SIGNED OFF ON 05/18/12 @ 8:22 BY BEVERLY A WOOD, PSYCHIATRIST
 NOTED
 SIGNED OFF ON 05/18/12 @ 8:24 BY BREE A BEAUCHAMP, REGISTERED NURSE I
- ** ENCOUNTER: 298 MENTAL HEALTH CLINIC 04/05/12 15:45 LEE COMP
 CCC TX. TEAM REVIEW NOTE: I/M WAS DISCUSSED IN TX. TEAM. I/M CARRIES A DX OF
 SAD. MEDS PRESCRIBED: RISPERDAL, BENZTROPINE. TX. PLAN STAFFED AND APPROVED.
 MEMBERS PRESENT: NICKENS, BREON, DAVID. DR. POLLOCK, RICARDS, LT. BRADLEY. FOR ANY
 ADDITIONAL INFORMATION SEE HARD COPY IN MEDICAL RECORDS. UPDATE: 10-06-12
 P. DENNIS CCCIV.
 SIGNED OFF ON 04/05/12 @ 15:56 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 296 MENTAL HEALTH CLINIC 04/05/12 11:24 LEE COMP
 CCC I/C NOTE:
 D: I/M JOHNNY WHITE ATTENDED THE SESSION WELL-GROOMED AND ANSWERED ALL
 QUESTIONS APPROPRIATELY. I/M INFORMED CCC THAT HE IS HAPPY ABOUT BEING
 IN THE MENTAL HEALTH DORM. I/M REPORTED EATING AND SLEEPING WITH NO
 DISTRESS. CCC DISCUSSED WITH I/M WHITE ABOUT THE IMPORTANCE OF TAKING
 HIS MEDS DAILY AS PRESCRIBED. CCC EXPLAINED TO I/M WHITE THAT HIS MEDS
 COULD BE DISCONTINUED DUE TO HIS POOR COMPLIANCE. I/M WHITE IS REQUESTING
 THAT STAFF ADVOCATE TO GET HIS VISITATION PRIVILEGES BACK ONCE HE IS
 ONE YEAR DISCIPLINARY FREE. CCC ENCOURAGED I/M WHITE TO WRITE STAFF
 REQUEST TO THE WARDEN ABOUT HIS CONCERNS. NO SYMPTOMS OF HIS ILLNESS
 NOTED. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H
 IDEATIONS AT THIS TIME. NO PSYCHOSIS NOTED.
 A/DX: I/M EXPRESSED A BRIGHT AFFECT. I/M WAS COOPERATIVE. HYGIENE WAS NEAT.
 THOUGHTS ORGANIZED AND GOAL DIRECTED. I/M ABLE TO MAKE GOOD DECISIONS.
 I/M APPEARS STABLE. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME.
 GAF: 70
 P: CCC WILL CONTINUE TO MONITOR I/M PRN.
 P. DENNIS CCCIV.

MDCI880D
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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 12

SIGNED OFF ON 04/05/12 @ 11:54 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 294 MENTAL HEALTH CLINIC 03/01/12 10:46 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE NOTES HE IS HAVING SOME CRAMPING IN MOUTH AND WOULD LIKE TO CHANGE BACK TO RISPERDAL. HAS BEEN ON HALDOL SINCE 3/10. DENIES ANY CURRENT HALLUCINATIONS.

O: ALERT, ORIENTED, MOOD OK, DENIES SI/HI/AVH

A: SAD

P: WILL TAPER HALDOL AND RESTART RISPERDAL. CONTINUE COGENTIN AND ZOLOFT HALOPERIDOL 5MG TABS (HALDOL)

SIG:TWO PO QPM X 3 DAYS, THEN ONE PO QPM X 3 DAYS THEN

SIG: D/C

START DATE: 03/01/12 TOTAL DAYS: 6

MD: POLLOCK, RALPH C

RISPERDAL 3MG TABS (RISPERIDONE)

SIG: ONE-HALF PO QPM X 1 WEEK THEN ONE PO QPM

SIG:

START DATE: 03/01/12 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 03/01/12 @ 10:49 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED

SIGNED OFF ON 03/01/12 @ 12:59 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 293 MENTAL HEALTH CLINIC 02/24/12 16:09 LEE COMP
SUBSTANCE ABUSE GROUP NOTE:

(SESSION III)

IN THIS GROUP SESSION HELD ON 01/31/12, PARTICIPANTS GAINED AWARENESS OF USE/ABUSE ISSUES AND IMPACT ON LIFE. I/M WHITE PARTICIPATED WELL IN GROUP.

TRACY NICKENS, CCCIV

SIGNED OFF ON 02/27/12 @ 16:10 BY TRACY M NICKENS, HUMAN SERVICES COORD I

** ENCOUNTER: 292 MENTAL HEALTH CLINIC 02/23/12 22:47 LEE COMP
SUBSTANCE ABUSE GROUP NOTE:

(SESSION II)

IN THIS GROUP SESSION HELD ON 01/30/12, PARTICIPANTS WERE ADMINISTERED A PRE-TEST ABOUT THEIR GENERAL KNOWLEDGE OF SUBSTANCE ABUSE. I/M WHITE ACTIVELY PARTICIPATED IN GROUP DISCUSSION.

TRACY NICKENS, CCCIV

SIGNED OFF ON 02/24/12 @ 23:50 BY TRACY M NICKENS, HUMAN SERVICES COORD I

** ENCOUNTER: 290 MENTAL HEALTH CLINIC 02/07/12 22:54 LEE COMP
SUBSTANCE ABUSE GROUP NOTE:

(SESSION I)

THIS FIRST GROUP SESSION HELD ON 01/27/12 PROVIDED A GENERAL OVERVIEW OF THE ANGER MANAGEMENT TREATMENT GROUP WHICH INCLUDED GROUP RULES AND EXPECTATIONS. I/M WHITE PARTICIPATED WELL IN GROUP DISCUSSION.

TRACY NICKENS, CCCIV

SIGNED OFF ON 02/13/12 @ 9:56 BY TRACY M NICKENS, HUMAN SERVICES COORD I

** ENCOUNTER: 288 MENTAL HEALTH CLINIC 01/13/12 16:18 LEE COMP

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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 13

CCC I/C NOTE:

D: I/M JOHNNY WHITE WAS SEEN IN MEDICAL. I/M EXPRESSED TO WRITER THAT HE WAS HAPPY TO BE BACK INTO THE MENTAL HEALTH DORM. I/M INFORMED CCC THAT HE WOULD NOT RECEIVE ANY FURTHER DISCIPLINARIES. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. NO PSYCHOSIS NOTED.

A/DX: SAD. I/M EXPRESSED A BRIGHT AFFECT. HE IS ORIENTED TO PLACE, YEAR AND DATE. I/M SPEECH IS CLEAR, THOUGHTS ORGANIZED. NO SIGNS OR SYMPTOMS OF DECOMPENSATION NOTED. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME.

P: CCC WILL CONTINUE TO MONITOR I/M PRN.

P. DENNIS CCCIV.

SIGNED OFF ON 01/13/12 @ 16:46 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 287 MENTAL HEALTH CLINIC 12/08/11 8:50 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. IN CHESTERFIELD FOR CELL PHONE CHARGE. STATES HE IS HAVING HARD TIME WITH CURRENT ROOMMATE. FEELS THINGS WOULD BE BETTER IF HE HAD A DIFFERENT ONE. DENIES ANY RECENT PSYCHOSIS. OBVIOUS STRESS FROM CURRENT SITUATION. HE SPOKE WITH CCC TODAY REGARDING THIS

O: ALERT, ORIENTED, MOOD STRESSED, DENIES SI/AVH

A: SAD

P: CURRENT SYMPTOMS APPEAR MORE SITUATIONAL RATHER THAN PRIMARY PSYCHIATRIC. WILL RENEW CURRENT MEDICATIONS.

HALOPERIDOL 5MG TABS (HALDOL)

SIG: THREE PO QPM

SIG:

START DATE: 12/08/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

BENZTROPINE

2MG

SIG: ONE PO QPM

SIG:

START DATE: 12/08/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

ZOLOFT 100MG TABS (SERTRALINE)

SIG: ONE PO QPM

SIG:

START DATE: 12/08/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 12/08/11 @ 8:52 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED

SIGNED OFF ON 12/08/11 @ 10:43 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 285 MENTAL HEALTH CLINIC 11/14/11 9:25 LEE COMP
CCC TX TEAM REVIEW NOTE: (10-08-11) I/M WAS DISCUSSED IN TX TEAM. I/M CARRIES A DX: OF SAD. MEDS PRESCRIBED: HALOPERIDOL, BENZTROPINE, ZOLOFT. TX PLAN STAFFED AND APPROVED. MEMBERS PRESENT: BREON, NICKENS, DAVID, DR. POLLOCK, MAJOR DEAN. FOR ANY ADDITIONAL INFORMATION SEE HARD COPY IN MEDICAL RECORDS. UPDATE: 04-08-12

P. DENNIS CCCIV.

SIGNED OFF ON 11/14/11 @ 9:32 BY PAUL N DENNIS, HUMAN SERVICES COORD I

MDCI880D
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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 14

- ** ENCOUNTER: 282 MENTAL HEALTH CLINIC 10/17/11 10:23 LEE COMP
CCC I/C NOTE:
D: I/M WAS SEEN MEDICAL. I/M REPORTS THAT HE IS FEELING STRESSED ABOUT A RECENT CHARGE FOR FOR PHONE CHARGE. I/M DENIED HAVING ANY THOUGHTS TO HURT SELF OR OTHERS AT THIS TIME. I/M INFORMED CCC THAT HE IS COMPLIANT WITH TAKING HIS MEDS. NO PSYCHOSIS NOTED.
A/DX: SAD. HE IS ORIENTED TO PLACE, YEAR AND DATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE.
P: CCC WILL CONTINUE TO MONITOR I/M PRN.
P. DENNIS CCCIV.
SIGNED OFF ON 10/20/11 @ 19:33 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 280 MENTAL HEALTH CLINIC 09/08/11 9:35 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE STATES HE IS DOING OK. DENIES SIDE EFFECTS FROM MEDS. MOOD IS OK.
O: ALERT, ORIENTED, MOOD FAIR, DENIES SI/AVH
A: SAD
P: CONTINUE HALDOL, COGENTIN, ZOLOFT.
SIGNED OFF ON 09/08/11 @ 9:36 BY RALPH C POLLOCK, UNCLASSIFIED
SO NOTED
SIGNED OFF ON 09/08/11 @ 10:00 BY SANDRA T JONES, LICENSED PRACTICAL NURSE
- ** ENCOUNTER: 279 MENTAL HEALTH CLINIC 08/05/11 17:07 LEE COMP
CCC I/C NOTE:
D: I/M ATTENDED THE SESSION WELL-GROOMED AND ANSWERED ALL QUESTIONS APPROPRIATELY. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. CCC COUNSELED I/M ON THE IMPORTANCE OF TAKING HIS MEDS. NO BEHAVIOR PROBLEMS NOTED. CCC ENCOURAGED I/M TO ATTEND HIS GROUP THERAPY SESSIONS.
A/DX: SCHIZOPHRENIA. I/M EXPRESSED A BRIGHT AFFECT. HE IS ORIENTED TO PLACE, YEAR AND DATE. HYGIENE WAS APPROPRIATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE. GAF: 70
P: CCC WILL CONTINUE TO MONITOR I/M PRN.
P. DENNIS CCCIV.
SIGNED OFF ON 08/05/11 @ 17:12 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 275 MENTAL HEALTH CLINIC 06/22/11 10:26 LEE COMP
CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON, LEADER
**TODAY WE REVIEWED HOMEWORK FROM SESSION #7 AND COMPLETED MATERIALS FROM SESSION #8 TO INCLUDE POST-TEST. I/M SHOWED IMPROVEMET W/POST TEST SCORES. OVERALL, DID WELL IN GROUP SETTING. GROUP SUCCESSFULLY COMPLETED. CERTIFICATE GIVEN. G. BREON, CCCIII
SIGNED OFF ON 06/22/11 @ 10:27 BY SUSAN V BREON, HUMAN SERVICES COORD I
NOTED
SIGNED OFF ON 06/24/11 @ 11:16 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 274 MENTAL HEALTH CLINIC 06/16/11 11:30 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE STATES HE IS DOING OK. HE ACKNOWLEDGES THAT

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 15

HE HAD SOME DYSTONIA ONE DAY WITH HIS TONGUE AND WAS GIVEN SOME BENADRYL BUT HAS NOT EXPERIENCED IT SINCE. HE DENIES ANY CURRENT SIDE EFFECTS.

O: ALERT, ORIENTED, MOOD FAIR, DENIES SI/AVH

A: SCHIZOPHRENIA

P: WILL RENEW MEDS

HALOPERIDOL 5MG

SIG: THREE PO QPM

SIG:

START DATE: 06/16/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

BENZTROPINE 2MG

SIG: ONE PO QPM

SIG:

START DATE: 06/16/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

ZOLOFT 100MG

SIG: ONE PO QPM

SIG:

START DATE: 06/16/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 06/16/11 @ 11:31 BY RALPH C POLLOCK, PSYCHIATRIST

MARS UPDATED

SIGNED OFF ON 06/18/11 @ 11:41 BY JOYCE RENEE POLEN, REGISTERED NURSE I

- ** ENCOUNTER: 273 MENTAL HEALTH CLINIC 06/15/11 12:16 LEE COMP
 CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON, LEADER
 **** I/M WAS A NO SHOW TODAY. REASON UNKNOWN. IS 1ST ABSENCE. CONTINUE GROUP. G. BREON, CCCIII
 SIGNED OFF ON 06/15/11 @ 12:16 BY SUSAN V BREON, HUMAN SERVICES COORD I
- ** ENCOUNTER: 272 MENTAL HEALTH CLINIC 06/08/11 12:05 LEE COMP
 CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON-LEADER
 **TODAY WE COVERED MATERIALS FROM SESSION #6 ON RELAPSE PREVENTION. GAVE HANDOUT/HOMEWORK ASSIGNMENT ON IDENTIFYING INTERNAL & EXTERNAL TRIGGERS. I/M WHITE WAS ATTENTIVE. STATED HE WAS NOT FEELING WELL TODAY, BUT PARTICIPATED APPROPRIATELY. CONTINUE GROUP. G. BREON, CCCIII
 SIGNED OFF ON 06/08/11 @ 12:07 BY SUSAN V BREON, HUMAN SERVICES COORD I
- ** ENCOUNTER: 271 MENTAL HEALTH CLINIC 06/01/11 16:45 LEE COMP
 CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON - LEADER
 **TODAY WE COVERED MATERIALS FROM SESSION #5 ON THE PROCESS OF RECOVERY. I/M WHITE WAS ATTENTIVE, READ ALOUD & PARTICIPATED WELL. CONTINUE GROUP. G. BREON, CCCIII
 SIGNED OFF ON 06/01/11 @ 16:46 BY SUSAN V BREON, HUMAN SERVICES COORD I
- ** ENCOUNTER: 270 MENTAL HEALTH CLINIC 05/25/11 15:26 LEE COMP
 CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON, LEADER
 **TODAY WE COVERED MATERIALS FROM SESSION #4 ON "HAZARDS OF SUBSTANCE ABUSE". WE DID PRE-TEST & REVIEW OF HANDOUT. I/M WHITE PARTICIPATED WELL. CONTINUE GROUP. G. BREON, CCCIII

SIGNED OFF ON 05/26/11 @ 17:03 BY SUSAN V BREON, HUMAN SERVICES COORD I

** ENCOUNTER: 269 MENTAL HEALTH CLINIC 05/25/11 15:26 LEE
CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON, LEADER

**TODAY WE COVERED MATERIALS FROM SESSION #3 ON "DYNAMICS OF ADDICTION"
I/M WHITE WAS ATTENTIVE W/GOOD FEEDBACK GIVEN. CONTINUE GROUP.

SIGNED OFF ON 05/26/11 @ 17:03 BY SUSAN V BREON, HUMAN SERVICES COORD I

** ENCOUNTER: 268 MENTAL HEALTH CLINIC 05/18/11 16:48 LEE
CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON, LEADER

**TODAY WE COVERED MATERIALS FROM SESSION #2, PRE-TEST & SELF-ASSESSMENT.
I/M WHITE COMPLETED EXERCISES AS ASKED & PROVIDED GOOD FEEDBACK. PROGRESS
NOTED. CONTINUE GROUP.

SIGNED OFF ON 05/19/11 @ 9:14 BY SUSAN V BREON, HUMAN SERVICES COORD I

** ENCOUNTER: 267 MENTAL HEALTH CLINIC 05/18/11 16:47 LEE
CCC GROUP NOTE (SUBSTANCE ABUSE): G. BREON, LEADER

**TODAY WAS SESSION #1 OF NEW GROUP. WE COVERED INTRODUCTIONS, OVERVIEW OF
GROUP, GROUP RULES & TERMS TO BE USED. I/M WHITE WAS ATTENTIVE & PARTICIPAT
ED WELL. CONTINUE GROUP.

