SC Court of Appeals

Outline of documents

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JUL 08 2020
SC Court of Appeals

Appeal

A. Motions/Notices

B. Letters/responses

C. Records with supporting facts/Correspondence

Medical Care

A. Records with supporting facts

1. Files kept in the home on Albert
2. Daily log of care

B. Correspondence

C. Medical Records

D. Prescriptions

LEGAL

1. Supporting Documents
2. Pictures
3. Autopsy

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

APPEAL FROM THE SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

Melody L. James, Commissioner of the Appellate Panel
Avery B. Wilkerson, Jr., Commissioner of the Panel
Gene McCaskill, Commissioner of the Panel

Appellant Court Judges

W.C.C. FILE NO: 1105628

Southern Industrial Constructors, Inc. — Respondent
Zurich American Insurance Company c/o
Zurich North America
Victoria Lichtenberger
Tereasa Osborne

v.

Albert Bradley/ — Appellant
Christine W. Bradley, *pro se*

NOTICE OF APPEAL

Christine W. Bradley appeals the decision of the Honorable Melody L. James, Avery B. Wilkerson, Jr., and Gene McCaskill dated July 26, 2018. Appellant received a copy of this decision on July 26, 2018.

August 20, 2018

Counsel of Record:

Jason Lockhart
P.O. Box 12519
Columbia, SC 29201
(803)227-2283

Tereasa Osborne
330 Dr. Martin Luther King Jr. Way
Gastonia, NC 28052
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Statement of the Case

Albert Bradley suffered catastrophic injuries on May 16, 2011 while working for Southern Industrial Constructors, Inc. of Columbia, SC. Metal fragments from a chain link were impaled into his airway, and left him with anoxic and traumatic brain injuries. These injuries caused Albert Bradley to be totally disabled and completely reliant upon others for all his care needs. Albert Bradley was cared for in his home by his primary caregivers, Christine W. Bradley and Lavare Seltun until he was taken away from family members during a brief hospital visit at Caromont Regional Medical Center in Gastonia, NC on March 17, 2016. Christine Bradley and Lavare Seltun were banned from Caromont Regional Medical Center in Gastonia, NC on March 17, 2016. Albert Bradley was taken into custody by Zurich American Insurance/Zurich North America/Jason Lockhart and Gaston County Department of Health and Human Services in Gastonia, NC on March 17, 2016.

Family members had no contact and no knowledge of Albert Bradley's whereabouts for approximately 30 days after separation. Family members received notification approximately 30 days later that Albert Bradley was in Mecklenburg County, NC at Carolinas Medical Center-Main in Charlotte, NC on life support. Family members had very limited access to Albert Bradley. They were often not allowed to touch him, even if they were permitted to visit for short periods of time. Christine Bradley was prohibited from visiting with her husband, Albert Bradley. She was not allowed to see him or touch him at all.

There is no documentation of a hearing for appointment of Guardian/Guardian Ad Litem, Victoria Lichtenberger. The defendants purport that there was a hearing, yet no family members, not even the claimant, were notified, served, or present at any such hearing. Albert Bradley suffered immensely under the hands of Guardian/Guardian Ad Litem Victoria Lichtenberger.

Presiding Commissioner was notified of the status via letters regarding the status of Albert Bradley's condition and photos were provided as evidence. After several hospital admissions for treatment of severe medical conditions under the direction of South Carolina's Workers' Compensation Commission appointed Guardian/Guardian Ad litem Victoria Lichtenberger and Gaston County DHHS, Albert Bradley subsequently died. Family members were notified after his death on February 5, 2017.

The defendants claim that Albert Bradley died of diffuse acute bronchopneumonia. Requests were made for autopsy report, toxicology report, expert witness testimony, and the medical records to support this claim. The family requested that all sealed medical records on this matter be opened for full review and these requests have yet to be granted.

APA submissions presented for testimony at hearings held by the defense have not been provided to the appellant for review and examination.

The defense argues that Victoria Lichtenberger has maintained an accounting for the claimant when in fact the claimant was also in the custody of the state of NC with the Gaston County Department of Health and Human Services (DHHS). Attorney Travis Page in Gastonia, NC was appointed to manage the accounting for the claimant for Gaston County DHHS. Requests were made all financial records pertaining to the claimant, and these records have yet to be received.

The defense maintains that there was good faith in conducting a dependency investigation, yet they still fail to show documentation of all family members notified. They also failed to provide documentation from all employers to show benefits due to beneficiaries on behalf of the claimant. Chris Tuten initially contacted Christine Bradley by phone shortly after the death of Albert Bradley and stated that he was investigating Albert Bradley's death.

The defense highlights that no medical bills were brought before the commission for consideration for payment. Albert Bradley was in the custody of Victoria Lichtenberger and Gaston County DHHS. Albert Bradley was admitted to multiple facilities from March 17, 2016 until the time of his death.

The defense highlights that the South Carolina's Workers' Compensation Commission has full jurisdiction over the subject matter and parties pertaining to this case. However, this case was never brought before the commission for review, even with all the factors that occurred from March 17, 2016 until the time of his death.

FINDINGS OF FACT

1. Albert Bradley sustained traumatic brain injury while working for Southern Industrial Constructors, Inc. of Columbia, SC on May 16, 2011. Because of his injuries, he was declared permanently and totally disabled by the South Carolina Workers' Compensation Commission.
2. Albert Bradley received total care in his home by his wife Christine Bradley and his daughter Lavare Seltun until the time he was taken away from his family on March 17, 2016.
3. Attorney Mike Farry with Horton Law Firm in Greenville, SC was appointed as Guardian for Albert Bradley.
4. There is no evidence to support appointment of Victoria Lichtenberger as Guardian/Guardian Ad litem for the claimant Albert Bradley. No family members, not even the claimant, were notified, were served, or were present at any hearing.
5. Expert witness testimony, medical records, autopsy report, and toxicology report have been excluded for examination and review by the appellant to provide support to the claimant's cause of death.
6. Albert Bradley had multiple severe medical conditions during the timeframe he was under the care of Victoria Lichtenberger/Zurich and Gaston County Department of Health and Human Services to include the following: life support; severe dehydration and renal failure; widespread thrombosis; diabetic ketoacidosis; and fall with head injury resulting in laceration and stitches. He was also receiving life-ending medications.