SIGNED OFF ON 05/19/11 @ 9:13 BY SUSAN V BREON, HUMAN SERVICES COORD I

** ENCOUNTER: 266 MENTAL HEALTH CLINIC 05/13/11 11:14 LEE
CCC TX TEAM REVIEW NOTE 04-08-11.I/M WAS DISCUSSED IN TX TEAM.I/M CARRIES A
DX OF SCHIZOPHRENIA.MEDS PRESCRIBED:AMITRIPTYLINE,ZOLOFT,HALOPERIDOL.TX PLAN
STAFFED AND APPROVED.MEMBERS PRESENT:NICKENS,BREON,DAVID,STRONG,LONEY,
MAJOR DEAN.FOR ANY ADDITIONAL INFORMATION SEE HARD COPY IN MEDICAL RECORDS
.UPDATE:10-08-11

SIGNED OFF ON 05/13/11 @ 11:17 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 265 MENTAL HEALTH CLINIC 05/04/11 14:41 LEE
CCC I/C NOTE:

D:I/M WAS SEEN IN MEDICAL.I/M WHILE EXPRESSED TO CCC THAT HE RECENTLY
RECEIVED A CHARGE FOR HAVING CONTRABAND. CCC EXPLAINED TO I/M WHITE THAT
THIS TYPE OF BEHAVIOR WILL NOT BE TOLERATED. I/M AGREED TO REFRAIN FROM
RECEIVING ANY FURTHER DISCIPLINARIES. I/M DENIED EXPERIENCING ANY A/V
HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. NO SADNESS OR
DEPRESSION NOTED.

A/DX: SCHIZOPHRENIA. I/M EXPRESSED A CALM MOOD. HE IS ORIENTED TO PLACE, YEAR
AND DATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/
PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE.GAR:60
P:CCC WILL CONTINUE TO MONITOR I/M PRN.
P.DENNIS CCCIV.

SIGNED OFF ON 05/04/11 @ 14:49 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 264 MENTAL HEALTH CLINIC 04/11/11 12:18 LEE
CCC TX TEAM REVIEW NOTE:I/M TX PLAN DEVELOPED ON 04-08-11.I/M WAS
DISCUSSED IN TX TEAM.I/M CARRIES A DX OF SCHIZOPHRENIA.MEDS PRESCRIBED:

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 17

HALOPERIDOL, BENZTROPINE, ZOLOFT. TXX. PLAN STAFFED AND APPROVED. MEMBERS PRESENT: NICKENS, BREON, DAVID, LONEY, BRADLEY, DR. POLLOCK, STRONG, WINTERS, MAJOR DEAN. FOR ANY ADDITIONAL INFORMATION SEE HARD COPY IN MEDICAL RECORDS. UPDATE: 10-08-11.

P. DENNIS CCCIV.

SIGNED OFF ON 04/11/11 @ 12:21 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 262 MENTAL HEALTH CLINIC 03/30/11 12:03 LEE COMP
OPEN IN ERROR. L. DAVID, CCCIII.

SIGNED OFF ON 03/30/11 @ 12:05 BY LIBBY A DAVID, HUMAN SERVICES COORD I

** ENCOUNTER: 261 MENTAL HEALTH CLINIC 03/26/11 8:41 LEE COMP
GRP NOTE: ANGER MGMT., SESSION 3. 3/25

I/M DID NOT ATTEND TODAY'S SCHEDULED SESSION WHICH FOCUSED ON "ANGER STYLES" THIS WAS HIS 3 UNEXCUSED ABSENCE. I/M PRIMARY CCC WILL NOTIFIED. CCC RECOMMENDS FOR I/M TO BE D/C'ED FROM GRP DUE TO POOR ATTENDANCE. L. DAVID, CCCIII.

SIGNED OFF ON 03/26/11 @ 8:45 BY LIBBY A DAVID, HUMAN SERVICES COORD I NOTED.

SIGNED OFF ON 03/28/11 @ 8:16 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 260 MENTAL HEALTH CLINIC 03/24/11 9:01 LEE COMP

S: I/M SEEN FOR FOLLOW-UP. HE NOTES HE IS DOING OK. DENIES ANY SIDE EFFECTS FROM MEDICATIONS. NOTES HE DID HAVE SOME SHAKING IN HIS HANDS FOR AN HOUR A COUPLE WEEKS AGO BUT ATTRIBUTES IT TO HAVING JUST CARRIED SOME HEAVY T RAYS. DENIES ANY SINCE.

O: ALERT, ORIENTED, MOOD FAIR, DENIES SI/AVH

A: SCHIZOPHRENIA

P: CONTINUE HALDOL 15MG, COGENTIN 2MG, ZOLOFT 100MG ALL QHS. AIMS DONE WITH NO ABNL MOVEMENTS.

***LABS: FASTING LIPID PANEL, GLUCOSE.

SIGNED OFF ON 03/24/11 @ 9:03 BY RALPH C POLLOCK, PSYCHIATRIST

SO NOTED/RETURNED TO NURSING SCREEN FOR LABS

SIGNED OFF ON 03/24/11 @ 9:47 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

LAB NOTIFIED PER SCHEDULING NEEDS LIST

SIGNED OFF ON 03/25/11 @ 12:31 BY JOYCE RENEE POLEN, REGISTERED NURSE I

** ENCOUNTER: 259 MENTAL HEALTH CLINIC 03/21/11 11:41 LEE COMP

GRP NOTE: ANGER MGMT., SESSION 2.

I/M DID NOT ATTEND TODAY'S SCHEDULED SESSION WHICH FOCUSED ON "WHAT IS ANGER" THIS WAS HIS 2ND UNEXCUSED SESSION. CCC RECOMMENDS FOR I/M TO PARTICIPATE IN THE NEXT SCHEDULED SESSION OR WILL BE DISCHARGED FROM GRP.

L. DAVID, CCCIII.

SIGNED OFF ON 03/21/11 @ 11:43 BY LIBBY A DAVID, HUMAN SERVICES COORD I NOTED

SIGNED OFF ON 03/22/11 @ 8:28 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 258 MENTAL HEALTH CLINIC 03/21/11 11:36 LEE COMP

GRP NOTE: ANGER MGMT., SESSION 1.

I/M DID NOT ATTEND TODAY'S GRP WHICH FOCUSED ON "GRP OVERVIEW, RULES, EXPECT-

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC#

WHITE, JOHNNY -

PAGE 18

ATIONS. THIS WAS HIS 1ST UNEXCUSED SESSION. CCC RECOMMENDS FOR I/M TO CONTINUE GRP PARTICIPATION.

L. DAVID, CCCIII.

SIGNED OFF ON 03/21/11 @ 11:40 BY LIBBY A DAVID, HUMAN SERVICES COORD I

** ENCOUNTER: 256 MENTAL HEALTH CLINIC 02/15/11 9:52 LEE COMP
CCC I/C NOTE:

D: I/M JOHNNY WHITE WAS SEEN IN MEDICAL ON TODAY. I/M WHITE EXPRESSED TO CCC THAT HE WAS ADJUSTING WELL IN THE GENERAL POPULATION. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. I/M REPORTED THAT HE WAS EATING AND SLEEPING WITH NO DISTRESS. CCC ENCOURAGED I/M WHITE TO IMPROVE HIS COMPLIANCE WITH TAKING HIS PRESCRIBED MEDS. NO PSYCHOSIS NOTED.

A/DX: SCHIZOPHRENIA. I/M EXPRESSED A BRIGHT AFFECT. HYGIENE WAS APPROPRIATE.

I/M SPEECH WAS CLEAR, THOUGHTS ORGANIZED. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE. GAF: 65

P: CCC WILL CONTINUE TO MONITOR I/M PRN.

P. DENNIS CCCIV.

SIGNED OFF ON 02/15/11 @ 10:06 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 255 MENTAL HEALTH CLINIC 01/05/11 10:53 LEE COMP

S: I/M SEEN FOR FOLLOW-UP. HE NOTES HE IS DOING OK. CCC ADVISED THAT HE HAS HAD POOR COMPLIANCE WITH MEDICATIONS (PARTICULARLY NOON DOSE). HE ASKS IF MEDS CAN BE CHANGED TO ALL AT 5PM LINE. DENIES ANY SIDE EFFECTS FROM MEDS. NO RECENT PSYCHOSIS

O: ALERT, ORIENTED, MOOD GOOD, DENIES SI/AVH

A: SCHIZOPHRENIA

P: WILL CHANGE MED TIMES

HALOPERIDOL 5MG

SIG: THREE PO QHS

SIG:

START DATE: 01/05/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

BENZTROPINE 2MG

SIG: ONE PO QHS

SIG:

START DATE: 01/05/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

ZOLOFT 100MG

SIG: ONE PO QHS

SIG:

START DATE: 01/05/11 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 01/05/11 @ 10:55 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED

SIGNED OFF ON 01/05/11 @ 13:27 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 254 MENTAL HEALTH CLINIC 11/03/10 10:36 LEE COMP

CCC I/C NOTE:

D: I/M WAS SEEN IN MEDICAL. I/M REPORTS EATING AND SLEEPING WITH NO DISTRESS.

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
FRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 19

I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. I/M INFORMED CCC THAT HE WAS EXCITED ABOUT HIS UP-COMING VISIT WITH HIS 15 YEAR OLD DAUGHTER. I/M WHITE REPORTS THAT HE WANTS TO IMPROVE HIS RELATIONSHIP WITH FAMILY. I/M STATED THAT HE WAS COMPLIANT WITH TAKING HIS PRESCRIBED MEDS. NO PSYCHOSIS NOTED.

A/DX: SCHIZOPHRENIA. I/M EXPRESSED A CALM MOOD. HE IS ORIENTED TO PLACE, YEAR AND DATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/ PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME.

P: CCC WILL CONTINUE TO MONITOR I/M PRN.

P. DENNIS CCCIV.

SIGNED OFF ON 11/03/10 @ 10:43 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 253 MENTAL HEALTH CLINIC 10/18/10 8:38 LEE COMP
CCC TX. TEAM INITIAL NOTE: I/M WAS DISCUSSED IN TX. TEAM. I/M CARRIES A DX OF SCHIZOPHRENIA. MEDS PRESCRIBED: BENZTROPINE, ZOLOFT, HALOPERIDOL. TX. PLAN STAFFE D AND APPROVED. FOR ANY ADDITIONAL INFORMATION SEE HARD COPY IN MEDICAL RECORDS. UPDATE: 04/2011.

SIGNED OFF ON 10/18/10 @ 8:45 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 252 MENTAL HEALTH CLINIC 10/06/10 11:19 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE NOTES HE IS DOING OK WITH INCREASED HALDOL. DENIES SIDE EFFECTS FROM MEDS. NOTES VOICES ARE MINIMAL AND DEPRESSION IS DOING BETTER.

O: ALERT, ORIENTED, MOOD OK, DENIES SI/AVH

A: SCHIZOPHRENIA

P: RENEW MEDS

BENZTROPINE 1MG

SIG: ONE PO TWICE DAILY (NOON AND HS)

SIG:

START DATE: 10/06/10 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

ZOLOFT 100MG

SIG: ONE PO DAILY AT NOON

SIG:

START DATE: 10/06/10 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 10/06/10 @ 11:22 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED

SIGNED OFF ON 10/06/10 @ 14:14 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 251 MENTAL HEALTH CLINIC 09/01/10 9:11 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE STATES HE IS DOING OK, STILL HEARS VOICES OCCASIONALLY. ASKS IF HALDOL CAN BE INCREASED. NO PROBLEMS WITH DEPRESSION.

O: ALERT, ORIENTED, MOOD GOOD, DENIES SI, OCC AH

A: SCHIZOPHRENIA

P: INCREASE HALDOL TO 5MG NOON + 10MG HS. CAN INCREASE COGENTIN TO 2MG TWICE IF ANY SIDE EFFECTS FROM INCREASED HALDOL.

HALOPERIDOL 5MG

SIG: ONE PO QNOON AND TWO PO QHS

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
FRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 20

SIG:

START DATE: 09/01/10 TOTAL DAYS: 180

MD: POLLOCK, RALPH C

SIGNED OFF ON 09/01/10 @ 9:13 BY RALPH C POLLOCK, UNCLASSIFIED

MEDS NOTED BY PHARMACY DIRECT MARS UPDATED

SIGNED OFF ON 09/01/10 @ 17:52 BY SHERI L SCOTT, LICENSED PRACTICAL NURSE

- ** ENCOUNTER: 250 MENTAL HEALTH CLINIC 08/03/10 12:50 LEE COMP
CCC I/C NOTE:
D: I/M JOHNNY WHITE WAS SEEN IN KERSHAW ON TODAY. I/M REPORTED THAT HE WAS DOING WELL. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. CCC PRAISED I/M WHITE FOR HIS COMPLIANCE WITH TAKING HIS PRESCRIBED MEDICATION. NO BEHAVIOR PROBLEMS NOTED. I/M WHITE INFORMED CCC THAT HE UNDERSTANDS THAT HIS MEDS HELP HIM TO MANAGE HIS ILLNESS. NO PSYCHOSIS NOTED.
A/DX: SCHIZOPHRENIA. I/M EXPRESSED A BRIGHT AFFECT. HE IS ORIENTED TO PLACE, YEAR AND DATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. HYGIENE WAS APPROPRIATE. I/M APPEARS STABLE. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME.
P: CCC WILL CONTINUE TO MONITOR I/M PRN.
P. DENNIS CCCIV.
SIGNED OFF ON 08/03/10 @ 13:05 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 249 MENTAL HEALTH CLINIC 06/02/10 13:17 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE NOTES HE IS DOING OK. DENIES ANY SIDE EFFECTS FROM MEDS. HALLUCINATIONS ARE GREATLY DECREASED, MOOD IS GOOD.
O: ALERT, ORIENTED, MOOD GOOD, DENIES SI/HI/AVH
A: SCHIZOPHRENIA
P: CONTINUE HALDOL, COGENTIN, ZOLOFT.
SIGNED OFF ON 06/02/10 @ 13:19 BY RALPH C POLLOCK, UNCLASSIFIED
NOTED.
SIGNED OFF ON 06/02/10 @ 13:28 BY JACQUELINE STRONG, HUMAN SERVICES COORD I
- ** ENCOUNTER: 248 MENTAL HEALTH CLINIC 05/12/10 14:58 LEE COMP
CCC I/C NOTE:
D: I/M JOHNNY WHITE WAS SEEN IN MEDICAL. I/M WHITE EXPRESSED TO CCC THAT HE WAS ADJUSTING WELL IN THE KERSHAW UNIT. I/M REPORTED EATING AND SLEEPING WITH NO DISTRESS. CCC COUNSELED I/M WHITE ON THE IMPORTANCE OF BEING COMPLIANT WITH TAKING HIS PRESCRIBED MEDICATION. CCC PRAISED I/M WHITE FOR FOLLOWING ALL RULES AND ATTENDING INDIVIDUAL AND GROUP THERAPY AS SCHEDULED. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. NO PSYCHOSIS NOTED.
A/DX: SCHIZOPHRENIA. I/M EXPRESSED A BRIGHT AFFECT. HE IS ORIENTED X5. I/M SPEECH IS CLEAR, THOUGHTS ORGANIZED. HYGIENE WAS APPROPRIATE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME.
P: CCC WILL CONTINUE TO MONITOR I/M PRN.
P. DENNIS CCCIV.
SIGNED OFF ON 05/12/10 @ 15:08 BY PAUL N DENNIS, HUMAN SERVICES COORD I

MDCI880D
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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 21

- ** ENCOUNTER: 247 MENTAL HEALTH CLINIC 04/21/10 15:09 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. HE NOTES THE HALDOL HAS HELPED WITH THE VOICES BUT HE IS HAVING SOME DYSTONIA AND REQUESTS TO BE BACK ON COGENTIN HE USED TO TAKE AS WELL. HE ALSO NOTES HE WAS PREVIOUSLY ON ZOLOFT FOR DEPRESSION AND HAS BEEN MORE DOWN RECENTLY. REVIEW OF RECORDS SHOW HE WAS ON HALDOL, COGENTIN AND ZOLFT IN 2006 AND DID WELL.
O: ALERT, ORIENTED, MOOD DOWN, DENIES SI/HL/AVH
A: SCHIZOPHRENIA
P: WILL PUT BACK ON PREVIOUS REGIMEN.
HALOPERIDOL 5MG
SIG: ONE PO TWICE DAILY (NOON AND HS)
SIG:
START DATE: 04/21/10 TOTAL DAYS: 180
MD: POLLOCK, RALPH C
BENZTROPINE 1MG
SIG: ONE PO TWICE DAILY (NOON AND HS)
SIG:
START DATE: 04/21/10 TOTAL DAYS: 180
MD: POLLOCK, RALPH C
ZOLOFT 100MG
SIG: TAKE ONE-HALF PO DAILY AT NOON X 1 WEEK, THEN ONE
SIG: PO DAILY AT NOON
START DATE: 04/21/10 TOTAL DAYS: 180
MD: POLLOCK, RALPH C
SIGNED OFF ON 04/21/10 @ 15:11 BY RALPH C POLLOCK, UNCLASSIFIED
WILL ROUTE TO PILL ROOM NURSES TO UPDATE MARS. KAREN COOPER RN
SIGNED OFF ON 04/21/10 @ 16:04 BY KAREN C COOPER, UNCLASSIFIED
MAR UPDATED TO REFLECT MED AS ORDERED.
SIGNED OFF ON 04/23/10 @ 12:26 BY STEPHANIE M BROWN, LICENSED PRACTICAL NURSE
- ** ENCOUNTER: 246 MENTAL HEALTH CLINIC 04/09/10 13:02 LEE COMP
CCC TX. TEAM REVIEW NOTE: I/M WAS DISCUSSED IN TX. TEAM. I/M CARRIES A DX OF SCHIZOPHRENIA. MEDS PRESCRIBED: HALOPERIDOL. TX. PLAN STAFFED AND APPROVED. MEMBERS PRESENT: NICKENS, BREON. FOR ANY ADDITIONAL INFORMATION SEE HARD COPY IN MEDICAL RECORDS. UPDATE: 10/2010.
P. DENNIS CCCIV.
SIGNED OFF ON 04/09/10 @ 13:06 BY PAUL N DENNIS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 245 MENTAL HEALTH CLINIC 04/08/10 23:37 LEE COMP
EDUCATION EDUCATION GROUP NOTE:
THIS FINAL GROUP SESSION FOCUSED ON SUMMARIZING AND REITERATING IMPORTANCE OF SELF-REGULATION/RESPONSIBILITY. I/M WHOTE PARTICIAPTED WELL IN GROUP DISCUSSION. HE ATTENDED ALL EIGHT SESSIONS. I/M HAS SUCCESSFULLY COMPLETED THIS GROUP.
TRACY NICKENS, CCCIV
SIGNED OFF ON 04/09/10 @ 10:38 BY TRACY M NICKENS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 244 MENTAL HEALTH CLINIC 04/06/10 13:45 LEE COMP
MEDICATION EDUCATION GROUP NOTE:
(LATE ENTRY FOR 04/01/10)

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
FRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 22

THIS SESSION ENTAILED DISCUSSION ABOUT "COMPLIANCE ISSUES" TO INCLUDE PARTICIPANTS GAINING ACCEPTANCE OF REGULAR MEDICATION COMPLIANCE. I/M WHITE WAS MOSTLY NONVERBAL DURING GROUP DISCUSSION. HOWEVER, HE INTER-ACTED APPROPRIATELY WHEN PROMPTED. RECOMMEND I/M ATTEND FINAL GROUP SESSION SCHEDULED FOR 04/08/10.

TRACY NICKENS, CCCIV

SIGNED OFF ON 04/06/10 @ 13:48 BY TRACY M NICKENS, HUMAN SERVICES COORD I

- ** ENCOUNTER: 243 MENTAL HEALTH CLINIC 03/25/10 22:42 LEE COMP
 MEDICATION EDUCATION GROUP NOTE:
 THIS SESSION ENTAILED PARTICIPANTS LEARNING TO IDENTIFY MAJOR SYMPTOMS, MEDICATIONS AND POSSIBLE SIDE EFFECTS USED WITH ANXIETY/DEPRESSION AND OTHER DISORDERS. I/M WHITE PARTICIPATED WELL IN GROUP DISCUSSION AND DEMONSTRATED SOME KNOWLEDGE OF DISORDERS DISCUSSED. NEXT GROUP SESSION SCHEDULED FOR 04/01/10.
 TRACY NICKENS, CCCIV
 SIGNED OFF ON 03/25/10 @ 22:44 BY TRACY M NICKENS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 242 MENTAL HEALTH CLINIC 03/18/10 15:45 LEE COMP
 MEDICATION EDUCATION GROUP NOTE:
 CCC UNABLE TO CONDUCT GROUP TODAY DUE TO INSTITUTIONAL LOCK-DOWN. GROUP RESCHEDULED FOR 03/25/10.
 TRACY NICKENS, CCCIV
 SIGNED OFF ON 03/18/10 @ 15:45 BY TRACY M NICKENS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 240 MENTAL HEALTH CLINIC 03/11/10 22:52 LEE COMP
 MEDICATION EDUCATION GROUP NOTE:
 THIS SESSION ENTAILED PARTICIPANTS LEARNING TO IDENTIFY MAJOR SYMPTOMS, MEDICATIONS AND POSSIBLE SIDE EFFECTS USED WITH BIPOLAR DISORDER. I/M WHITE PARTICIPATED WELL IN GROUP DISCUSSION. RECOMMEND I/M ATTEND NEXT GROUP SESSION SCHEDULED FOR 03/18/10.
 TRACY NICKENS, CCCIV
 SIGNED OFF ON 03/15/10 @ 16:06 BY TRACY M NICKENS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 239 MENTAL HEALTH CLINIC 03/04/10 12:18 LEE COMP
 MEDICATION EDUCATION GROUP NOTE:
 THIS GROUP SESSION FOCUSED ON PARTICIPANTS BEING ABLE TO IDENTIFY MAJOR SYMPTOMS, MEDICATIONS AND POSSIBLE SIDE EFFECTS USED WITH SCHIZOPHRENIA. I/M WHITE WAS MOSTLY NONVERBAL DURING GROUP DISCUSSION BUT APPEARED ATTENTIVE.
 TRACY NICKENS, CCCIV
 SIGNED OFF ON 03/04/10 @ 12:20 BY TRACY M NICKENS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 238 MENTAL HEALTH CLINIC 03/03/10 15:10 LEE COMP
 S: I/M SEEN FOR FOLLOW-UP. HE NOTES HIS VOICES HAVE BEEN WORSE SINCE MOVING TO SUMTER DORM. ASKS IF HE CAN GO BACK ON HIS HALDOL WHICH HE PREVIOUSLY TOOK.
 O: ALERT, ORIENTED, MOOD "NOT GOOD", DENIES SI/HI, +AH
 A: SCHIZOPHRENIA
 PLEASE D/C RISPERDAL AFTER HALDOL IS AVAILABLE FROM PHARMACY

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY

MDJ1880D
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SCDC# [REDACTED] WHITE, JOHNNY -

HALOPERIDOL
5MG
SIG: ONE PO QHS X 3 DAYS THEN ONE PO TWICE DAILY (NOON
SIG: AND HS)
START DATE: 03/03/10 TOTAL DAYS: 90
MD: POLLOCK, RALPH C
SIGNED OFF ON 03/03/10 @ 15:12 BY RALPH C POLLOCK, UNCLASSIFIED
MARS UPDATED

SIGNED OFF ON 03/04/10 @ 11:26 BY SANDRA T JONES, LICENSED PRACTICAL NURSE

** ENCOUNTER: 237 MENTAL HEALTH CLINIC 02/18/10 22:00 LEE COMP

MEDICATION EDUCATION GROUP NOTE:

CCC UNABLE TO CONDUCT SCHEDULED GROUP TODAY DUE TO INSULTION BEING ON
LOCK-DOWN. GROUP RESCHEDULED FOR 03/04/10.

TRACY NICKENS, CCCIV
SIGNED OFF ON 02/18/10 @ 22:01 BY TRACY M NICKENS, HUMAN SERVICES COORD I

** ENCOUNTER: 236 MENTAL HEALTH CLINIC 02/05/10 11:02 LEE COMP

CCC I/C NOTE:

D:I/M JOHNNY WHITE ATTENDED THE SESSION WELL-GROOMED AND ANSWERED ALL
QUESTIONS APPROPRIATELY. I/M WHITE INFORMED CCC THAT HE WANTED A COPY OF HIS
MENTAL HEALTH RECORDS SO THAT HE COULD PREPARE HIS LEGAL WORK PRIOR TO HIM
GOING BACK TO COURT. I/M REPORTED THAT HE CONTINUES TO EXPERIENCE THE VOICES
FROM HIS VICTIM. I/M ONLY REPORTED THAT HE HAS EXPERIENCED AUDIO
HALLUCINATIONS TWICE IN THE PAST MONTH. CCC WILL SCHEDULE I/M TO BE SEEN BY
THE PSYCHIATRIST WHEN A SLOT BECOMES AVAILABLE. I/M DENIED HAVING ANY
SUICIDAL IDEATIONS. CCC ENCOURAGED I/M WHITE TO REMAIN 100% COMPLIANT WITH
TAKING HIS PRESCRIBED PSYCHOTROPIC MEDICATION. I/M APPEARS STABLE.

A/DX: SCHIZOPHRENIA IN REMISSION. HE IS ORIENTED TO PLACE, YEAR AND DATE. I/M
MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS
AT THIS TIME. I/M APPEARS STABLE. NO PSYCHOSIS NOTED. HE IS NOT A DANGER TO
SELF OR OTHERS AT THIS TIME.
P: CCC WILL CONTINUE TO MONITOR I/M PHN.
P: DENNIS CCCIV,
SIGNED OFF ON 02/05/10 @ 11:13 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 235 MENTAL HEALTH CLINIC 02/04/10 22:27 LEE COMP

MEDICATION EDUCATION GROUP NOTE:

D: GROUP SESSION III ENTAILLED PARTICIPANTS GAINING AND UNDERSTANDING
OF "HOW IS MI TREATED" TO INCLUDE LEARNING ABOUT TREATMENT OF
VARIOUS FORMS OF MENTAL ILLNESS.

A: I/M WHITE WAS MOSTLY NONVERBAL DURING GROUP DISCUSSION BUT APPEARED
ATTENTIVE.

P: RECOMMEND I/M ATTEND NEXT GROUP SESSION SCHEDULED FOR 02/18/10.

TRACY NICKENS, CCCIV
SIGNED OFF ON 02/08/10 @ 9:49 BY TRACY M NICKENS, HUMAN SERVICES COORD I

** ENCOUNTER: 233 MENTAL HEALTH CLINIC 01/21/10 21:46 LEE COMP

MEDICATION EDUCATION GROUP NOTE:

D: GROUP SESSION II ENTAILLED PARTICIPANTS GAINING KNOWLEDGE OF MENTAL
ILLNESS/RECOGNITION AS A CHRONIC CONDITION.

MDCI880D
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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 24

- A: I/M WHITE PARTICIPATED WELL IN GROUP DISCUSSION. HE WAS ABLE TO PROVIDE AN ACCURATE DEFINITION OF MENTAL ILLNESS.
P: RECOMMEND I/M ATTEND NEXT GROUP SESSION SCHEDULED FOR 02/04/10.
TRACY NICKENS, CCCIV
SIGNED OFF ON 01/22/10 @ 9:32 BY TRACY M NICKENS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 232 MENTAL HEALTH CLINIC 01/20/10 21:31 LEE COMP
MEDICATION EDUCATION GROUP NOTE:
(HELD ON 01/07/10)
D: SESSION I ENTAILED AN ESTABLISHMENT OF GROUP COMMITMENT, COHESION AND NORMS.
A: I/M WHITE PARTICIPATED WELL IN GROUP DISCUSSION FOCUSED ON GENERAL INFORMATION ABOUT DIAGNOSES AND MEDICATION. ALSO, HE COMPLETED A PRE-TEST EXERCISE.
P: RECOMMEND I/M ATTEND NEXT GROUP SESSION SCHEDULED FOR 01/21/10.
TRACY NICKENS, CCCIV
SIGNED OFF ON 01/21/10 @ 21:46 BY TRACY M NICKENS, HUMAN SERVICES COORD I
- ** ENCOUNTER: 231 MENTAL HEALTH CLINIC 12/16/09 15:08 LEE COMP
S: I/M SEEN FOR FOLLOW-UP. DENIES ANY PSYCHOTIC SYMPTOMS OR DEPRESSIVE SYMPTOMS RECENTLY. STATES HE IS DOING WELL WITH NO SIDE EFFECTS. ASKS ME ABOUT HIS WORK RESTRICTIONS AND THAT HE WOULD LIKE TO WORK. INFORMED HIM MR. DENNIS NOT HERE CURRENTLY BUT I WOULD SPEAK WITH HIM TO SEE IF ANY RESTRICTIONS COULD BE CHANGED.
O: ALERT, ORIENTED, MOOD OK, DENIES SI/MI/AVH
A: SCHIZOPHRENIA, REMISSION
P: RENEW RISPERDAL, COULD CONSIDER DECREASING IN FUTURE IF HE CONTINUES TO DO WELL, NO CURRENT EVIDENCE OF PSYCHOSIS
RISPERDAL 3MG
SIG: TAKE ONE PO QHS
SIG:
START DATE: 12/16/09 TOTAL DAYS: 90
MD: POLLOCK, RALPH C
SIGNED OFF ON 12/16/09 @ 15:12 BY RALPH C POLLOCK, UNCLASSIFIED
MARS UPDATED
SIGNED OFF ON 12/23/09 @ 14:22 BY SANDRA T JONES, LICENSED PRACTICAL NURSE
- ** ENCOUNTER: 230 MENTAL HEALTH CLINIC 11/18/09 11:00 LEE COMP
CCC I/C NOTE:
D: I/M WAS SEEN IN MEDICAL AND EXPRESSED TO CCC THAT HE WAS DOING WELL. I/M INFORMED CCC THAT HE IS CURRENTLY SEEKING EMPLOYMENT. CCC ENCOURAGED I/M WHITE TO REMAIN PATIENT AS WELL AS SPEAK WITH HIS CLASSIFICATION WORKER ABOUT HIS CONCERNS. I/M STATED THAT HIS CURRENTS MEDS ARE HELPING HIM TO MANAGE HIS ILLNESS. I/M DENIED EXPERIENCING ANY A/V HALLUCINATIONS AS WELL AS S/H IDEATIONS AT THIS TIME. CCC DISCUSSED WITH I/M WHITE ABOUT PLACEMENT IN GROUP THERAPY. I/M STATED THAT HE WOULD RATHER GET A JOB IN PI SO HE COULD GET A HARSHIP AT BROAD RIVER CI. NO SADNESS OR DEPRESSION NOTED.
A/DX: SCHIZOPHRENIA. I/M WAS CALM, COOPERATIVE. I/M MENTAL STATUS DOES NOT INDICATE ANY ACUTE EMOTIONAL/PSYCHOLOGICAL DISTRESS AT THIS TIME. I/M APPEARS STABLE. HE IS NOT A DANGER TO SELF OR OTHERS AT THIS TIME.

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 25

P:CCC WILL CONTINUE TO MONITOR I/M PRN.

P.DENNIS CCCCIV.

SIGNED OFF ON 11/18/09 @ 11:07 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 227 MENTAL HEALTH CLINIC 10/12/09 15:47 LEE COMP
CCC INCIDENTAL NOTE:I/M WAS CHARGED WITH (820)DESTRUCTION OF STATE PROPERTY
ON 10-06-09.I/M CAN BE HELD ACCOUNTABLE FOR HIS BEHAVIOR.

P.DENNIS CCCCIV.

SIGNED OFF ON 10/12/09 @ 15:49 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 226 MENTAL HEALTH CLINIC 10/09/09 9:59 LEE COMP
CCC TX.TEAM INITIAL NOTE:I/M WAS DISCUSSED IN TX.TEAM.I/M CARRIES A DX.OF
SCHIZOPHRENIA.MEDS PRESCRIBED:RISPERDAL.TX.PLAN STAFFED AND APPROVED.
MEMBERS PRESENT:BREON,NICKENS,STRONG,SGT.JOHNSON,LT.RICHARDSON.FOR ANY
ADDITIONAL INFORMATION SEE HARD COPY IN MEDICAL RECORDS.UPDATE:04/2010.

P.DENNIS CCCCIV.

SIGNED OFF ON 10/09/09 @ 10:04 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 225 MENTAL HEALTH CLINIC 09/29/09 16:11 LEE COMP
CCC INITIAL TX.TEAM NOTE:I/M WAS DISCUSSED IN TX.TEAM.I/M CARRIES A DX.OF
SCHIZOPHRENIA.MEDS PRESCRIBED:RISPERDAL.TX.PLAN STAFFED AND APPROVED.MEMBER
S PRESENT:NICKENS,BREON,STRONG.FOR ANY ADDITIONAL INFORMATION SEE HARD COPY
IN MEDICAL RECORDS.UPDATE:12/09.

P.DENNIS CCCCIV.

SIGNED OFF ON 09/29/09 @ 16:13 BY PAUL N DENNIS, HUMAN SERVICES COORD I

** ENCOUNTER: 224 MENTAL HEALTH CLINIC 09/23/09 15:07 LEE COMP

RENEW MED

RISPERDAL 3MG

SIG:TAKE ONE PO QHS

SIG:

START DATE: 09/23/09 TOTAL DAYS: 90

MD:POLLOCK,RALPH C

SIGNED OFF ON 09/23/09 @ 15:07 BY RALPH C POLLOCK, UNCLASSIFIED

MARS UPDATED....S JONES LPN

SIGNED OFF ON 09/24/09 @ 10:08 BY SANDRA T JONES, UNCLASSIFIED

** ENCOUNTER: 223 MENTAL HEALTH CLINIC 09/23/09 15:04 LEE COMP

S: I/M SEEN FOR EVALUATION. HE HAS A HISTORY OF HEARING VOICES, STATES HE
HAS BEEN TREATED WITH VARIOUS ANTIPSYCHOTICS FOR YEARS. DESCRIBES BEING HO
SPITALIZED AS TEENAGER AT BULL STREET IN COLUMBIA. HAS BEEN TAKING RISPERD
AL X APPROX 1 YEAR SINCE GOING TO JAIL. STATES THE VOICES ARE MINIMAL NOW.