7. Albert Bradley was taken into custody by Victoria Lichtenberger/Zurich Insurance/Jason Lockhart and Gaston County Department of Health and Human Services (DSS) after a brief hospital visit at Caromont Regional Medical Center on March 17, 2016.
8. Albert Bradley was also under the custody of Gaston County Department of Health and Human Services (DSS) in Gastonia, NC from March 17, 2016 until the time of his death February 5, 2017.
9. The family received notification after 30 days of no contact at all with the claimant that he was on life support in Mecklenburg County at Carolinas Medical Main in Charlotte, NC. Albert Bradley had numerous hospital visits with multiple hospitals for serious medical conditions from the time he was taken from March 17, 2016 until his death.
10. Chris Tuten did not provide documentation to show good faith in conducting a dependency investigation. All family members were not contacted. Documentation was not provided to the court to show beneficiaries of the claimant held through all employers.
11. APA submissions presented to the court for evidence by the defense was not provided to the appellant for review and examination.
12. Albert Bradley paid for transportation, medical care, and medical expenses out of his own monies.
13. Financial records have not been provided to show proof of full accounting of the claimant.
14. Victoria Lichtenberger, is a geriatric care manager and owner and operator of Eldersource Eldercare in Charlotte, NC, who places aging adults into adult homes and facilities.

15. Albert Bradley, the claimant, has a living spouse, Christine Bradley, and three living children: Derwin Bradley, Lavare Seltun, and Christy James.

BASED ON CONCLUSIONS OF LAW AND FINDINGS OF FACT

Did the commissioner fail to consider important reasons for award for compensation? If so, what reasons?

Section 42-9-10(A)(B)(C)(D). Amount of compensation for total disability and what constitutes total disability. During proceedings and order, temporary compensation was applied to a permanent disability claim. Although Commissioner Beck stated that claimant Albert Bradley was declared permanently disabled, law was applied for temporary disability with attempt to settle the claim on that basis.

Section 42-15-60 (C)- Albert Bradley, now deceased claimant, who received total care and medical services in his home by family members 24/7 up until the year he was taken, were never compensated for the services they provided to the claimant even after care plan which was requested was presented to the court to show the care the claimant was receiving in the home. There was a court order which ordered monies which Albert Bradley paid out of his own monies to be reimbursed by the carrier for expenses such as medications and supplies dating back to 2013 which still have not been paid as of this date. Albert Bradley paid for his own transportation to court hearings, doctors' visits, medications, and nursing services, all which no reimbursement was received. Albert Bradley even had to purchase his own wheelchair accessible van for transportation out of his own money and was never reimbursed.

67-902-Dependency investigation. The argument here is that a thorough investigation of benefits on behalf of the claimant for all dependents through his employers should be brought before the court. Christine Bradley stated before the court in a prior hearing and made pleas to the Commission that she was due spousal benefits as she was the beneficiary listed for Albert Bradley through his employer Southern Industrial. Her request for further information and documentation pertaining to the above was not acknowledged.

Section 42-17-60. Christine Bradley, spouse of claimant, has been denied benefits. "In case of appeal from the decision of the commission on questions of law, the appeal does not operate as a supersedeas, and, after that time the employer is required to make weekly payments of compensation."

Sections 42-9-220, 42-9-230. Christine Bradley was separated from her husband on March 17, 2016, and all benefits that Albert Bradley had been receiving had stopped in December 2015.

Did the commissioner incorrectly decide the facts? If so, what facts?

Section 42-9-10(A)(B)(C)(D). Albert Bradley was declared permanently and totally disabled.

Section 42-15-80. It was ordered that Albert Bradley died of acute bronchopneumonia. No medical records including autopsy and toxicology results were submitted to support this diagnosis. No expert witness testified at the hearing to provide expert testimony to support this diagnosis.

Albert Bradley died in the custody of Gaston County DSS/Tereasa Osborne, Stephanie Stevenson and Victoria Lichtenberger, appointed Guardian/Guardian ad Litem through the SC Workers' Compensation Commission. Victoria Lichtenberger is owner of ElderSource, located at 1018 East Blvd., Suite 3, Charlotte, NC, a geriatric care management company that is responsible for the placement of geriatric patients into adult homes and facilities.

Albert Bradley suffered immensely under the hands of Guardian Ad Litem Victoria Lichtenberger and Gaston County DSS/Tereasa Osborne, Stephanie Stevenson. From the time of their acquisition of the claimant, there was a rapid decline in his health evidenced by multiple hospital visits and admissions that ultimately led to his death.

Section 42-15-60- The claimant has medical bills that have not been paid by the carrier. These bills have not been brought before the court to show proof of payment.

67-902, 67-903, 67-904. Tuten testified that he conducted the dependency investigation in good faith when in fact he failed to make contact with all of the claimant's family members and failed to provide documentation to support his findings.

APA submission presented by Attorney Jason Lockhart used as evidence was not provided to all parties prior to hearing or after the hearing and was used as facts for the case.

67-216, 42-15-55. Victoria Lichtenberger, Guardian ad Litem, said representative for the deceased claimant, was speaking on behalf of the insurance company instead of the claimant. Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem and Gaston County DSS/Tereasa Osborne/Stephanie Stevenson when he died. Victoria Lichtenberger, Guardian Ad Litem was also documented as dependent of the claimant. Proof of guardianship was never provided during court when requested. Family members, or the claimant himself, Albert Bradley, was not present at any hearing for the appointment of Guardian Ad Litem.

Family members had very limited contact with Albert Bradley during the last year of his life, and visits with him were supervised when they were allowed.

Do you think the Commissioner applied the wrong law? If so, what law?

Section 42-9-20. Temporary compensation, partial disability law cannot be applied to a claimant who has suffered physical brain damage. Albert Bradley sustained physical brain damage on May 16, 2011, and was permanently and totally disabled on the date of his accident.

Do you feel there are any other reasons why the Commissioner's judgment was wrong? If so, what?

42-9-20. Based on the findings and the laws, as highlighted above a temporary compensation and partial disability cannot be applied when an individual has suffered a permanent disability.

Family members were denied their rights to civil proceedings for guardianship for Albert Bradley. Albert Bradley has a living spouse Christine Bradley.

67-902. There was failure to conduct a thorough dependency investigation through the claimant's employer Southern Industrial.

Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem, and owner of ElderSource and Gaston County DSS/Tereasa Osborne, Agency Attorney/Stephanie Stevenson, guardianship supervisor. No proof of guardianship was ever provided.

67-1301. Expert physician testimony was not heard on the given diagnosis, acute bronchopneumonia, as to the cause of Albert Bradley's death.

Other documentation which were ordered by the Commissioner to include the complete financial record of the claimant held by the Guardian Ad Litem Victoria Lichtenberger as well as her final accounting, full medical records from the time that Albert Bradley was taken into custody from 3/17/2016 until the date of his death including autopsy and toxicology were not submitted as ordered for review and evidence.

What action do you want the Commission to take in this case?

Apply the laws accordingly, consider the facts in this case, and apply due process to be fair in his decision-making and execution of the laws. Every individual has the right to fair and equal representation.

Albert Bradley

Summary of Initial Events

On March 15, 2016, Albert Bradley was taken to Caromont Regional Medical Center in Gastonia, NC for evaluation of areas of erythema to his buttocks. He traveled to the hospital via ambulance, and he was accompanied by his wife Christine Bradley, his primary caregiver. In the emergency department, he was evaluated by emergency department nurse and physician. After assessment which included vital signs, obtaining 12 lead EKG, assessment of buttocks to include taking pictures, and chest x-ray, the ER physician stated that Albert Bradley would be admitted for further evaluation. Albert Bradley was admitted to CRMC on March 15, 2016.

The night of Mr. Bradley's admission, IV antibiotics were initiated. He also received IV fluids, and his tube feedings he received per his home regimen. The following afternoon on March 16, 2016, the same physician from the ER rounded on Mr. Bradley. He stated that Mr. Bradley could be discharged to home, and that nothing was wrong with him. The only medication he prescribed for Albert Bradley was a topical antifungal cream to apply to buttocks. Christine Bradley then asked if nothing was wrong with him, then he (Albert Bradley) could just go ahead and go home now? The physician stated the patient could not be released until the attending physician released him.

In the afternoon on March 17, 2016, Albert Bradley's careplan began to change. He began to receive tubefeedings at a higher rate and continuously throughout the day. In the home, Albert Bradley only received continuous feedings at night and bolus feedings during the day. It was also observed that Mr. Bradley had an indwelling urinary catheter placed. Christine Bradley reported this to the charge nurse on the unit. Christine stressed that Mr. Bradley was not to receive a foley catheter because of previous trauma to his urethra and that this would cause him harm. She also asked why was this placed after she had left the facility to go home to shower and why no one had discussed this with her. The charge nurse then showed her a letter which was placed in Albert Bradley's chart to document that Jason Lockhart/Zurich Insurance was the Guardian of Albert Bradley. A copy of the letter was requested and the charge nurse stated she could not provide a copy. Christine Bradley also requested to take her husband home with her as she was the one who brought him in to the hospital and she was the one who provided the care he needed 24/7. The charge nurse told her that if she tried to take him out of the facility, she would call the police and have her arrested.

Albert Bradley moaned and groaned in pain the entire night of March 17, 2016 related to the insertion of the indwelling catheter. This was brought to the attention of the nurse. Lavare Seltun was present on the night of March 17, 2016, and informed the nurse that Albert Bradley was exhibiting signs and symptoms of pain (moaning, groaining, guarding). Great concern was expressed regarding why the indwelling catheter was placed given the contraindications such as swelling and increased risk for urinary tract infections. The nurse was also informed that Albert Bradley had prior urethra trauma and was not to receive indwelling catheters routinely. He voided on his own without any issues. The nurse was made aware of this. She stated

that it was ordered by the physician. Christine Bradley observed Mr. Bradley with swelling of his penis and blood in the catheter line. Mr. Bradley also developed a low grade temperature that evening. Lavare Seltun also questioned why the patient was being held in the hospital if the physician had written discharge orders for the patient to be released. The nurse did not respond. Lavare Seltun requested to speak to the charge nurse. The charge nurse stated there was a document in the chart which prohibited the patient from leaving the hospital. Lavare Seltun informed the charge nurse that she had never heard of anything like that and that it sounded illegal. Lavare Seltun advised the charge nurse to contact her hospital administrator and legal department to make them aware of this. Lavare Seltun stated Christine Bradley had the right to take her husband home because she brought him into the hospital. The charge nurse said she would have to call the police. Lavare Seltun asked the charge nurse to see the document. The document was a motion to modify guardianship entered by Jason Lockhart/Zurich Insurance/Victoria Lichtenberger. Another document was also in the chart on Gaston County DSS letterhead in bold print that stated: Do Not Let Patient Leave Hospital.

On the following morning of March 18, 2016, the dayshift nurse came in and started up Mr. Bradley's tubefeedings. Christine Bradley had already stopped his feedings for the day to align with his usual feeding patterns in the home. Christine Bradley turned off the pump, and told the nurse that Mr. Bradley does not get fed around the clock like that because too much feedings could make him sick. The nurse stated, "Where he's going, he's going to be fed around the clock. Because he's going to the nursing home." The nurse called security. Security came to my husband's room and escorted me (Christine Bradley) out. Christine Bradley was told that she was banned from Caromont Regional Medical Center at approximately 8:00-8:30 am.