HAS HAD SOME PROBLEMS WITH DEPRESSION IN THE PAST, DENIES ANY CURRENTLY.
NO REAL FAMILY HISTORY OF MENTAL ILLNESS. DESCRIBES PAST USE OF POWDER COC
AINE (1-2 GRAMS PER WEEKEND).

O: ALERT, ORIENTED, MOOD OK, DENIES CURRENT SI/HI/AVH

A: SCHIZOPHRENIA

P: CONTINUE RISPERDAL 3MG QHS.

LABS: FASTING LIPID PANEL, FASTING GLUCOSE.

SIGNED OFF ON 09/23/09 @ 15:06 BY RALPH C POLLOCK, UNCLASSIFIED

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 26

LAB TECH NOTIFIED. D. JOHNSON RN
SIGNED OFF ON 10/01/09 @ 17:53 BY DELORES T JOHNSON, REGISTERED NURSE I
SIGNED OFF ON 10/08/09 @ 11:55 BY DONNA F WIGGINS, UNCLASSIFIED

** ENCOUNTER: 222 MENTAL HEALTH CLINIC 09/22/09 11:41 LEE COMP
CCC NOTE: MH ASSESSMENT.

D: I/M WAS SEEN BY CCC DUE TO MEDICAL REFERRAL. 32 YO SBM FROM ORANGEBURG, SC SENTENCED 28 YRS, ASSAULT BAT. W/INTENT TO KILL & BURGLARY-1ST DEGREE. HE REPORTED ARRIVING AT LEE CI 9/16/09. I/M DENIED HAVING A GED. HE HAS 2 CHILDREN. I/M HAS A GOOD RELATIONSHIP AND STAYS IN CONTACT W/MOTHER, GIRLFRIEND, AND BROTHER. HE REPORTED HAVING A JOB WITHIN THE DARLINGTON UNIT AND REFUSED TO PARTICIPATE IN MH GRPS. I/M REPORTED ETOH HX. START AT AGE 14 WHICH INCLUDED BEER & LIQUER. HE REPORTED HAVING AN DRUG HX. STARTED AT AGE 18 WHICH INCLUDED COCAINE. HE DENIED BEING TREATED FOR ETOH/DRUGS. HE DENIED FAMILY MENTAL HEALTH HX. I/M REPORTED HIS MENTAL HEALTH TX "STARTING A LONG TIME AGO." I/M REPORTED RECEIVING TX IN THE COMMUNITY AT ORANGEBURG MH CENTER. HE DENIED EVER BEING DX WHILE RECEIVING SERVICES IN THE COMMUNITY. HE REPORTED TAKING THE FOLLOWING MEDICINE FOR 3 YRS: HALDOL AND SEROQUEL. HE REPORTED TAKING THE PREVIOUS MEDS DUE TO "SEEING THINGS (HALLUCINATIONS) AND DEPRESSION." I/M STATED "I WAS ADMITTED INTO THE BULL STREET HOSPITAL FOR ABOUT 2 WEEKS." HE REPORTED BEING HOSPITALIZED DUE TO SUICIDAL ATTEMPT (CUTTING HIMSELF ON WRIST." I/M REPORTED TAKING MH MEDICINE BUT WAS UNABLE TO RECALL THE RX NAME. HE REPORTED TAKING MEDICINE FOR SLEEP. CCC INFORMED I/M OF BEING SEEN BY A PSYCHIATRIST 9/23 WHICH HE AGREED. HE DENIED HAVING A/V HALL., S/H IDEATIONS. HE REPORTED APPETITE/SLEEP WAS WNL. I/M GROOMING AND HYGIENE WAS IN COMPLIANCE WITH THE SCDC POLICY.

A: I/M WAS CALM, COOPERATIVE AND APPROPRIATE. NO PSYCHOSIS WERE NOTED. HE DIDN'T APPEAR TO BE IN ANY MENTAL DISTRESS. HE DID NOT APPEAR TO BE A DANGER TO HIMSELF OR OTHERS. DX:DEFERRED. GAF:70.

P: CCC WILL ADD I/M TO PSYCH. CLINIC LIST TO BE SEEN BY PSYCHIATRIST 9/23. CCC WILL COMPLETE TX PLAN AND PRESENT I/M TO TX TEAM FOR REVIEW & APPROVAL OF MENTAL HEALTH SERVICES. I/M WILL CONTINUE TO BE SEEN BY PRIMARY CCC AS OPMH.

L. COX, CCCIII

SIGNED OFF ON 09/22/09 @ 12:27 BY LIBBY A COX, HUMAN SERVICES COORD I

** ENCOUNTER: 220 MENTAL HEALTH CLINIC 08/04/09 10:21 KIRKLAND COMP

D: IM AGE 32 SBM SERVING 28 YRS FOR ASSAULT/BATTERY; REFERRED BY MEDICAL DUE TO A HX OF DOXEPIN USAGE. ENC. 00218

IM REPORTS A HX OF DEPRESSION BUT STATES THAT HE WAS NEVER CLINICAL DX WITH ANYTHING. HOWEVER, IM CURRENTLY TAKES RISPERDAL AND PROZAC (?). IM REPORTS A BRIEF STAY AT PSY FALICITY IN NEW HEVAN COUNTY IN NC. IM IS VERY EVASIVE ABOUT PREVIOUS MH HX. IM DENIES ANY HI/SI/VH BUT REPORTS

VOICES W/O COMMANDS IN 2006. IM DENIES ANY SLEEPING OR EATING ISSUES/CONCERN. IM ALSO DENIES ANY HX OF AOD USAGE/ABUSE OR ANY MEDICAL ISSUES/CONCERNS

A: ALERT/ COHERENT/PLAYFUL/ ORIENTED WITH SLIGHT SIGNS OF DISTRESS NOTED. MOOD AND AFFECT PLAYFUL/ LOOSE, EYE CONTACT POOR, SPEECH CLEAR, THOUGHT PROCESS WNL,

P: REC FOR PSY F/U AT KCI ALONG WITH AREA MENTAL SERVICES AT PRIMARY PLACEM

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
FRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 27

ENT. WILL MONITOR PER POLICY.

SIGNED OFF ON 08/04/09 @ 10:32 BY DEDRIC WILLIAMS, HUMAN SERVICES COORD I
NOTED

SIGNED OFF ON 08/05/09 @ 8:07 BY SARAH ROBINSON-WILLIAMS, LICENSED PRACTIC

- ** ENCOUNTER: 219 MENTAL HEALTH CLINIC 07/30/09 7:22 KIRKLAND COMP
FOUND OPENED
SIGNED OFF ON 07/31/09 @ 7:22 BY LISA A BROWN, LICENSED PRACTICAL NURSE
- ** ENCOUNTER: 218 MENTAL HEALTH CLINIC 07/30/09 14:24 KIRKLAND COMP
NEW INTAKE ROUTED TO CCC REG DOXEPIN DOSAGE...ATG,RN
SIGNED OFF ON 07/30/09 @ 14:25 BY ALMA GANAL, UNCLASSIFIED
SIGNED OFF ON 07/31/09 @ 8:17 BY SHEKENA L EVANS-RICHBURG, HUMAN SERVICES CO
- ** ENCOUNTER: 214 MENTAL HEALTH CLINIC 11/28/06 15:20 KERSHAW COMP
CCC NOTE : I/M SEEN FOR FINAL COUNSELING SESSION
D: I/M INFORMED CCC THAT HE WAS EAGER ABOUT HIS RELEASE DATE & INFORMED CCC THAT HE WAS GOING TO GO THE APPOINTMENTS . HE RELATED THAT HIS MOTHER IS AWARE THAT HE IS BEING RELEASE & HE IS GOING TO LIVE WITH HER UNTIL HE HAS ENOUGH MONEY TO GET AN APARTMENT . CCC PRAISED HIS EFFORTS & COUNSELED HIM IN THE AREAS OF DECISION MAKING & THE IMPORTANCE OF ATTENDING THE APPOINTMENTS IN THE COMMUNITY . I/M STATED HE WOULD . HE WAS ATTENTIVE AND COOPERATIVE . HE SMILED APROPPRIATELY & VOICED NO ANXIETY OR STRESS OVER HIS DEPARTURE . HE DENIED DEPRESSION . HE WAS NEATLY DRESSED & GAVED GOOD EYE CONTACT .
A: I/M APPEARED STABLE & HAPPY .
P: CCC ENCOURAGED HIM TO ATTEND APPOINTMENTS & GAVE HIM AN ENVELOP WITH APPOINTMENT DATES . HE HAS AN APPOINTMENT WITH MENTAL HEALTH FOR 12-5-06 AT 9: 00 A.M. WITH STEPHANIE MORRIER AT ; 2319 ST. MATHEWS BLV. ORANGEBURG ,SC 29118 . THE TELEPHONE NUMBER 1-803-536-1571 . HIS APPOINTMENT WITH VOCATIONAL REHABILITATION IS FOR 12-6-06 AT 3:15 P.M. WITH LORIE LOWN AT ; 16161 JOE S. JEFFORDS HWY ,S.E., ORANGEBURG ,SC 29115 . THE TELEPHONE NUMBER IS 1-8-3-534-4939 . I/M DECLINED APPOINTMENT FOR D&A .
SAMANTHA M. GARDNER , CCC IV
SIGNED OFF ON 11/28/06 @ 15:34 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I
- ** ENCOUNTER: 210 MENTAL HEALTH CLINIC 11/02/06 13:05 KERSHAW COMP
SEE ENC 211.
SIGNED OFF ON 11/02/06 @ 13:05 BY MICHAEL J KIRBY, PSYCHIATRIST
- ** ENCOUNTER: 209 MENTAL HEALTH CLINIC 10/25/06 13:54 KERSHAW COMP
T/T NOTE : HTE FOLLOWING MEMBERS MET FOR STAFFING ; MS. D. COOKE , HCA & MS. S. GARDNER, CCC . CCC DISCUSSED I/M'S PROGRESS & PRESENTED UPDATED T/P. I/M ACHIEVED PAST GOAL , IS NO LONGER IN SMU & IS MANAGING HIS DEPRESSION . HE IS STABLE & IS GOING TO BE RELEASED IN DECEMBER OF THIS YEAR . HIS NEW GOAL WILL ADDRESS DISCHARGE PLANNING . HE IS TREATMENT COMPLAINT . HE ATTENDS CCC'S GROUP & COUNSELING .HE IS TAKING THE FOLLOWING MEDICATIONS ; HALDOL , ZOLOFT , BUSPAR & CONGENTIN FOR HIS DX OF ADJSUTMENT D/O WITH ANXIETY & DEPRESSED MOOD . AXIS II APD . T/T CONCURED WITH UPDATE . NEXT UPDATE
4/07 -----SAMANTHA M. GARDNER , CCC IV-----

SIGNED OFF ON 10/25/06 @ 14:00 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 208 MENTAL HEALTH CLINIC 10/11/06 14:29 KERSHAW COMP

CCC NOTE: I/M SEEN FOR COUNSELING SESSION. NOTE ENTERED LATE DUE TO CRT MALFUNCTION

D: I/M INFORMED CCC THAT HE IS DOING WELL & IS LOOKING TOWARD HIS UPCOMING

RELEASE IN DECEMBER. I/M INFORMED CCC THAT HE IS GOING TO LIVE IN O-

RAGENBURG WITH HIS MOTHER UNTIL HE IS ABLE TO GET A JOB. I/M STATED HE

DOESN'T FORSEE TROUBLE FINDING A JOB BECAUSE " MY BOOS WANTS ME TO GO

& WORK WITH HIM. " I/M WAS PRAISED ON HIS PROGRESS & COUNSELLED IN THE

AREAS OF DISCHARGE PLANNING, DECISION MAKING & MEDICATION COMPLIANCE

DUE TO CCC OBSERVED HE HAS MISS A COUPLE OF DOSAGES. I/M WAS ALSO GIVEN

RELEASE OF INFORMATION FORMS IN ORDER TO INITIATE DISCHARGE PLANNING.

I/M SEEMED RECEPTIVE AND COOPERATIVE. HE APPEARED RELAXED & VOICED NO

DEPRESSION, ANXIETY OR S/H IDEATIONS. HE REPORTED NO AUDITORY HALTU-

CINATIONS OR MEDICATION PROBLEMS. HE WAS DRESSED NEATLY.

A: GAVE 80. I/M HAS MADE PROGRESS & ACHIEVED GOAL. HE IS UTILIZING CO-

PING SKILLS WELL & ATTENDS GROUP REGULARLY.

P: CCC ENCOURAGED I/M TO CONTINUE TO OBSERVE THE RULES IN ORDER NOT TO

JEOPARDIZE HIS RELEASE DATE. CCC WILL CALL AGENCIES FOR CONTINUITY OF

CARE & WILL SEND AN OTR FOR GROUP. CCC WILL PRESENT UPDATED I/P IN NE-

XT I/T MEETING. -----SAMANTHA M. GARDNER, CCC IV-----

SIGNED OFF ON 10/11/06 @ 14:43 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 206 MENTAL HEALTH CLINIC 08/31/06 14:59 KERSHAW COMP

GROUP NOTE: COPING SKILLS (COPING WITH MAJOR DEPRESSIVE D/O)

D: THE GROUP FOCUSED ON MANAGING MAJOR DEPRESSION. HE COMPLETED THE CLAS-

SROOM WORK IN A TIMELY MANNER & REFRAINED FROM NEGATIVE NEGATIVE BEHA-

VIOR. HE GAVED GOOD FEEDBACK TO PEERS.

A: HE SEEMED STABLE AND POSITIVE.

P: CCC WILL SEND AN OTR WHEN SHE RETURNS FROM SICK LEAVE. -----

-----SAMANTHA M. GARDNER, CCC IV-----

SIGNED OFF ON 08/31/06 @ 15:03 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 205 MENTAL HEALTH CLINIC 08/24/06 14:35 KERSHAW COMP

GROUP NOTE: COPING SKILLS, PTSD

D: THE GROUP FOCUSED ON HOW TO MANAGE PTSD. I/M WAS ATTENTIVE AND HE EXHI-

BITED GOOD W/E BY COMPLETING THE EXERCISE IN A TIMELY MANNER WITHOUT

DISRUPTIVE BEHAVIOR.

A: HE APPEARED STABLE.

P: CCC WILL SEND AN OTR FOR NEXT WEEK. -----SAMANTHA M. GARDNER, CCC IV

SIGNED OFF ON 08/24/06 @ 14:37 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 204 MENTAL HEALTH CLINIC 08/18/06 8:31 KERSHAW COMP

GROUP NOTE: TREATMENT COMPLIANCE (PART II)

D: THE GROUP FOCUSED ON THE IMPORTANCE OF TAKING MEDICATION APPROPRIATELY &

ATTENDING GROUPS IN ORDER TO MANAGE MENTAL ILLNESS BETTER. I/M EXHIBIT-

ED GOOD W/E BY COMPLETING THE CLASSROOM WORK IN A TIMELY MANNER & RE-

FRAINING FROM DISRUPTIVE BEHAVIOR. I/M WAS PLEASANT AND COOPERATIVE. HE

GAVED GOOD EYE CONTACT AND WAS NEATLY DRESSED.

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
FRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 29

A: HE APPEARED STABLE AND VOICED NO COMPLAINTS .
 P: CCC WILL SEND AN OTR FOR NEXT WEEK . THIS NOTE WAS ENTERED LATE DUE TO
 TIME CONSTRAINTS . -----SAMANTHA M. GARDNER , CCC IV
 SIGNED OFF ON 08/18/06 @ 8:35 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 202 MENTAL HEALTH CLINIC 08/10/06 15:02 KERSHAW COMP
 GROUP NOTE : TREATMENT COMPLIANCE

D: THE GROUP FOCUSED ON THE CONCEPT OF MENTAL ILLNESS , TREATMENT COMPLI-
 ANCE AND THE ROLE OF CCC AS THEIR ADVOCATE AS WELL AS THEIR ROLE AS A
 COCNSUMER . I/M WAS A QUIET PARTICIPANT BECAUSE IT WAS HIS FIRST DATE
 BUT WAS ATTENTIVE . HE VOICED NO COMPLAINTS .

A: HE WAS WELL GROOMED AND APPEARED STABLE .

P: CCC WILL SEND AN OTR FOR NEXT WEEK .-----SAMANTHA M.G ARDNER, CCCIV
 SIGNED OFF ON 08/10/06 @ 15:04 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 201 MENTAL HEALTH CLINIC 08/04/06 14:34 KERSHAW COMP

CCC NOTE : INSTITUTION PHYSICIAN PLEASE SEE NOTE #172 . I/M IS PRESENTLY
 MENTALLY ILL AND HIS HS REFELCT NMH . -----SAMANTHA M. GARDNER , CCC IV
 SIGNED OFF ON 08/04/06 @ 14:36 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

P: 1. SEE HEALTH SUMMARY THIS DATE.