Lavare Seltun was called by Christine Bradley and briefed on the situation. Lavare Seltun arrived at Caromont Regional Medical Center in Gastonia, NC on March 18, 2016 at approximately 8:30 to be her father's side. After leaving his room for about 30 minutes, and upon returning around noon, I was approached by Stephanie Stevenson and Amanda Greene who informed me that they were my father's (Albert Bradley) guardian. I was then asked to "come on and go with me" by Stephanie Stevenson. I asked her if she had any paperwork documenting how she became his guardian. She said no. I asked Ms. Stevenson and Ms. Greene how could they be my father's guardian when I have never been to court, never been served, my family has never been served or never been court, and Mr. Bradley has never been to court or served? She then told me that my visitation ends right now. Then she said matter of fact, you have no more visitation this weekend. Then I was told I was banned from the facility. Then three to four security officers walked up to my father's room to escort me out of the facility. They told me not to come back. Before I left, in tears, I told Ms. Stevenson and Ms. Greene that Albert Bradley required 24/7 care. I told them that my mother and I were his primary caregivers, that we were the ones who understood how he communicated best, and that he needed his family with him to communicate to others what was going on with him. I told them if something happened to him, the blood was on their hands.

Effects of What Happened

1. Gaston County DSS kept Albert Bradley away from his family members for greater than 30 days, until April 2016 when he required resuscitation and life support at CMC-Main in Charlotte, NC. Family was contacted by DSS workers Stephanie Stevenson and Amanda Greene to inform that Albert Bradley had a change in his condition. He was made a DNR and removed from the ventilator after only 3 days of support and returned to Asbury Care Center in Charlotte, NC after a very brief hospital visit. Family was never informed of Albert Bradley's whereabouts after family members were banned from Caromont Regional Medical Center. No information was ever provided as to his health status or whereabouts during the time of his absence. Two of Albert Bradley's brothers came looking for him two days prior. They were not allowed to see him, but they were told by Stephanie Stevenson that Albert Bradley was doing fine. He had massive pulmonary embolisms, severe dehydration, and heart failure while at CMC Main in April 2016.

2. Christine Bradley was not allowed to visit her husband. Other family members were given supervised and very limited visitation without any justification, even if Albert Bradley was admitted to the hospital. This caused a lot of stress on the family. We missed his birthday because it fell on a day that was a "day of rest." This is time he should have spent at home with his family. A family member who traveled from out of town were not allowed to visit on so-called visit days according to the DSS visit calendar. Security would even profile family members at the gate prior to entrance to Asbury Care Center. Family members were very distraught over this as we knew what depriving him of seeing his family on a daily basis would do to him. When we did visit, as soon as our visit started, we were often asked to leave the room. This year was so stressful. His grandchildren would go to see him, and they would leave in tears. They wanted to know how could people be so cruel, and how could people hurt their grandfather like that.

3. Albert Bradley suffered numerous serious illnesses and conditions in a short span of time under the direction of the Gaston County Department of Social Services resulting in numerous ER visits and hospital admissions. Mr. Bradley suffered a traumatic head injury in Asbury Care Center. To this date, the Department has not informed the family as to the events surrounding this serious injury. He suffered a large laceration over his right eye, fractured his right shoulder, and had a large amount of swelling in his right head, face, neck, and shoulder area. Albert Bradley was returned back to Asbury Care Center in less than a 24 period. This continuous cycle of ER visits and hospital admissions continued until his death within a span of less than a year.

4. Numerous letters were written to address the health concerns of Albert Bradley, observations made pertaining to care received and/or care needed, and Gaston County DSS failed address those issues.

5. Albert Bradley was given medications with harmful side effects, namely atropine,

a medication that was said to have been discontinued by Gaston County DSS Social Worker Stephanie Stevenson. This medication was administered from the time he was under the custody of the Gaston County DSS. Albert Bradley was only receiving 4 units of lantus in the home. His blood sugar levels were out of control. From being overfed, he gained a significant amount of weight. He was not mobilized. In the home, Albert Bradley got into his wheelchair daily and received therapy from his family members and friends on a daily basis.

6. Gaston County DSS allowed Zurich Insurance Company and Victoria Lichtenberger to direct the care of Albert Bradley.

7. Albert Bradley was taken away from his family, and his life was cut short.

8. Albert Bradley died without his family present. An on-call social worker called to informed family on 2/5/2017 at approximately 7:30 pm that Albert was deceased. He was denied precious time with his family, and stimulation that he required for survival.

9. Again, the family was never informed as to why Albert Bradley was taken and how Gaston County DSS became involved.

10. We were told at times we could not touch our loved one, Albert Bradley. Security was called on Lavare Seltun for holding her father's hand, and Lavare Seltun and Christine Bradley were escorted out of Asbury Care Center. This was devastating and humiliating.

11. Albert Bradley was admitted under aliases each admission. When and if family was notified, if family went to the hospital to see Albert Bradley, they were often told they could not see him. When they were informed of his location, they would often change his room numbers and visits would be supervised. When questions were asked regarding visitation, it was always, "Stephanie Stevenson said....."

Requests

1. Civil

2. Wrongful death

3. Pain and suffering

4. Punitive

Albert Bradley

***Albert Bradley was a traumatic/anoxic brain injured individual who sustained traumatic injuries while working for Southern Industrial Constructors in Columbia, SC on May 16, 2011. He received total care in the home by primarily by his wife Christine Bradley and daughter Lavare Seltun, and also with the aid of other family members and friends.