SIGNED OFF ON 08/11/06 @ 10:39 BY RICHARD C BEARDEN, JR, PHYSICIAN II
 UPDATE NOTED

SIGNED OFF ON 08/11/06 @ 18:42 BY JOYCE C LLOYD, LICENSED PRACTICAL NURSE

** ENCOUNTER: 199 MENTAL HEALTH CLINIC 06/13/06 12:57 KERSHAW COMP

CCC CONTACT NOTE : I/M VOICED NO COMPLAINTS AND STATED HE WAS DOING WELL
 AND WAITING TO GET OUT OF SMU SOON . HE SEEMED POSITIVE AND STABLE .

CCC WILL SEND AN OTR AT A LATTER DATE .-----SAMANTHA M. GARDNER , CCCIV
 SIGNED OFF ON 06/13/06 @ 12:59 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 198 MENTAL HEALTH CLINIC 05/17/06 10:14 KERSHAW COMP

CCC NOTE : I/M SEEN FOR COUNSELING SESSION

D: I/M SMILED AS HE ENTERED THE OFFICE . HE VOICED NO CONCERNS AND INFOR-
 MED CCC THAT HE WAS PLEASED WITH THE VISIT TO THE PSYCHIATRIST . I/M
 VOICED NO COMPLAINTS AND RELATED TO CCC THAT HE IS DUE TO BE RELEASED
 FROM SMU IN JULY . I/M STATED THAT HE DOSEN'T HAVE TOO LONG AFTER THAT
 TO MAX- OUT . CCC PRAISED HIS POSITIVE ATTITUDE AND ENCOURAGED HIM TO
 CONTINUE TO UTILIZED PRESENT COPING SKILLS IN ORDER NOT TO JEOPARDIZE
 HIS UPCOMING RELEASE DATE . I/M WAS PLEASANT AND APPEARED AT EASE . HE
 VOICED NO S/H IDEATIONS OR EXPIRIENCING AUDITORY HALLUCINATIONS . HE
 WAS FOCUSED AND ALERT . HE VOICED NO PROBLEMS WITH INSOMNIA , DEPRESSI-
 ON OR ANXIETY .

A: I/M IS MAKING PROGRESS ON HIS GOAL BY VOICING NO PROBLEMS WITH LACK OF
 SLEEP & NO REPORTING DEPRESSION OR AUDITORY HALLUCINATIONS .

P: CCC ENCOURAGED I/M TO CONTINUE TO REMAIN DICIPLINARY FREE . CCC WILL
 SEE PRN .-----SAMANTHA M. GARDNER , CCC IV-----
 SIGNED OFF ON 05/17/06 @ 10:22 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 197 MENTAL HEALTH CLINIC 05/16/06 9:28 KERSHAW COMP

CCC NOTE : I/M SEEN FOR 90 DAY REVIEW

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC#

WHITE, JOHNNY -

PAGE 30

D: I/M WAS PLEASANT AND VOICED NO DISTRESS . HE GAVED GOOD EYE CONTACT AND DENIED S/H IDEATIONS . HIS CELL WAS NEAT AND HE WAS GROOMED WELL .
 A: I/M DID NOT APPEARED TO BE IN ANY DISTRESS .
 P: CCC WILL CONTINUE TO SEE PRN DUE TO HE IS CLASSIFIED M-I -----
 -----SAMANTHA M. GARDNER , CCC IV-----
 SIGNED OFF ON 05/16/06 @ 9:30 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 194 MENTAL HEALTH CLINIC 04/25/06 14:08 KERSHAW COMP
 TREATMENT TEAM NOTE : THE FOLLOWING MEMBERS WERE PRESENT DURING STAFFING ;
 MS. M. USSERY , HN ; MS. T. YATES , CCC V AND MS. S. GARDNER , CCC I V. CCC
 DISCUSSED UPDATED T/P AND I/M'S PROGRESS . I/M ACHIEVED PAST GOAL AND HE IS
 NO LONGER AS DEPRESSED AND ANGRY OVER HIS DEMOTION IN CUSTODY . I/M IS HA-
 VING DIFFICULTY SLEEPING IN SMU . HE STILL VERY RECEPTIVE AND COOPERATIVE .
 HIS GOAL WILL ADDRESS THIS AREA . T/T APPROVED UPDATE -----
 -----SAMANTHA M. GARDNER , CCC IV-----
 SIGNED OFF ON 04/25/06 @ 14:10 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 189 MENTAL HEALTH CLINIC 03/21/06 14:03 KERSHAW COMP
 CCC NOTE : I/M SEEN FOR COUNSELING SESSION
 D: I/M INFORMED CCC THAT HE IS DOING WELL FRO THE MOST PART BUT IS NOT
 SLEEPING WELL . I/M VOICED NO NIGHTMARES OR REASONS AS TO WHY . I/M ,
 HOWEVER, SEEMED TO HAVE GOTTEN UP WHEN HE CAME TO SESSION . I/M RELATED
 TO CCC THAT HE WAS INFORMED BY OTHER PEERS THAT HE MAY HAVE TO SERVE A-
 NOTHER 90 DAYS IN SMU BECAUSE OF HIS CHARGE . I/M STATED THAT THE PEERS
 THAT GAVED HIM THIS INFORMATION WERE ALL CAUGHT WITH CELL PHONES AND
 THIS IS THE REASON WHY HE IS IN SMU . CCC INFORMED HIM TO WRITE HIS
 CLASSIFICATION CASE WORKER TO VERIFY THE INFORMATION BUT COUNSELED NOT
 TO OVERREACT IF THESE SACTIONS WERE IMPOSED . CCC COUNSELED HIM IN THE
 AREAS OF COPING SKILLS AND DESTRUCTIVE BEHAVIORS . I/M WAS PLEASANT AND
 VOICED NO DEPRESSION . HE DENIED S/H IDEATIONS AS WELL AS EXPIRIENCING
 AUDITORY HALLUCINATIONS . HE WAS CALMED AND GOAL DIRECTED . HE WAS WELL
 GROOMED .
 A: GAFF 77 . I/M SEEMED TO BE MAINTAINING COPING SKILLS AND IS MEDICATION
 COMPLAINT .
 P: CCC ENCOURAGED HIM TO EXCERCISE IN ORDER TO BURN SOME ENERGY . CCC
 WILL SEND AN OTR AT A LATTER DATE AND WILL ESCHEDULED FOR OUTPATIENT
 PSY EVAL . -----
 -----SAMANTHA M. GARDNER , CCC IV-----
 SIGNED OFF ON 03/21/06 @ 14:20 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 188 MENTAL HEALTH CLINIC 03/03/06 9:47 KERSHAW COMP
 CCC NOTE : ENTRY ALTE DUE TO TIME CONSTRAINTS
 I/M WAS UNABLE TO ATTEND OUTPATIENT PSYCHIATRIC APPOINTMENT DUE TO THE
 CLINIC WAS OVER UPON HIS ARRIVAL . CCC WILL ESCHEDULE APPOINTMENT AS SOON
 AS POSSIBLE . -----
 -----SAMANTHA M. GARDNER , CCC IV-----
 SIGNED OFF ON 03/03/06 @ 9:50 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 185 MENTAL HEALTH CLINIC 01/25/06 13:55 KERSHAW COMP
 CCC NOTE : I/M SEEN FOR COUNSELING SESSION
 D: I/M RELATED TO CCC THAT HE " IS TRAYING TO DO EVERYTHING HE CAN TO SEE
 IF HE CAN BE RELEASED FROM SMU BY MARCH ." I/M STATED HE WANTED TO GO

MDCI880D
OMINMDCASOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
FRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 31

TO THE GENERAL POPULATION AND THE DAYS WILL GO FASTER . CCC COUNSELED I/M IN THE AREAS OF DECISION MAKING , COMMUNICATION SKILLS AND THE IMPORTANCE OF TAKING HIS MEDICATION . I/M ASKED CCC IF HE COULD BE ESCHE- DULED TO SEE PSYCHIATRIST AND SHE INFORMED HIM SHE WILL PLACED HIM ON THE LIST . I/M WAS FRIENDLY AND POLITE . HE IS BECOMING MORE HONEST AND HE IS NOT AS RESISTANT TO COUNSELED AS WHEN HE FIRST ARRIVED . HE VOI- CED NO CONFLICTS BETWEEN STAFF AND PEERS . HE VOICED NO DEPRESSION AND H AND WAS GROOMED POORLY . HIS HAIR HAD LINT IN IT . I/M STATED HE HAD HAD JUST GOTTEN UP . CCC REMINDED OF THE IMPORTANCE OF GROOMING .

- A: I/M IS MAKING PROGRESS ON HIS GOAL BY REFRAINING FROM SUICIDAL IDEATI- NS AND GESTURES AND VOICING NO AUDITORY HALLUCINATIONS .
P: CCC ENCOURAGED HIM TO EXHIBIT GOOD BEHAVIOR IN ORDER TO IMPROVE CUSTODY LEVEL AND LEAVE SMU . CCC WILL SEND AN OTR AT A LATTER DATE .-----

-----SAMANTHA M. GARDNER , CCC IV-----
SIGNED OFF ON 01/25/06 @ 14:05 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 182 MENTAL HEALTH CLINIC 12/09/05 13:30 KERSHAW COMP
CCC NOTE : I/M SEEN FOR COUNSELING SESSION

D: I/M STATED THAT HE WAS DOING BETTER AND TRAYING TO EXHIBIT GOOD BEHAVI- OR IN ORDER TO GET OUT OF SMU . I/M RELATED TO CCC THAT WHEN HE FIRST ARRIVED HE WAS REALLY ANGRY BUT HE HAS TIME TO THINK AND IS TRAYING TO DO BETTER IN ORDER TO GO HOME . I/M STATED TO CCC THAT HE STILL GETS DEPRESSED AND FEELS THAT THE MEDICATION IS NOT HELPING HIM AS MUCH AND WANTED TO KNOW IF HE COULD BE SEND FOR OUTPATIENT PSY EVAL . CCC INFOR- MED HIM THAT SHE WOULD REFER HIM AND PRAISED HIM ON HIS PROGRESS . CCC ALSO COUNSELED HIM IN THE AREAS OF DEPRESSION MANAGEMENT . I/M SEEMED MORE POSITIVE AND RECEPTIVE . HE WAS CALM AND SEEMED AT EASE IN THE SE- SSION . HE EXPRESSED HIMSELF IN A LUCID MANNER . HE DENIED EXPIRIENCING A/V HALLUCINATIONS AND DENIED SUICIDAL IDEATIONS . HE STATED HE WAS EA- TING AND APPEARED HEALTHY . HE WAS NEATLY DRESSED .

A: ALTHOUGH , I/M STILL COMPLAINING OF DEPRESSION HE HAS MADE ALOT OF PRO- GRESS ON HIS GOAL BY REFRAINING FROM SELF-DESTRUCTIVE BEHAVIOR AND VOI- CING NO AUDITORY HALLUCINATIONS .

P: CCC COUNSELED I/M TO CONTINUE TO FOCUS ON IMPROVING CUSTODY LEVEL . CCC WILL CONTINUE TO SEE PRN .-----SAMANTHA M. GARDNER , CCC IV
SIGNED OFF ON 12/09/05 @ 13:41 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 179 MENTAL HEALTH CLINIC 11/16/05 11:10 KERSHAW COMP
CCC NOTE : I/M SEEN FOR 30 DAY REVIEW

D: I/M WAS STANDING BY HIS CELL DOOR WHEN CCC APPROACHED HIS CELL . HE VO- CED NO COMPLAINTS AND DENIED SUICIDAL IDEATIONS . I/M WAS WELL GROOMED AND DID NOT SEEMED AS NEGATIVE AS WHEN HE FIRST ARRIVED TO KERSHAW .

A: I/M APPEARED STABLE . CCC INFORMED HIM THAT SHE WILL TRY TO SEE HIM TO- MORROW FOR AN INDIVIDUAL SESSION .

P: CCC WILL SEE PRN DUE TO HE IS CLASSIFIED M-I .--SAMANTHA M. GARDNER, CCC IV .-----

SIGNED OFF ON 11/16/05 @ 11:13 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 173 MENTAL HEALTH CLINIC 10/28/05 10:53 KERSHAW COMP
TREATMENT TEAM NOTE: THE FOLLOWING STAFF MET FOR STAFFING TO DISCUSSED I/M'S

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SCDC HEALTH SERVICES: MEDICAL SUMMARY05/27/14
PRIDGEN

SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 32

PROGRESS ; MS. D. COOKE , HCA AND MS. S. GARDNER , CCC . CCC PRESENTED T/P AND DISCUSSED I/M'S BEHAVIOR . I/M IS A RESENT GAIN IN C/L FROM MANNING . HE WAS SEND TO KERSHAW AS A RESULT FROM DICIPLINARIES THAT CAUSED HIS CUSTODY TO CHANGE . I/M WAS CAUGHT WITH A CELL PHONE . I/M IS NOT PLEASED WITH HIS DEMOTION IN CUSTODY , PROYECTS BLAME OF STAFF , REFUSES TO EAT AT TIMES AND IS REPORTING AUDITORY HALLUCINATIONS . I/M SEEMED TO BE ENGAGING IN THESE BEHAVIOR IN AN EFFORT TO BE SEND FROM KERSHAW . I/M SEEMED TO KNOW WHAT HE IS DOING . HE SEEMED TO BE EXPIRIENCING SOME SITUATIONAL ANXIETY . HE IS TAKING BUSPAR AND PROZAC TO ASSIST HIM WITH HIS ADJUSTMENT . DX IMP. ADJUS TMENT D/O WITH ANXIETY AND DEPRESSED MOOD . AXIS II A P TRAITS . T/T CONCU RRED WITH T/P .-----SAMANTHA M. GARDNER , CCC IV----- SIGNED OFF ON 10/28/05 @ 11:01 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 172 MENTAL HEALTH CLINIC 10/28/05 10:52 KERSHAW COMP
TREATMENT TEAM NOTE : THE FOLLOWING MEMBERS WERE PRESENT DURING STAFFING ; MS. D. COOKE , HCA AND MS. S. GARDNER , CCC . CCC DISCUSSED I/M'S PROGRESS AND PRESENTED T/P . I/M IS A RESENT GAIN FROM MANNING CI AND IS PRESENTLY HOUSED IN SMU . I/M WAS DEMOTED IN CUSTODY FOR HAVING A CELL PHONE . I/M IS VERY ANGRY AT HIS DEMOTION IN CUSTODY AND IS HAVING DIFFICULTY ADJSUSTING TO HIS TRANSFER . I/M IS COMPLAINING OF AUDITORY HALLUCINATIONS AND STATING HE IS NOT GOING TO EAT . I/M IS ALSO PROYESTING BLAME ON OTHER FOR HIS BE- HAVIOR . ALTHOUGH , I/M IS HAVING DIFFICULTY ADJUSTING HE KNOWS FULL WELL WHAT HE IS DOING AND HIS COMPLAINTS OF AUDITORY HALLUCINATION SEEMED TO BE A METHOD OF COPING . T/T APPROVED T/P . I/M IS TAKING BUSPAR AND PROZAC . DX IMP: ADJUSTMENT D/O WITH ANXIETY AND DEPRESSED MOOD . AXIX II AP TRAITS .-----SAMANTHA M. GARDNER , CCC IV----- SIGNED OFF ON 10/28/05 @ 13:38 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

** ENCOUNTER: 168 MENTAL HEALTH CLINIC 10/12/05 12:37 KERSHAW COMP
CCC NOTE : I/M SEEN FOR ASSESMENT F/U
D: I/M WAS PLEASANT WHEN HE ENTERED THE MEDICAL OFFICE IN SMU . HE STATED HE WAS DOING BETTER AND DENIED FEELING SUICIDAL . I/M WAS PRAISED ON HIS PROGRESS AND COUNSELED IN THE AREAS OF GIVING HIMSELF A CHANCE TO ACLIMATIZED HIMSELF TO THE KERSHAW STRUCTURE AND FOCUS ON HIS UPCOMING RELEASE NEXT YEAR . CCC ALSO VALIDATED HIS FEELINGS OF LOSS AND COUNSE- LED HIM IN THE AREA SOF SELF- DESTRUCTIVE BEHAVIOR . CCC ALSO ENCOURA- GED HIM TO EAT AND DISCUSSED THE NEGATIVE ASPECTS OF STARVING HIMSELF . I/M , " I DON'T KNOW IF I AM GOING TO EAT , I MIGHT ." I/M SEEMED MORE IN CONTROL AND NOT AS UPSET . HE PROYECTED NO BLAME ON STAFF OR MENTION THAT SOMEONE WAS GOING TO POISON HIM . I/M WAS ALERT AND OREINTED . HE DID NOT SEEMED PSYCHOTIC OR DILUSIONAL . HIS THOUGHTS WERE LOGICAL AND HE WAS GOAL ORIENTED . I/M DENIED SUICIDAL IDEATIONS .
A: GAFF 74. I/M DOSEN'T APPEARED MENTALLY ILL BUT SEEMED UMOTIVATED AT AT PRESENT TO USE PROSOCAIL SKILLS . HE SEEMED TO BE DISPLAYING MANIPU- LATIVE BEHAVIOR IN ORDER TO GET HIS NEEDS MET .
P: CCC ENCOURAGED HIM TO EAT AND TO EVALUATE CONSEQUEUNCES CLOSELY . CCC WILL SEE PRN IF NEEDED . I/M DOSEN'T APPEARED MENTALLY ILL .----- SAMANTHA M. GARDNER , CCC IV----- SIGNED OFF ON 10/12/05 @ 14:57 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

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OMINMDCA

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05/27/14
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SCDC# [REDACTED] WHITE, JOHNNY -

PAGE 33

** ENCOUNTER: 164 MENTAL HEALTH CLINIC 10/11/05 14:49 KERSHAW COMP
 CCC NOTE : I/M SEEN FOR ASSESTMENT PER MEDICAL REFERRAL
 D: TWENTY EIGHT YEAR OLD BLACK MALE FROM ORANGEBURG ,SC SERVING A THREE
 YEAR SENTENCE FOR CRACK DISTRIBUTION . HIS PROYECTED RELEASE DATE IS
 JANUARY 2007 . I/M IS A RESENT GAIN TO KERSHAW FROM BROAD RIVER . I/M
 HAS NUMEROUS DICIPLINARIES WITH THE LATES BEEN RESENTLY FOR HAVING A
 CELL PHONE . I/M INFORMED CCC AND NURSE STEEN THAT HE HAS BEEN TREATED
 FOR MENTAL HEALTH IN THE PAST FOR DEPRESSION AND SUCIDAL GESTURES. I/M
 STATING TO CCC THAT HE IS HEARING VOICES . I/M DID NOT STATE WHAT HE
 WAS HEARING . I/M STATED " TEHYA RE TRAYING TO POISON ME ." WHEN CCC
 ASKED WHO HE STATED " THE PEOPLE THAT SET ME UP WITH THIS CHARGE ." I/M
 COUNSELED IN THE AREAS OF COPING SKILLS AND NUTRITION . CCC ASLO DISCU-
 SSED NEGATIVE ASPECT OF NOT EATING . I/M WAS ASKED IF HE WANTED TO HARM
 HIMSELF AND HE STATED HE WAS NOT GOING TO HURT HIMSELF . I/M SEEMED UP-
 SET ABOUT HIS CHARGE BUT DID NOT APPEARED SUICIDAL . HE WAS GOAL ORIEN-
 TED . HE DID NOT APPERED PSYCHOTIC OR DILUSIONAL . SOME OF THIS BEHAVI-
 OR APPEARED TO BE FOR PERSONAL GAIN DUE TO HE WAS DEMOTED IN CUSTODY.
 I/M STATED HE WAS NOT GOING TO HURT HIMSELF AND SEE INFORMED HIM THAT
 SHE WILL SEE HIM TOMORROW TO GET RECORDS FROM PREVIOUS TREATMENT .
 A: GAFF 75 . I/M SEEMED TO BE EXPIREINCING SOME -----CCC NOTE CONTINUED
 CCC NOTE CONTINUED
 SITUTATION STRESS .
 P: CCC ENCOURAGED I/M TO EAT AND TO FOCUS ON HIS RELEASE DATE AT THE END
 OF 2006 . CCC WILL CHECK ON HIS PROGRESS TOMORROW WHEN SHE DO EVALS IN
 SMU . -----SAMANTHA M. GARDNER ,CCC IV----
 SIGNED OFF ON 10/11/05 @ 15:07 BY SAMANTHA M GARDNER, HUMAN SERVICES COORD I

***** END OF SICK CALL NOTES *****

SCDMH South Carolina Department of Mental Health



South Carolina
Department of
Mental Health

DMH Mailing Address -

2318 St. Matthews Road
Orangeburg, SC 29118

Phone # (803) 531-3219 ext. 133
Fax # (803) 268-9981

HIPAA (PHI) FAX COVERSHEET

To: Attorney Tommy A. Thomas

TELEPHONE

FAX

From: OAMHC

(803) 732-5507

(803) 781-4226

Date: 05/28/2014

NO. PAGES INCLUDING THIS PAGE

34

TIME

See Date Stamp

Urgent For Review Please Comment Please Reply Please Recycle

SUBJECT:

Johnny White

MESSAGE:

Attn: Jackie Miller, Per your request.

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**PLAINTIFF'S
EXHIBIT**

2



State of South Carolina
Department of Mental Health

MENTAL HEALTH COMMISSION:

Allison Y. Evans, PsyD, Chair
Joan Moore, Vice Chair
Jane B. Jones
Everard Rutledge, PhD
J. Sutton Terry

STATE DIRECTOR
John H. Magill

Orangeburg Area
Mental Health Center
2319 St. Matthews Road
Orangeburg, SC 29116
Information: (803) 836-1571
Willie L. Pfister, M.Ed., LMSW, Executive Director

May 23, 2014

Tommy A. Thomas
Attorney and Counselor At Law
Harrington Building
7599 Woodrow Street
Irmo, SC 29063

Fax # (803) 781-4226

Ref: Johnny White

Notice Prohibiting Re-disclosure

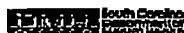
The attached or enclosed information has been disclosed to you from records whose privacy is protected from disclosure by federal and state law including, as applicable, 45 CFR Part 160 (HIPAA); 42 CFR Part 2, (alcohol and drug Treatment) and Section 44-22-100, Code of Laws of South Carolina. The applicable law or laws may prohibit you from making any further disclosure without the specific written authorization by the individual to whom it pertains or their authorized representative, or as otherwise permitted or required by law. A general authorization for release of information is not sufficient for this purpose unless it conforms to the specific requirements of the applicable law or laws. Further disclosure not in accordance with applicable federal and law may result in civil and/or criminal penalties.

Sincerely,

Rudine W. Thrower
Medical Records Supervisor

MISSION STATEMENT

To support the recovery of people with mental illnesses.





State of South Carolina
Department of Mental Health

MENTAL HEALTH COMMISSION:

Alison Y. Evans, PsyD, Chair
Joan Moore, Vice Chair
Jane B. Jorjes
Everard Rutledge, PhD
J. Buxton Terry

STATE DIRECTOR
John H. Magill

CLERICAL FEE FOR RECORDS

Orangeburg Area
Mental Health Center
231R St. Matthews Road
Orangeburg, SC 29118
Information: (803) 536-1571
Willa L. Pfisterer, M.Ed., LMSW, Executive Director

Name of Client: Johnny White

Social Security #: [REDACTED]

Date of Birth: [REDACTED]

Date of Release: 05/28/2014

Information Released to:

Tommy A. Thomas
Attorney and Counselor At Law
Harrington Building
7599 Woodrow Street
Irmo, SC 29063

To Recipient: The following listed information is enclosed. To protect the confidentiality of all, comply with the following:

The enclosed information is to be used only for the purpose stated on the authorization. **DO NOT** disclose this information to any other party. After the stated need for this information has been fulfilled, destroy the copies in a manner which protect the confidentiality of the documents.

Clerical Fee for Records is \$ 39.50. Please make checks payable to:
ORANGEBURG AREA MENTAL HEALTH CENTER
Federal Tax I.D. #576000922

Rutline W. Throver
Medical Records Supervisor

MISSION STATEMENT
To support the recovery of people with mental illnesses.



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**South Carolina
Department of Mental Health
(Records Management Division)**

**Consumer Records Cover Sheet
Box Number 27**

Subfolder/Facility

Orangeburg Area MHC

Client ID

[REDACTED]

First Name

JOHNNY

Middle Name

Last Name

WHITE

SSN

[REDACTED]

DOB

[REDACTED]

Race

Asian or Pacific Islander

Sex

MALE

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CMHS CLIENT DISCHARGE

For Official Use Only
ICD# 5911358 No _____ Loc _____ OS _____

Name last White first Johnny middle _____ suffix _____

Discharge Date 10/1/07 Discharging GAF Score 69

Reason for Release Outpatient Services - CMHS (check only one)

- 01 No Further Care Indicated by This Rating
- 02 By Order of The Court
- 03 Appropriate Care Unavailable
- 04 Patient Dropped Out or Requested Services
- 05 Patient Withdrew Other Reasons (Moved, Died, Etc.)
- 06 Appropriate Care Unavailable Incomplete Referral
- 99 Other

Discharging Staff ID [REDACTED]

Diagnoses at Discharge (DSM-IV for Psychiatric & A/D)

1st 295 70 2nd 304 80 3rd

4th 5th

Referral upon Discharge - Disposition (check only one)

- | | | |
|--|--|---|
| 01 <input type="checkbox"/> Self | 37 <input type="checkbox"/> Family or Friend | 61 <input type="checkbox"/> Clergy |
| 02 <input type="checkbox"/> School/Special Class | 38 <input type="checkbox"/> Private Physician/Psychologist | 62 <input type="checkbox"/> Private MD/Professional |
| 03 <input type="checkbox"/> Other Medical Professional | 39 <input type="checkbox"/> Mental Retardation | 63 <input type="checkbox"/> Community Care Home |
| 04 <input type="checkbox"/> Drug and Alcohol | 40 <input type="checkbox"/> Veteran + Administration | 64 <input type="checkbox"/> Vocational Rehabilitation |
| 05 <input type="checkbox"/> Out-of-State | 41 <input type="checkbox"/> Youth Services | 65 <input type="checkbox"/> Social Services |
| 06 <input type="checkbox"/> Court | 42 <input type="checkbox"/> Law Enforcement/Corrections | 66 <input type="checkbox"/> General Hospital |
| 07 <input type="checkbox"/> Court | 43 <input type="checkbox"/> Nursing Home | 67 <input type="checkbox"/> Health Services |
| 08 <input type="checkbox"/> Private Psychiatric Facility | 44 <input type="checkbox"/> CMHS | 68 <input type="checkbox"/> WSPH |
| 09 <input type="checkbox"/> BCSH | 45 <input type="checkbox"/> Bryan | 69 <input type="checkbox"/> Morris Village |
| 10 <input type="checkbox"/> Teacher | 46 <input type="checkbox"/> DUNCC Columbia | 70 <input type="checkbox"/> DUNCC Rock Hill |
| 11 <input type="checkbox"/> Bryant Medical Center | 47 <input type="checkbox"/> Clapham | 71 <input type="checkbox"/> Greenville MHC |
| 12 <input type="checkbox"/> Eburn | 48 <input type="checkbox"/> Spartanburg MHC | 72 <input type="checkbox"/> Columbia Awa MHC |
| 13 <input type="checkbox"/> Charleston/Dorchester MHC | 49 <input type="checkbox"/> Sumter MHC | 73 <input type="checkbox"/> Columbia MHC |
| 14 <input type="checkbox"/> Lee/Dar MHC | 50 <input type="checkbox"/> Sumter MHC | 74 <input type="checkbox"/> Adair-Blair MHC |
| 15 <input type="checkbox"/> Anderson-Orange Pickens MHC | 51 <input type="checkbox"/> Backus MHC | 75 <input type="checkbox"/> Wadesboro MHC |
| 16 <input type="checkbox"/> Coastal Empire MHC | 52 <input type="checkbox"/> Tri County MHC | 76 <input type="checkbox"/> Lexington County MHC |
| 17 <input type="checkbox"/> Greenville MHC | 53 <input type="checkbox"/> Piedmont MHC | 77 <input type="checkbox"/> Other |
| 18 <input type="checkbox"/> Richland County MHC | 54 <input type="checkbox"/> WSPH Compl Services | |
| 19 <input checked="" type="checkbox"/> No Referral Made | | |

Follow-up Date 10/3/07

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PHYSICIAN'S MEDICATION ORDER AND SERVICE NOTES: Follow-up Visit

Name: Jalynn White CID # [redacted] Age/Race/Gender: [redacted]
Measurements: () D/W () H () BP () RR () T ()
Reason for Visit: [redacted] Scheduled FU: [redacted] Unscheduled: [redacted] Medication Check: [redacted]
Urgent: [redacted] Emergent: [redacted] Allergic (Stop Drug): [redacted]
Other: [redacted]
New-Center Medic: () None () Non-Center Medication Form Reviewed/Updated
Drug Allergies: () None () Unchanged from last PMA () Yes, list: [redacted]

Current Medications Prescribed by Mental Health Center: [redacted]

Patient is compliant with meds as prescribed? () N/A () Yes () No
If no, describe: [redacted]
Disturbance of sleep? () None
describe: [redacted]
Patient has noted adverse effects from med? () N/A () Yes () No
If yes, describe: [redacted]
Recent physical abuse? () None
describe: [redacted]

Current Substance Use Alcohol Use () None () Describe: [redacted]
Drug Use () None () Describe: [redacted]
Recent Laboratory Data () N/A Date/Describe: [redacted]

Interval History
DNR 5/21/07 Edwin Page, MD
DNR 5/1/07 John AD

Mental Status Exam
Orientation: () Alert () Sleepy/drowsy () Confused
() Person () Place () Time () Situation
Attention span: () Good () Fair () Poor
Cooperation: () Good () Fair () Poor () Uncooperative
Grooming: () Excellent () Good () Fair () Poor
Speech: () Regular rate and rhythm () Pressured () Dysarthric () Slurred
() Other: [redacted]
Gait: () Normal () Other: [redacted]
Tics: () None If present, describe: [redacted]

Memory Functions () Intact () Other: [redacted]
Thought processes: () Intact () Circumstantial () Flight of ideas
() Tangential () Loose associations () Concrete
() Poverty of thought () Thought blocking
() Confabulation () Other: [redacted]
Thought content: Suicidal/Homicidal (Ideated)? () None
describe: [redacted]
Auditory Visual Hallucinations? () None
describe: [redacted]
Delusions () no overt delusions
describe: [redacted]
Affect () Appropriately stimulated () Blunted () Constricted () Flat
() Other: [redacted]
Psychomotor Slowing: () None () Mild () Moderate () Severe

SPS present? () N/A () No
describe: [redacted]
ADL () N/A Score today: [redacted] () see form of today's date
Disruptive Events: [redacted]
Impression: () acute exacerbation () relapsing () in partial remission () in remission () adequate pt control on current med(s) () stable
New Diagnosis: Y N If yes, reason for change: [redacted] new symptoms: [redacted] additional history: [redacted] Other: [redacted]
Suicidal: () None () List: [redacted]

Axis I (DSM score) today: [redacted]
Plan/Recommendations:
1. Medication prescribed prior to this visit: () None
a. Med: [redacted]
Med: [redacted]
Med: [redacted]
Control of Medication prescribed per Dr: [redacted]
b. Discontinuation: [redacted]
2. Other: () List: [redacted]
() Referral to Substance Abuse Rehabilitation Services
() Referral to Community Case Manager ASAP
3. When is next PMA recommended? [redacted] Practitioner's Signature: [redacted] Exam Date: [redacted]

Risks/benefits of medication discussed? N/A Y N
Medication changes? Y N If yes, reason(s): [redacted]
- new med: [redacted] into effect/dates: [redacted]
- rx adjustment: [redacted] sufficient improvement of symptoms: [redacted]
- med not preferred: [redacted] singly and together: [redacted]
- rx improvement: [redacted] longer needed: [redacted]
Enrollment Program Refused () Voluntary Rehabilitation Refused ()
PMA Refused for: [redacted]
Other: [redacted]

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PHYSICIAN'S MEDICATION ORDER AND SEVERITY NOTES Follow-up Visit

Name: Johnny [redacted] MRN: [redacted] DOB: [redacted] Age: [redacted] Sex: [redacted]

SEARCH FOR: VISIT Scheduled INU: [redacted] Unscheduled: [redacted] Medication Check: [redacted] Admission Check: [redacted] Admission (Strip Only): [redacted] Other: [redacted]

Non-Cancer Medication Form Review/Update: [redacted] (None) [redacted] (Unchanged from last visit) [redacted] (Yes, list)

Drug Allergies: [redacted] (None) [redacted] (Unchanged from last visit) [redacted] (Yes, list)

Current Medications Prescribed by Medical Health Center: [redacted]

Present is complaint with needs as prescribed? [redacted] (N/A) [redacted] (Yes) [redacted] (No)

Any new findings? [redacted] (None) [redacted] (Yes) [redacted] (No)

Progress has been made since last visit? [redacted] (N/A) [redacted] (Yes) [redacted] (No)

If yes describe: [redacted]

Current Substances Use: Alcohol Use: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Smoking: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Recent Laboratory Data: [redacted] (N/A) [redacted] (Lab) [redacted] (Immunology)

Interval History: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Medical Status Exam: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Constitution: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Abdomen exam: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Respiratory: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Cardiovascular: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Neurological: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Psychiatric: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Speech: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

General: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Appearance: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Weight: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Height: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Temperature: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Pulse: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Blood Pressure: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Respiratory Rate: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Oxygen Saturation: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

Other: [redacted]

Handwritten notes: 2014/10/17 + 9d #112 -> 3RT
gabapentin 15mg T po BID #60
gabapentin 15mg T po BID #30
gabapentin 15mg po qd #20
MM 10/17

Agree? [redacted] (Agree) [redacted] (Disagree) [redacted] (Refuse) [redacted] (Other) [redacted] (None)

Physician Signature: [redacted] Date: [redacted]

Pharmacist Signature: [redacted] Date: [redacted]

Other: [redacted]

1. Medication prescribed/injected on this visit: [redacted] (None)

2. Other: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

3. Other: [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

4. When is next visit recommended? [redacted] (None) [redacted] (Some) [redacted] (Daily) [redacted] (Heavy) [redacted] (Other) [redacted] (None)

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PHYSICIAN'S MEDICATION ORDERS AND SERVICE NOTES

Patient's Name and I.D.#

Johnny White

Medications Prescribed and Physician's Service Notes

2970 Block 8 referred by (private) officer for CE. He continues psychiatric medicine. He says he was depressed. That's all.