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

APPEAL FROM THE SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

Appellant Court Judges

W.C.C. FILE NO: 1105628

Southern Industrial Constructors, Inc.
Zurich American Insurance Company c/o
Zurich North America
Victoria Lichtenberger
Tereasa Osborne,

Respondent,

v.

Albert Bradley/
Christine W. Bradley, *pro se*

Appellant

PROOF OF SERVICE

I certify that I have served the Notice of Appeal on Southern Industrial Constructors, Inc. and Zurich American Insurance Company by depositing a copy of it in the United States Mail, postage prepaid, on August 20, 2018, addressed to their attorney of record, Jason Lockhart, P.O. Box 12519, Columbia, SC 29201. I certify that I have served the Notice of Appeal on Victoria Lichtenberger by depositing a copy of it in the United States Mail, postage prepaid on August 20, 2018, addressed to the respondent, at 1018 E. Blvd., Suite 3, Charlotte, NC 28203. I certify that I have served the Notice of Appeal on Tereasa Osborne by depositing a copy of it in the United States Mail, postage prepaid, on August 20, 2018, addressed to the respondent, at 330 Dr. Martin Luther King Jr. Way, Gastonia, NC 28052.

August 20, 2018

Christine Bradley

(5)

PROOF OF SERVICE

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

In The Supreme Court

RECEIVED
JUL 06 2020
SC Court of Appeals

Appellate Court Judges

Case No: 2018-001535

Christine Bradley (Albert Bradley), *Pro se* — Appellant

v.

SC Workers' Compensation Commission — Respondents
Southern Industrial Constructors, Inc.,
Zurich American Insurance Company c/o
Zurich North America,
Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS

I certify that I have issued a 15 copies of the Final Brief to the SC Court of Appeals, via hand-delivery to 1220 Senate St, Columbia, SC, 29201.

July 2, 2020

Christine Bradley (Albert Bradley), *Pro se*
475 Lower Lee School Rd.
Mayesville, SC 29104

Christine Bradley
July 06, 2020

DESIGNATION OF MATTER TO BE INCLUDED IN THE RECORD ON APPEAL

The State of South Carolina
In The Court of Appeals
In the Supreme Court

RECEIVED
JUL 06 2020
SC Court of Appeals

APPEAL FROM SOUTH CAROLINA
Workers' Compensation Commission

Commissioner T. Scott Beck, Chairman

Appellate Court Judges

Case No: 2018-001535

Christine Bradley (Albert Bradley), *Pro se* — Appellant

v.

SC Workers' Compensation Commission — Respondents
Zurich America Insurance Company %
Zurich North America, Southern Industrial
Constructors, Inc. , Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS

DESIGNATION OF MATTER TO BE INCLUDED IN THE RECORD ON APPEAL

Appellant proposes the following items to be included in the Record on Appeal from date of the claimant's injury, May 16, 2011 through Present CB:

Feb. 17, 2020
Christine Bradley

1. Orders pertaining to the case of Albert Bradley from the SC Workers' Compensation Commission from May 16, 2011 through Present (CB)
2. Financial Records from time period May 16, 2011 through February 5, 2017 of Guardians/Guardians Ad Litems for Albert Bradley
3. Autopsy-
4. Medical Records from May 16, 2011 through February 5, 2017. This includes medical records from all healthcare facilities
5. Transcripts of all proceedings from May 16, 2011 through February 5, 2017
6. Medical Bills from May 16, 2011 through February 5, 2017
7. Records and files from Guardian, Victoria Lichtenberger from October 1, 2015 through February 5, 2017
8. All records and files from Guardian Gaston County DSS/Tereasa Osborne from March 17, 2016 through February 5, 2017
9. Pay stubs from Southern Industrial Instructors, Columbia, SC and Lee County, Bishopville, SC
10. Witnesses-Victoria Lichtenberger, Tereasa Osborne, Stephanie Stevenson
11. Witnesses- Derwin Bradley, Lavare Seltun, and Christy James
12. Pictures (CB)

I certify that this designation contains no matter which is irrelevant to this appeal.

February 17, 2020

Christine Bradley, *Pro se*
475 Lower Lee School Rd.
Mayesville, SC 29104

Christine Bradley

PROOF OF SERVICE

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

In The Supreme Court

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v.

SC Workers' Compensation Commission
Southern Industrial Constructors, Inc.,
Zurich American Insurance Company c/o
Zurich North America,
Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS — Respondents

I certify that I have issued a copy of the Amended Designation of Matter to be included in the record of appeal to SC Workers' Compensation Commission on February 17, 2020 by depositing a copy of it in the United States Mail to P.O. Box 1715, Columbia, SC 29202-1715 or via hand-delivery to 1333 Main St., Suite 500, Columbia SC. I certify that I have served the same upon Southern Industrial Constructors and Zurich American Insurance Company on February 17, 2020 by depositing a copy of it in the United States Mail, to the attorney of record, Jason W. Lockhart at P.O. Box 12519, Columbia, SC 29201, and via hand delivery to his office at 1320 Main St., Columbia, SC 29201. I certify that I have served a copy to Helen Hiser, by depositing a copy in the U.S. Mail to, 735 Johnnie Dodds Blvd., Suite 200, Mt. Pleasant, SC 29464. I certify that I have served a copy to the Gaston County DHHS, by depositing a copy of it in the United States Mail, to the attorney of record, Tereasa Osborne, at 330 Dr. Martin Luther King, Jr. Way, Gastonia, NC 28052. I certify that I have served a copy to Victoria Lichtenberger, Guardian, by depositing a copy of it in the United States Mail to 1018 East Blvd., Suite 3, Charlotte, NC 28203.

February 17, 2020

Christine Bradley

Christine Bradley (Albert Bradley), *Pro se*
475 Lower Lee School Rd.
Mayesville, SC 29104

The South Carolina Court of Appeals

Ex Parte: Christine Bradley, Surviving Spouse,
Appellant.

In re: Albert Bradley, Employee,

v.