HPI. Depressed for 2 years, he could not eat, which was length of time in prison. Depression started 5 years or so ago. Personality problems started when he went to prison for last time for armed robbery - had 5 years. After a few months voice began (during hearing then before) and was completely unrecognizable. He was told him to stop eating so he stopped eating. He was told to eat. Voice went away & he started back eating. No further problems - well depressed feeling was being "locked up". Things not doing well the 2nd year term (could not undo cover up elements related) after 6 months voice started - same voice with some not eating anymore he stopped eating. Prison put him on medication. Voice went away. It got depressed ("for being locked up"). Medication he was on helped the depression also. It still on meds of 80 mg med. table. It is from also was on neurolept (plus haloperidol). But neurolept stopped before his release. He says if he knew the way he had neurolept better take haloperidol. Neurolept stopped 6 months before release.

DM. Cocaine plus alcohol for 2-3 years before & after imprisonment because it makes him feel happy & drunk. Cocaine makes him feel "what a good". Besides cocaine being hard to come by.

Post-Prison. None. No prostitution. After prison second age 14 for first time. He thinks he would be better off if he had no back to back. He thinks he would be better off if he had no back to back.

DM. He says he knows, no problem.

Physician's Signature: [Signature] Date: 1/20/07

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PHYSICIAN'S MEDICATION ORDERS AND SERVICE NOTES	
PATIENT'S NAME AND ID # JOHNNY WHITE	
a. MEDICATIONS PRESCRIBED THIS VISIT BY CENTER PHYSICIAN NAME OF MEDICATION	b. LIST ALL OTHER CURRENT MEDICATIONS AND SUBSTANCES (CENTER & NON CENTER)
<p><i>It presented today to have some agitated. Out of maintenance meds (except for Benzo) on which he has been stable since 9/05 (by pt request). Today, except for the George Couvador (New Lanier - Women) etc given to all</i></p> <p><i>Halalol, 5mg, #30, 1RF, 1 per qd</i></p>	
c. PHYSICIAN'S SERVICE NOTES	<p><i>Halalol, 2mg, #30, 1RF, 1 per qd</i></p> <p><i>Benzo, 15mg, #60, 1RF, 1 per BID</i></p> <p><i>Zoloft, 100mg, #30, 1RF, 1 per qd</i></p> <p><i>Cogentin, 1mg, #60, 1RF, 1 per BID</i></p> <p><i>[Signature]</i></p> <p><i>12/15/06</i></p>
d. SIGNATURE AND DATE	
a. MEDICATIONS PRESCRIBED THIS VISIT BY CENTER PHYSICIAN NAME OF MEDICATION	b. LIST ALL OTHER CURRENT MEDICATIONS AND SUBSTANCES (CENTER & NON CENTER)
c. PHYSICIAN'S SERVICE NOTES	
d. SIGNATURE AND DATE	

11/08/2006 11 55 883269558
 11/08/2006 09 12 883269558
 KRANGELBURG M-0
 KRANGELBURG MEDICAL
 PAGE 02
 PAGE 03/03

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
 Health Services
 MEDICAL INFORMATION FOR RELEASED INMATES

Name: Johnny G White
 Date of Birth: [REDACTED]
 Social Security #: [REDACTED]

Last Test (PTO) Date: [REDACTED]
 If positive, follow-up date: [REDACTED]
 Department of Chem X-ray: [REDACTED]
 Date of Test: [REDACTED]
 Name of Inmate: [REDACTED]

This patient has been found for the following problems:
Dr. Schizoaffective D/O Depressive

The patient has been given the following medications and/or injections:
100mg 10mg 10mg 100 8 AM, 1000 mg
1000 mg 1000 mg 1000 mg 1000 mg daily

HIV INFORMATION: Limiting diet
 It positive follow-up date (only when copy of summary of CD4 at VADL Lead): [REDACTED]
 Department (where VADL Lead): [REDACTED]
 History of Antiretroviral Therapy: [REDACTED]

Comments: [REDACTED]

Other pertinent issues relevant with patient (attach copies if needed): [REDACTED]

This patient (name redacted) has been referred for [REDACTED]
 Alcohol & Drug follow-up: [REDACTED]
 Comment: [REDACTED]

Most appropriate to the individual's needs & goals: [REDACTED]

I consent to this form being sent to [REDACTED]
 the HIV Consortium, ADAP Pharmacy, the following community physician,
 US Immigration and Naturalization Service (INS), County Health Department and/or other

Address: [REDACTED]
 Date: [REDACTED]

Patient's authorized address: [REDACTED]
 Date of Birth: [REDACTED]
 Social Security #: [REDACTED]

Name: [REDACTED]
 Date: [REDACTED]
 Department of Chem X-ray: [REDACTED]
 Date of Test: [REDACTED]
 Name of Inmate: [REDACTED]

This patient has been found for the following problems:
Dr. Schizoaffective D/O Depressive

The patient has been given the following medications and/or injections:
100mg 10mg 10mg 100 8 AM, 1000 mg
1000 mg 1000 mg 1000 mg 1000 mg daily

HIV INFORMATION: Limiting diet
 It positive follow-up date (only when copy of summary of CD4 at VADL Lead): [REDACTED]
 Department (where VADL Lead): [REDACTED]
 History of Antiretroviral Therapy: [REDACTED]

Comments: [REDACTED]

Other pertinent issues relevant with patient (attach copies if needed): [REDACTED]

This patient (name redacted) has been referred for [REDACTED]
 Alcohol & Drug follow-up: [REDACTED]
 Comment: [REDACTED]

Most appropriate to the individual's needs & goals: [REDACTED]

I consent to this form being sent to [REDACTED]
 the HIV Consortium, ADAP Pharmacy, the following community physician,
 US Immigration and Naturalization Service (INS), County Health Department and/or other

Address: [REDACTED]
 Date: [REDACTED]

Patient's authorized address: [REDACTED]
 Date of Birth: [REDACTED]
 Social Security #: [REDACTED]

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11/28/2006 09 13

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KERSHAW MEDICAL

PAGE 03/03

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
Health Services

MEDICAL INFORMATION FOR RELEASED INMATES

Inmate Name: Johnny G. White SCDC# [REDACTED]
 Date of Birth: [REDACTED] Social Security #: [REDACTED]
 Date of Release: _____ Institution Released From: Kershaw Correctional Inst
 Last TST (PTD) _____ Date _____ Result _____
 If positive, follow-up done _____ Date/Result of Chest X ray _____
 Date of Therapy _____
 Last Pap smear _____ Date _____ Result _____
 Follow-up done (if applicable) _____

This patient has been treated for the following problems
Dx Schizophrenia D/O Depressive

This patient has been given the following medications and/or supplies
Risperidone 1mg tid, Zolpidem 120mg 1 P.O. Q AM, Haldol 2mg tid each morning, Benadryl 1mg bid daily.

HIV INFORMATION Last HIV date _____ Result _____
 If positive, follow up done (May attach copy of summary of CD₄ & Viral Load)
 Date/Result latest CD₄ _____ Date/Result latest Viral Load _____
 History of Antiretroviral Therapy _____

Comments
Other pertinent recent labwork with dates (attach copies, if needed)

This patient (needs referral) (has been referred) for
 Mental Health follow up Alcohol & Drug follow up Other
 Comments
Very cooperative with individual sessions & group therapy.

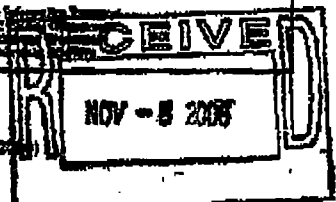
Release of Information
I consent to this form being sent to _____ the HIV Consortium _____ ADAP Pharmacy _____ the following community physician
 US Immigration and Naturalization Services (INS) _____ County Health Department and/or _____ other

By _____ Date _____

If a doctor's responsibilities to already released follow up from the physician or clinic of health care done, if necessary. This physician or clinic may obtain health care records by sending a signed release of information to:

Patient's anticipated address upon release
Barbara White (Mother)

Phone _____ County _____



White Inmate
Yellow Medical Record
SCDC M-30 (Rev September 2005)

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SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
INMATE CLEARANCE/EXIT CHECKLIST

INSTRUCTIONS

- 1 This form will be issued to the inmate and will serve as the Order to Report Form from Operations (only time an inmate is expected to return away from _____ Correctional Institution at least one night)
- 2 This form will be completed prior to an inmate's departure from _____
- 3 This form will be filed in Operations when completed

SCDC# 1111 Name _____
 Date _____ Living Assignment/Location _____
 Bring All Belongings () Bring State Clothing () Bring Nothing ()

PURPOSE OF CLEARANCE/EXIT

Transferred to _____ Date _____ Released To _____ Date _____
 Paroled to _____ Date _____ Other _____ Date _____

TO ALL INMATES It is your responsibility to take this form to the following locations and obtain clearance from each location

<u>LOCATION</u>	<u>STAFF SIGNATURE</u>	<u>DATE</u>
COMMISSARY/LAUNDRY	<i>[Signature]</i>	11-1-06
CLASSIFICATION (Forward records to Operations)	<i>[Signature]</i>	11-2-06
EDUCATION/LIBRARY	<i>[Signature]</i>	11-2-06
LIVING ASSIGNMENT (Turn in Room Key/Room Inspection)	<i>[Signature]</i>	11-28-06
MEDICAL (Forward records to <u>1118</u>)	<i>[Signature]</i>	11-28-06
If Applicable INFIRMARY (Physical needs for Pre Release)		
DENTIST		
SPECIAL MEDICAL NEEDS		
MAIL ROOM (Flashcard, Money orders, etc)		
PATMASTER		
PROPERTY CONTROL		
SOCIAL WORK SERVICES		
WORK ASSIGNMENT	<i>[Signature]</i>	11-28-06
OTHER _____		
OPERATIONS		
RELEASE ORIENTATION		

THIS IS TO CERTIFY THAT I HAVE ALL MY PERSONAL BELONGINGS AND THAT I HAVE LEFT NOTHING AT _____

INMATE'S SIGNATURE _____ **SCDC#** _____ **DATE** 11/14/06
OPERATIONS SUPERVISOR'S/DESIGNEE'S SIGNATURE _____ **DATE** _____

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PLAN OF CARE

ADMISSION DATE 12/18/06

PAGE 1

CLIENT NAME <i>Johnny White</i>	CLIENT #	MEDICAID # (if applicable)
------------------------------------	----------	----------------------------

PRIMARY DIAGNOSIS ADDRESSED IN TX. CODE AND DESCRIPTION (changes need to be noted and initialed)	OTHER DIAGNOSIS ADDRESSED IN TX. CODE AND DESCRIPTION (changes need to be noted and initialed)
295.70 Schiz affective dis	304.8 Kolygulation

PROMPTS
Number Goals and Objectives (1-18 2-20 as appropriate)
Goals should be in the words of the client, family and/or stakeholder but things they would like to achieve, change or need help with
Objectives should be reflective of the client's expectations, development, cultural sensitivity, to learn & expectations understandable to the client & family as appropriate, appropriate to the Dx, and behavioral, measurable, achievable
Interventions at least one for each objective that tells how and what is done to achieve the objective

MUST INITIAL, AND DATE ANY ADDED SERVICES OR CHANGES IN FREQUENCY AFTER MD SIGNATURE/AUTHORIZATION (BELOW)

GOAL	TARGET DATE	SERVICES	FREQUENCY	TYPE OF STAFF
GOAL 1: "I don't want to drink or drug or sell"	4/07	PHA	PRN	MD
Obj: In the next 6 months, Johnny will report that he has not had alcohol, used cocaine or sold drugs.		PHA	PRN	RND
Intervention: He will be assisted in learning to cope without substances by attending the Dixon Center and/or 12 Step groups.		Asst	TRN	MHP
GOAL 2: "I don't want to be depressed because then I see things."	7/07	Ind TE	1X mo	MHP
Obj: In the next 3 months, Johnny will report that he has noticed his SUDS level go down from a 10 to a 4.		SPD	PRN	MHP
Interv: He will be assisted in finding and staying on helpful medication and in locating resources to prepare him for a job		STAD	1X wk	MHC

COPY	CLIENT SIGNATURE AND DATE (Signature must and copy attached)	CLINICIAN SIGNATURE, TITLE AND DATE	PHYSICIAN SIGNATURE, TITLE AND DATE (confirm medical necessity and appropriateness)
<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined	<i>Johnny White</i> 1/11/07	<i>Loel Monday</i> 1/11/07	<i>[Signature]</i>
<input type="checkbox"/> Accepted <input type="checkbox"/> Declined			
<input type="checkbox"/> Accepted <input type="checkbox"/> Declined			

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PLAN OF CARE

PAGE 1

CLIENT NAME <i>Johnny White</i>	
Strengths (programs, institutions, people in client's life that offer support/ motivation) <i>Johnny's mother is supportive.</i>	Needs (treatment or goals; needs include legal involvements/requirements or court ordered to be) <i>- to maintain stability on MEDS. - to stay drug/alcohol-free</i>
Abilities (assets/skills of the client that can be used in treatment) <i>He can read.</i>	Preferences (app. times, therapist, type of treatment, language of preference) <i>no preferences</i>
Other Service Providers/Referrals (include co-occurring disabilities/needs beyond the scope of the MHC) <input type="checkbox"/> VA <input type="checkbox"/> DSM <input type="checkbox"/> BSS <input type="checkbox"/> AAD <input type="checkbox"/> DMRC <input type="checkbox"/> MS <input type="checkbox"/> OTHER (list) <i>Referred to ITB on 1/9/07</i>	Referral Source Information Contact Name Telephone Other
Program <i>Adult Outpatient</i>	
Discharge/Transition Criteria (informed with the client on intake) <i>He will be transitioned to CSP when he is stable and accustomed to coming here for TX.</i>	
Carrier Use	
Other	

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IPE Employment Services Referral Form

Name: Johnny White
Age: 29

CID: [Redacted]

Telephone Number: [Redacted]

Full Address: [Redacted]

Diagnosis (Include DSM code): 295.70 Schizoaffective Disorder

Current Involvement with Vocational Rehabilitation Department (Circle)

Yes or No

If yes, please describe?