Southern Industrial Constructors, Inc., Employer, and
Zurich American Insurance Company c/o Zurich North
America, Carrier, Respondents.

Appellate Case No. 2018-001535

ORDER

Respondents' motion to strike Appellant's designation of matter is granted. Within twenty days of this order, Appellant shall serve and file an amended designation of matter, which lists *with specificity* all documents Appellant proposes to include in the record on appeal. *See* Rule 209, SCACR. All documents listed in Appellant's amended designation of matter shall be identified by date, title, or otherwise.

FOR THE COURT

Columbia, South Carolina

cc:
Christine Bradley
Jason Wendell Lockhart, Esquire
Helen F Hiser, Esquire

FILED
February 7, 2020

RECEIVED
AUG 21 2018
SC Court of Appeals

THE STATE OF SOUTH CAROLINA

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Albert Bradley/
Christine W. Bradley, *pro se* — Appellant

NOTICE OF APPEAL

Christine W. Bradley appeals the decision of the Honorable Melody L. James, Avery B. Wilkerson, Jr., and Gene McCaskill dated July 26, 2018. Appellant received a copy of this decision on July 26, 2018.

August 20, 2018

Counsel of Record:

Jason Lockhart
P.O. Box 12519
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Christine W. Bradley

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AUG 21 2018
SC Court of Appeals

APPELLATE PANEL DECISION AND ORDER

OF THE

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE NO: 1105628

Albert Bradley — EMPLOYEE, CLAIMANT/APPELLANT

VS.

Southern Industrial Constructors, Inc. — EMPLOYER,

AND

Zurich American Insurance Company c/o Zurich North America — CARRIER, DEFENDANTS/RESPONDENTS

Appellate Panel Review held in Columbia, South Carolina, on May 21, 2018 per notices timely and properly served upon all parties of interest.

Appellate Panel Decision and Order Filed:

July 26, 2018

APPEARANCES: Dependent/Appellant Christine Bradley, appeared *pro se.*

Defendants/Respondents represented by Jason W. Lockhart.

STATEMENT OF THE CASE

A hearing was scheduled on September 13, 2017 before the Single Commissioner pursuant to Defendants' Form 21. Claimant sustained compensable physical brain damage while in the course and scope of his employment with Defendants on May 16, 2011 and was entitled to lifetime causally-related medical treatment and lifetime compensation. Subsequently, on February 5, 2017, Claimant died as a result of complications of diffuse acute bronchopneumonia.

Defendants maintained that they conducted a good faith dependency investigation and that the proper parties were before the Commission. Defendants requested that the Single Commissioner find that Defendants conducted a good faith investigation and also sought a determination of the dependents entitled to receive benefits pursuant to S.C. Code Ann. §42-9-290. Defendants requested that the Single Commissioner verify the accounting from the Guardian ad Litem of funds, which were in the possession of the Guardian ad Litem, that have been utilized by the Guardian ad Litem in the best interests of the Claimant and in accordance with the prior Decision and Order of the Single Commissioner. Defendants requested that the Single Commissioner determine whether the remaining balance of the funds, which were in the possession of the Guardian ad Litem and have been utilized by the Guardian ad Litem in the best interests of the Claimant, should be returned to the Claimant's estate. Defendants requested that the Single Commissioner discharge the Guardian ad Litem of any and all obligations to the Claimant previously established by the prior Decision and Order of the Single Commissioner.

On January 22, 2018, the Single Commissioner issued and a Decision and Order making the following Findings of Fact and Conclusions of Law:

FINDINGS OF FACT

1. The parties hereto are subject to and bound by the South Carolina Workers' Compensation Act.

2. Claimant's average weekly wage is One Thousand Two Hundred Eighty Seven Dollars ($1,287.34) and 34/100 with a corresponding compensation rate of Seven Hundred Four Dollars ($704.92) and 92/100.

3. Based upon the preponderance of the evidence, Claimant was involved in a work-related accident and sustained permanent physical brain damage arising out of and in the course of the Claimant's employment on May 16, 2011. (Commission File).

4. Based upon the preponderance of the evidence, including the death certificate and the autopsy report, Claimant died as a result of complications of diffuse acute bronchopneumonia. (APA #1; #2).

5. Based upon the preponderance of the evidence, at the time of Claimant's death, Claimant continued to receive causally-related medical care. (Commission File).

6. Based upon the preponderance of the evidence, Claimant was married to Christine Bradley and had three non-dependent children at the time of his death. (APA #1; #3).

7. Based upon the preponderance of the evidence, upon Claimant's death, Defendants' requested a dependency investigation regarding the allocation of remaining workers' compensation benefits that would have been payable to Claimant. (APA #3).

8. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife and three children were uncooperative with regards to completion of the Dependency Investigation. (APA #3).

9. Based upon the preponderance of the evidence, Christine Bradley, Claimant's wife, was wholly dependent upon Claimant at the time of Claimant's death.

10. Based upon the preponderance of the evidence, no others were financially dependent upon Claimant.

11. Based upon the preponderance of the evidence, the Claimant's three non-dependent children, all above the age of eighteen (18) years of age, waive any entitlement to permanent disability benefits in light of Christine Bradley's, the claimant's wife, entitlement to benefits.

12. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Defendants completed a "good faith" Dependency Investigation in accordance with the Act, to determine whether Claimant had dependents to receive death benefits. (APA #3).

13. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife, Christine Bradley, is entitled to receive the balance of unpaid compensation and benefits as the surviving spouse.

14. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, has maintained an account on behalf of the Claimant at the direction of the undersigned Commissioner, and that the current balance of the above-referenced account is $10,133.07.

15. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the personal representative of the Claimant's estate, which has been opened in the Lee County Clerk of Court (Case Number 2017-ES-31055).

16. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the Lee County Clerk of Court (Case Number 2017-ES-31055) if no personal representative of the Claimant's estate has been appointed.

17. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall provide certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the undersigned Commissioner and shall also provide an accounting to the undersigned Commissioner.

18. Based upon the preponderance of the evidence, including testimony, once Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, provides certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the personal representative of the Claimant's estate or to the Lee County Clerk of Court (Case Number 2017-ES-31055) and provides an accounting to the undersigned Commissioner, then Victoria Lichtenberger is discharged from any and all responsibilities in her capacity as Guardian ad litem for Albert Bradley.

19. Based upon the preponderance of the evidence, including testimony, the Defendants shall make payment of funeral expenses in the amount of $2,500.00 to Christine Bradley upon provision by Christine Bradley of documentation of funeral expenses.

20. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation. The Defendants shall make payment of the balance of unpaid compensation and benefits to Christine Bradley, as the surviving spouse, in the amount of $136,977.59 through sending payment to Christine Bradley at 475 Lower Lee School Road, Mayesville, South Carolina 29104.

CONCLUSIONS OF LAW

1. Pursuant to S.C. Code Ann. Section 42-9-280, when an employee dies of causes unrelated to the injury for which he is entitled to compensation, payment of the unpaid balance shall be paid to his next of kin dependent upon him for support.

2. Pursuant to S.C. Code Ann. Section 42-9-290 is applicable and sets forth the amount of compensation due for the death of an employee due to an accident.

3. South Carolina Workers' Compensation Commission Regulation 67-902 is applicable and sets forth the requirements for conducting a "good faith" investigation concerning dependency issues.

4. Pursuant to South Carolina Workers' Compensation Commission Regulation 67-902 and other applicable law, Defendants conducted a "good faith" Dependency Investigation. Defendants identified all possible dependents, and they were all properly notified of the hearing in this matter.

5. Pursuant to S.C. Code Ann. Section 42-9-290, Claimant's dependent is entitled to receive the balance of unpaid compensation and benefits, at the compensation rate of $704.92.

6. Pursuant to S.C. Code Ann. Section 42-9-110, Christine Bradley is Claimant's surviving spouse and is therefore presumed to be wholly dependent upon Claimant at the time of Claimant's death. No others were financially dependent upon Claimant.

7. Pursuant to S.C. Code Ann. Section 42-9-290, all benefits are to be paid to Christine Bradley, Claimant's wife.

8. Pursuant to S.C. Code Ann. Section 42-9-301, Mrs. Bradley is entitled to a lump-sum payment of benefits.

9. Pursuant to S.C. Code Ann. Section 42-9-110 and Section 42-9-120, and based upon the preponderance of the evidence, Defendants completed a "good faith" Dependency Investigation in accordance with the Act to determine whether Claimant had dependents to receive death benefits. (APA #3).

10. Pursuant to S.C. Code Ann. Section 42-9-110 and based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife, Christine Bradley, is entitled to receive the balance of unpaid compensation and benefits as the surviving spouse conclusively presumed to be wholly dependent for support.

11. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, has maintained an account on behalf of the Claimant at the direction of the undersigned Commissioner, and that the current balance of the above-referenced account is $10,133.07.

12. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the personal representative of the Claimant's estate, which has been opened in the Lee County Clerk of Court (Case Number 2017-ES-31055).

13. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the Lee County Clerk of Court if no personal representative of the Claimant's estate has been appointed.

14. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall provide certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the undersigned Commissioner and shall also provide an accounting to the undersigned Commissioner.

15. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, once Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, provides certification of her payment of

$10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the undersigned Commissioner and provides an accounting to the undersigned Commissioner, then Victoria Lichtenberger is discharged from any and all responsibilities in her capacity as Guardian ad litem for Albert Bradley.

16. Pursuant to S.C. Code Ann. Section 42-9-290 and based upon the preponderance of the evidence, including testimony, the Defendants shall make payment of funeral expenses in the amount of $2,500.00 to Christine Bradley upon provision by Christine Bradley of documentation of funeral expenses.

17. Pursuant to S.C. Code Ann. Section 42-9-110, Section 42-9-290 and Section 42-9-301, and based upon the preponderance of the evidence, including testimony, Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation.

18. Pursuant to S.C. Code Ann. Section 42-9-110, Section 42-9-290 and Section 42-9-301, and based upon the preponderance of the evidence, including testimony, Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation. The Defendants shall make payment of the balance of unpaid compensation and benefits to Christine Bradley, as the surviving spouse, in the amount of $136,977.59 through sending payment to Christine Bradley at 475 Lower Lee School Road, Mayesville, South Carolina 29104

Following the Decision and Order, Claimant filed a Form 30 and asserted several exceptions to the Decision and Order. According to Claimant's Appellant's Brief, these exceptions are quoted as follows:

I. "Section 42-9-10(A)(B)(C)(D). Amount of compensation for total disability and what constitutes total disability. During proceedings and order, temporary compensation was applied to a permanent disability claim. Although Commissioner Beck stated that claimant Albert Bradley was declared permanently disabled, law was applied for temporary disability with attempt to settle the claim on that basis."

II. "Section 42-15-60 (C)- Albert Bradley, now deceased claimant, who received total care and medical services in his home by family members 24/7 up until the year he was taken, were never compensated for the services they provided to the claimant even after care plan which was requested was presented to the court to show the care the claimant was receiving in the home. There was a court order which ordered

monies which Albert Bradley paid out of his own monies to be reimbursed by the carrier for expenses such as medications and supplies dating back to 2013 which still have not been paid as of this date. Albert Bradley paid for his own transportation to court hearings, doctors' visits, medications, and nursing services, all which no reimbursement was received. Albert Bradley even had to purchase his own wheelchair accessible van for transportation out of his own money and was never reimbursed."