*Recently released from
Kershaw Correctional -*

Special Concerns (Medical)

Work Candidate wants to work because he/she indicated (please circle one)

- Want to Work
- I Think I am Ready to Work
- I am Interested in Working
- I am currently Working and Want IPE Support

Other: _____

Referring Person: Carol Dunning Date: 1/9/07

Date Referral Received: _____

Date Accepted into the IPE Program: _____

Date of First Contact with Work Candidate Referred: _____

*** Please note Work Candidates accepted into the IPE Program will need employment services added to the YTP

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Triage Internal Referral Form	
Client Name <i>Johnny White Jr</i>	CID# [Redacted]
Address [Redacted]	
Phone # [Redacted]	DOB [Redacted] Adm Date <i>12/18/06</i>
Referral Date <i>12/19/06</i>	Appointment Date _____
Family Health Center Client <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Program Client Referred to <i>Adult Unit for Services</i>	
Primary Diagnosis	Axis I <i>75.70 Schizophrenia</i>
	Axis II <i>NO DX</i>
	Axis III <i>Alcohol Abuse</i>
	Axis IV <i>Unemployed</i>
Current Mental Status	<i>Johnny was stable on today</i>
Current Medications	<i>Johnny is on the following medication: Risperidone 15mg, Haloperidol 2mg, benztropine 1mg, and Haloperidol 2mg</i>
Present Services Provided	<i>Johnny received an assessment on today</i>
Reason(s) for Referral	<i>Johnny needs treatment and medication for schizophrenia</i>
Case Manager's Signature <i>Stephanie Lewis-Mason</i>	Date <i>1/18/07</i>
Physician's Signature <i>[Signature]</i>	Date <i>1/19/07</i>
Disposition _____	
PMA Scheduled with _____	MD Date/Time _____
Client Accepted and Assigned to _____	
Clinician <i>Lorel Thibault</i>	Appointment Date <i>1/19/07 @ 11:00</i>
<input type="checkbox"/> Referral declined Why? _____	
<input checked="" type="checkbox"/> Accepted services	

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Orangeburg Area MENTAL HEALTH CENTER
 Initial Clinical Assessment
 Date 12/18/06 Source of Data Client Family
 School Old records Other
 Referred By Self Court Order (Type) Other

Section A Identifying Data
 Name (Last) White (First) Johnny (MI) [redacted] CID# [redacted]
 Age 29 DOB [redacted] Gender Male Race AK Marital Status Single
 Other Identifying Information Kershaw Correctional Institution

Section B Perceptions and History of Presenting Problem(s)
 Documentation should address the source of information and the following

(1) What brought client here today (ink or duration and stressors)?
 Client Response: Johnny was referred to DMHC by the Department of Correction from Colapinto - 12/1/06 for drug possession. I began to hear voices and seeing things. I think about home, my children, feeling bad about myself and my remember things. I were black on the following medications: Permethrin 100mg, buspiron 15mg, Haloperidol 2mg, Perstargue
 Collateral Sources (Specify): long and Haloperidol 5mg

(2) What are the possible causes? Why does the client think she/he is having these problems/symptoms?
 Client Response: "I think it because I were incarcerated."
"I don't know why I am having these symptoms."
 Family/Guardian (Specify): N/A
 Collateral Sources (Specify): N/A

(3) Who and what area of client's life are affected by this? How does this make client/family member feel about him/herself?
 Client Response: "It have affected my family, children and a job"
 Family/Guardian (Specify): N/A
 Collateral Sources (Specify): N/A

(4) How does client/family think this can be solved? What will help?
 Client Response: "I expect help!"
 Family/Guardian (Specify): N/A
 Collateral Sources (Specify): N/A

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Name Johnny White Jr. CID# [REDACTED]
Section C Urgent Needs/Risk Assessment

- Suicidal Risk** Denies Ideas Plans Means Intent Hx of attempts Hx in family
- Homicidal Risk** Denies Ideas Plans Means Intent Hx of attempts Hx in family
- Self Mutilation** Denies Ideas Plans Means Intent Hx of attempts Hx in family
- Other Risk Taking Behaviors** Past or current (Specify in comments section) Denies
- Driving fast/DUI Unprotected sex Gang affiliations Fire setting Hx of violence
- Other

Comments

Steps taken to address urgent needs

Section D History of Mental Health Treatment
A chronological history of all inpatient and outpatient treatment to include location, date of treatment, diagnosis, type of treatment, and hospital/visit ended None

Johnny White being seen at mental health at the age of 13 1/2 last
in RFE DT for 30 days, 8th time to RFE today, will be 1 year for two
1/2 the 1st time for ten months and Birchwood for ten months.
Johnny denies any suicide attempt.

Family Mental Health History None

Describe history and specify relative

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P. 027

Name: Johnny Jackson CID# [REDACTED]

Section of Trauma History (See Trauma Assessment Form)
History of Trauma/Abuse/Neglect: None apparent Significant parent but denies Acknowledges
 Retorted (or just remain)
Type of Trauma/Abuse/Neglect: None Sexual Physical Emotional Self-harm/accidents else was going to die/be killed
Was client: Victim Witness Perpetrator
Describe issues identified (highlights feedback, clarify notes, avoidance)

Section F Substance Use

Substance	Age Started	Frequency/Quantity	Method	Last Use
Alcohol	16 yrs	and 1/2lt, 1/2oz	mouth	never
General	16 yrs	1/2oz	mouth	never
Seclus (Benzodiazepine Barbiturates)	16 yrs	1/2oz	mouth	never
Stimulants (Cocaine Methamphetamine Base)	16 yrs	1/2oz	mouth	never
Heroin (and Cocaine Heroin)	16 yrs	1/2oz	mouth	never
Other				

Substance Use Treatment (a chronological history of all inpatient and outpatient treatment to include location dates of treatment type of treatment, and how/why ended)

- 1) Experiencing loss experiences
- 2) Experienced blackout? Yes No If yes, describe
- 3) Withdrawal symptoms (seizures, DT's, etc)? Yes No If yes describe
- 4) Legal involvements related to substance use? Yes No If yes describe
No legal involvements
- 5) In your alcohol use something that needs to be addressed in treatment? Yes No If yes describe
Don't drink for 2 weeks or more
- 6) Family history of substance abuse? Yes No If yes describe

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Name James White Jr. CID# [REDACTED]

Section C Medical History and Current Status (See Medical Assessment Form)

C = Current problem		H = Client has a history	
C	H	C	H
<input type="checkbox"/>	<input type="checkbox"/> No physical ex/problems	<input type="checkbox"/>	<input type="checkbox"/> Kidney/bladder problems
<input type="checkbox"/>	<input type="checkbox"/> Thyroid	<input type="checkbox"/>	<input type="checkbox"/> Stomach/intestinal problems
<input type="checkbox"/>	<input type="checkbox"/> Seizures	<input type="checkbox"/>	<input type="checkbox"/> Serious body/head injury
<input type="checkbox"/>	<input type="checkbox"/> Severe headaches/migraines	<input checked="" type="checkbox"/>	<input type="checkbox"/> Heart problems/hypertension
<input type="checkbox"/>	<input type="checkbox"/> TB	<input type="checkbox"/>	<input type="checkbox"/> Epilepsy
<input type="checkbox"/>	<input type="checkbox"/> Cancer (specify) _____	<input type="checkbox"/>	<input type="checkbox"/> Liver/hepatitis
<input type="checkbox"/>	<input type="checkbox"/> Lung problems	<input type="checkbox"/>	<input type="checkbox"/> Injume disorder
<input type="checkbox"/>	<input type="checkbox"/> Diabetes (specify if juvenile or adult onset)	<input type="checkbox"/>	<input type="checkbox"/> Surgeries (specify) _____
		<input type="checkbox"/>	<input type="checkbox"/> Allergies _____

Female:
 Date of last menstrual period _____
 Pregnant? Yes No
 # of pregnancies _____
 # of living children 2

Comments (Describe status of any current physical conditions Describe any significant history) High blood pressure

Significant Family History "I don't know"

Medication (List all current medications prescribed and OTC including herbs vitamins etc)

Name of medication	Dosage	Frequency	Why prescribed?	How well does it work?
<u>Diazepam</u>	<u>15mg</u>	<u>1 Po TID</u>	<u>Anxiety</u>	<u>OK</u>
<u>Zolpidem</u>	<u>120mg</u>	<u>1 Po B. Bed</u>	<u>depression</u>	<u>OK</u>
<u>gabapentin</u>	<u>300mg</u>	<u>1 tablet every morning</u>	<u>depression, nerve</u>	<u>OK</u>
<u>gabapentin</u>	<u>1mg</u>	<u>three daily</u>	<u>not helping</u>	<u>OK</u>

Medication Allergies NONE

Adverse Reactions to Medication NONE

Primary Care Physician Emergency Room Phone # (803) 533-2200 Date Last Seen 12/21/06

If none community resources provided? Yes No

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Name Johnny White Jr. CID# [REDACTED]

Section H Social, Economic and Cultural

1) Where were you born and raised?
 Johnny was born and raised in D.C.

2) Describe your family of origin (who raised you how many sibling(s) quality of relationships then and now)
 Johnny was raised by both parents, he have one sister and one brother. He grew up with his family.

3) Describe current family/significant relationships (significant other, children, quality of relationships?)
 Johnny last relationship was two years ago not presently in one yet there are.

4) Describe past significant relationships (marriages, divorces, separations, etc.)
 Johnny was in a relationship in 2010 or more never been married but have kids.

5) Describe any significant losses/separations of any family members/significant others (including loss of pets, physical functions, limbs, property/possessions, etc.)
 NONE

6) Describe current housing situation (house, mobile home, boarding house, shelter, homeless, etc.) Any needs?
 Johnny is currently living in a mobile home in D.C. with his parents at 1870 Kennedy Rd City of Colles.

7) Any problems/issues/changes with sex/sexuality? Yes No (if yes describe)

8) Describe current social involvement (activities that you enjoy with others)
 NONE

9) Describe current spiritual/religious involvement
 NO

10) Describe educational background (how far in school, high school, college, special ed., special programs, highest level completed)
 Johnny quit school in the 12th grade with the wrong crowd.

11) Describe current and past employment (how long at each job, if on disability, include any military service/type of discharge, etc.)
 N/A
 If you could work now, what would you be interested in doing?
 Construction

12) History of legal involvements (DUI charges, jail/prison time, arrests and convictions, as well as any current legal problems) None
 Johnny was in prison from 2004-2006 for drug charges.

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Name James White Jr. CID# [redacted]

Section I Strengths, Needs, Abilities, and Preferences

Strengths (family social spiritual support hobbies and attitudes that have helped overcome past crises)

Family

Needs (Client's expression of current needs emotional physical social environmental)

I am need treatment and medication to help decrease my symptoms and be able to connect myself to other resources in the area

Are you currently receiving services from other providers/agencies?

Yes No

Specify

Abilities (Client's ability to follow up with treatment understand instructions participate in treatment)

I have the ability to follow up with treatment.

Preferences (appt day/times therapist treatment modality etc)

I have no preferences at this time.

Section J View of Treatment and Discharge

Documentation should include the source and the following

> What are your expectations?

Client: To be more stable

Family (specify)

> What is your commitment and motivation to treatment?

Client: Committed and motivated

Family (specify)

> How will you know when you will be ready for discharge?

Client: "I will be able to work"

Family (specify)

Section K Mental Status Exam

List more than one descriptor if applicable Elaborate on any problem areas in the space provided

Appearance & Hygiene	<input type="checkbox"/> Messy <input type="checkbox"/> Neat <input checked="" type="checkbox"/> Clean <input type="checkbox"/> Disheveled <input type="checkbox"/> Bizarre <input type="checkbox"/> Body Odor Comments
Motor Activity	<input checked="" type="checkbox"/> Appropriate to situation <input type="checkbox"/> Over active <input type="checkbox"/> Tremulous <input type="checkbox"/> Poor coordination <input type="checkbox"/> Repetitive <input type="checkbox"/> Lethargic Comments
Attitude During Interview	<input checked="" type="checkbox"/> Cooperative <input type="checkbox"/> Oppositional <input type="checkbox"/> Hostile <input type="checkbox"/> Dramatic <input checked="" type="checkbox"/> Guarded <input type="checkbox"/> Irritable <input type="checkbox"/> Withdrawn Comments
Affect	<input type="checkbox"/> Appropriate to situation <input type="checkbox"/> Blunted <input checked="" type="checkbox"/> Flat <input type="checkbox"/> Tearful <input type="checkbox"/> Incongruent <input type="checkbox"/> Expansive <input type="checkbox"/> Labile Comments
Mood	<input type="checkbox"/> Happy <input type="checkbox"/> Euthymic <input type="checkbox"/> Anxious <input type="checkbox"/> Depressed <input type="checkbox"/> Angry <input type="checkbox"/> Hopeless <input type="checkbox"/> Suspicious <input type="checkbox"/> Passive Comments
Speech	<input checked="" type="checkbox"/> Normal rate and tone <input type="checkbox"/> Slow <input type="checkbox"/> Fast <input type="checkbox"/> Soft <input type="checkbox"/> Loud <input type="checkbox"/> Pressured <input type="checkbox"/> Slurred <input type="checkbox"/> Stuttering <input type="checkbox"/> Altered Comments

REVISION

DATE OF VISIT

BY

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Name: Shane White CID# [REDACTED]

Thought Process	<input type="checkbox"/> Normal appropriate behavior (relevant) <input checked="" type="checkbox"/> Loose associations <input type="checkbox"/> Flight of ideas <input type="checkbox"/> Blocking <input type="checkbox"/> Racing <input type="checkbox"/> Circumstantial <input type="checkbox"/> Tangential <input type="checkbox"/> Indecisive <input type="checkbox"/> Disorganized <input type="checkbox"/> Concrete Comments:																																				
Thought Content	<input type="checkbox"/> Normal <input type="checkbox"/> Phobic <input type="checkbox"/> Obsessions <input checked="" type="checkbox"/> Ideas of hopelessness <input type="checkbox"/> Ideas of worthlessness <input type="checkbox"/> Persecution <input type="checkbox"/> Persecutory <input type="checkbox"/> Suicidal <input type="checkbox"/> Homicidal (Note: If suicidal/homicidal see risk assessment) Comments:																																				
Hallucinations	<input checked="" type="checkbox"/> No evidence <input type="checkbox"/> Auditory <input type="checkbox"/> Command <input type="checkbox"/> Visual <input type="checkbox"/> Olfactory <input type="checkbox"/> Tactile <input type="checkbox"/> Osmic Comments:																																				
Delusions	<input checked="" type="checkbox"/> No evidence <input type="checkbox"/> Persecutory <input type="checkbox"/> Grandeur <input type="checkbox"/> Reference <input type="checkbox"/> Influence <input type="checkbox"/> Somatic <input type="checkbox"/> Demerit Comments:																																				
Orientation/Level of Consciousness	<input type="checkbox"/> Alert Oriented to <input checked="" type="checkbox"/> Person <input checked="" type="checkbox"/> Place <input checked="" type="checkbox"/> Time <input checked="" type="checkbox"/> Situation <input type="checkbox"/> Clouded <input type="checkbox"/> Comatose Comments:																																				
Judgment	<input type="checkbox"/> Able to make sound decisions <input type="checkbox"/> Usually able to make sound decisions <input checked="" type="checkbox"/> Poor decision making adversely affects self <input type="checkbox"/> Poor decision making adversely affects others Comments:																																				
Insight/Adjustment to Problems/Illness, Disabilities, Disorders	<input type="checkbox"/> Denies problem/illness <input type="checkbox"/> Blames others <input type="checkbox"/> Minimizes <input checked="" type="checkbox"/> Acknowledges & understands <input type="checkbox"/> Acknowledges but fails to understand Comments:																																				
Memory (use example)	<input type="checkbox"/> Intact <input checked="" type="checkbox"/> Poor remote <input checked="" type="checkbox"/> Poor recent <input type="checkbox"/> Poor immediate Comments:																																				
Concentration & Calculations (use example)	<input type="checkbox"/> Able to concentrate <input type="checkbox"/> Able to do simple math <input checked="" type="checkbox"/> Easily distracted <input type="checkbox"/> Daydreams Comments:																																				
Fund of Knowledge (use example)	<input type="checkbox"/> Above average <input type="checkbox"/> Average <input checked="" type="checkbox"/> Below average Comments:																																				
Other Pertinent Information																																					
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Name Johnny White Jr. CID# [REDACTED]

Section I DSM-IV Diagnosis
(Must include both code and description)

Axis I 295.70 Schizophrenia Residual NOS

Criteria For Dx Hearing voices, seeing things, disorganized thinking, can't remember things

Axis II NO DX

Axis III No Med. Issues

Axis IV 55

Axis V Normal

Section II Interpretive Summary

This is a narrative of the data gleaned during the assessment. It should include Priorities for treatment, include co-occurring disorders Justification for treatment Recommendation(s) for treatment and referrals (including services and their frequencies) Clinical judgement re both positive and negative factors likely to affect the client's course of treatment and clinical outcomes. And it could also include Current levels of cognitive, emotional and behavioral functioning Issues present Basis for diagnosis Adjustments to disorder/disabilities

Johnny has a co-occurring disorder which is high blood pressure. Johnny needs medication and treatment for Schizophrenia. Johnny recommended drug to hearing voices and seeing things at least once a month. Johnny has to be compliance with treatment to see positive results. Johnny presented today for treatment and medication after being discharged from prison from 2004-2006 on drug charges. Johnny experience disorganized thinking, can't remember things, disorganized mood and hearing voices.

Assigning Staff's Signature / Title (if applicable) _____ Date _____

Clinician's Signature / Title Stephanie L. Moore Date 12/15/06

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up

CLINIC/CDM <i>Johanny Delator</i>		DATE OF REFERRAL <i>12/15/06</i>	DATE OF TRANSFER/DISCHARGE <i>2/16/07</i>
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2. SUMMARY OF SERVICES RENDERED

a. Source and reason for referral
He was referred by the Department of Corrections after his discharge on 12/1/06. He had been hallucinating.

b. Treatment objectives established and achieved; response to treatment (what client reported regarding his/her status at time of discharge)
He didn't want to get back into involvement with the drug scene and he wanted to feel less depressed. The catin helped him but he called to report that he relapsed.

c. Progress toward client's goals
He did find a job

d. Strengths, abilities, needs and preferences taken into consideration for treatment planning
 Strengths: *His mother and girlfriend were supportive*
 Abilities: *He could find work*
 Needs: *He needed to stay on MHA's and off drugs*
 Performance: *He needed his appointments scheduled around work hours.*

e. Services provided (within last year)
MHA's, assessment, SPD and ind. therapy ...

f. Medications prescribed response and complications (if no medications prescribed state as such)
*Zoloft 100mg qd
 Gabapentin 150mg bid
 Risperidone 5mg hs
 Cogentin 1mg qd.*

g. Date of last PMA appointment: *2/16/07* Kept appointment: OK/NA

3. CONDITION UPON TRANSITION / DISCHARGE

a. Date actually last seen: *5/14/07* Marked across this date: *stable*

b. Transition/Discharge Plan shared with: client family physician supervisor program staff
 referral source community services authorized representative

c. Client's condition upon transition/discharge
Johanny had called after he was seen in May to report that he had relapsed. He was referred to the Dean Center for to come here to get assessed for inpatient. He never came in.