III. "67-902-Dependency investigation. The argument here is that a thorough investigation of benefits on behalf of the claimant for all dependents through his employers should be brought before the court. Christine Bradley stated before the court in a prior hearing and made pleas to the Commission that she was due spousal benefits as she was the beneficiary listed for Albert Bradley through his employer Southern Industrial. Her request for further information and documentation pertaining to the above was not [acknowledged]."

IV. "Section 42-17-60. Christine Bradley, spouse of claimant, has been denied benefits. 'In case of appeal from the decision of the commission on questions of law, the appeal does not operate as a supersedeas, and, after that time the employer is required to make weekly payments of compensation.'"

V. "Sections 42-9-220, 42-9-230. Christine Bradley was separated from her husband on March 17, 2016, and all benefits that Albert Bradley had been receiving had stopped in December 2016."

VI. "Section 42-9-10(A)(B)(C)(D). Albert Bradley was declared permanently and totally disabled."

VII. "Section 42-15-80. It was ordered that Albert Bradley died of acute bronchopneumonia. No medical records including autopsy and toxicology results were submitted to support this diagnosis. No expert witness testified at the hearing to provide expert testimony to support this diagnosis."

VIII. "Albert Bradley died in the custody of Gaston County DSS/Tereasa Osborne, Stephanie Stevenson and Victoria Lichtenberger, appointed Guardian/Guardian ad Litem through the SC Workers' Compensation Commission. Victoria Lichtenberger is owner of ElderSource, located at 1018 East Blvd., Suite 3, Charlotte, NC, a geriatric care management company that is responsible for the placement of geriatric patients into adult homes and facilities."

IX. "Albert Bradley suffered immensely under the hands of Guardian Ad Litem Victoria Lichtenberger and Gaston County DSS/Teresea Osborne, Stephanie Stevenson. From the time of their acquisition of the claimant, there was a rapid decline in his health evidenced by multiple hospital visits and admissions that ultimately led to his death."

X. "Section 42-15-60- The claimant has medical bills that have not been paid by the carrier. These bills have not been brought before the court to show proof of payment."

XI. "67-902, 67-903, 67-904. Tuten testified that he conducted the dependency investigation in good faith when in fact he failed to make contact with all of the claimant's family

members and failed to provide documentation to support his findings."

XII. "APA submission presented by Attorney Jason Lockhart used as evidence was not provided to all parties prior to hearing or after the hearing and was used as facts for the case."

XIII. "67-216, 42-15-55. Victoria Lichtenberger, Guardian ad Litem, said representative for the deceased claimant, was speaking on behalf of the insurance company instead of the claimant. Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem and Gaston County DSS/Tereasa Osborne/Stephanie Stevenson when he died. Victoria Lichtenberger, Guardian Ad Litem was also documented as dependent of the claimant. Proof of guardianship was never provided during court when requested. Family members, or the claimant himself, Albert Bradley, was not present at any hearing for the appointment of Guardian Ad Litem."

XIV. "Family members had very limited contact with Albert Bradley during the last year of his life, and visits with him were supervised when they were allowed."

XV. "Section 42-9-20. Temporary compensation, partial disability law cannot be applied who has suffered physical brain damage. Albert Bradley sustained physical brain damage on May 16, 2011, and was permanently and totally disabled on the date of his accident."

XVI. "42-9-20. Based on the findings and the laws, as highlighted above a temporary compensation and partial disability cannot be applied when an individual has suffered a permanent disability."

XVII. "Family members were denied their rights to civil proceedings for guardianship for Albert Bradley. Albert Bradley has a living spouse Christine Bradley."

XVIII. "67-902. There was failure to conduct thorough dependency investigation though the claimant's employer Southern Industrial."

XIX. "Albert Bradley was in the custody of Victoria Lichentberger, Guardian Ad Litem, and owner of EldersSource and Gaston County DSS/Teresea Osbosrne, Agency Attorney/Stephanie Stevenson, guardianship supervisor. No proof of guardianship was ever provided."

XX. "67-1301. Expert physician testimony was not heard on the given diagnosis, acute bronchopneumonia, as to the cause of Albert Bradley's death."

XXI. "Other documentation which was ordered by the Commissioner to include the complete financial record of the claimant held by the Guardian Ad Litem Victoria Lichtenberger as well as her final accounting, full medical records from the time that Albert Bradley was taken into custody from 3/17/16 until the date of his death including autopsy and toxicology were not submitted as ordered for review and evidence."

XXII. "Apply the law accordingly, consider the facts in the case, and apply due

process to be fair and equal representation."

EVIDENCE OF THE CASE

Claimant was pronounced dead on February 5, 2017 at Carolinas Medical Center in Charlotte, North Carolina. (APA#1 p.1). Upon receiving authorization from Claimant's next of kin, Derwin Bradley, Dr. Carol Weida conducted Claimant's autopsy on February 6, 2017 and concluded that Claimant's cause of death was a result of complications of diffuse acute bronchopneumonia. (APA #2 p. 3).

Upon Claimant's death, Defendants' requested a dependency investigation regarding the allocation of remaining workers' compensation benefits that would have been payable to Claimant. (APA #3). The investigation revealed that Claimant was born in Lee County, South Carolina on October 27, 1949. (APA #3 p.14). Claimant married Christine Bradley and, per the dependency investigation, had three children, Derwin Bradley, Lavare Seltun, and Christy James, all of whom are over the age of eighteen. (APA #3 pp. 7, 14). From February 24, 2017 to April 17, 2017, numerous attempts were made to contact Mrs. Bradley in order to complete the dependency investigation. (APA #3). On February 24, 2017, Mrs. Bradley was contacted, via telephone, to initiate the investigation but she indicated that she did not wish to cooperate with Defendants regarding completion of the investigation and requested further contact via letter. (APA #3 pp. 7-8). A letter, dated March 8, 2017, was mailed to Mrs. Bradley's address explaining the purposes of the investigation and requesting contact. (APA #3 p. 8). No response was received until Mrs. Bradley's April 10, 2017 letter, which requested a full description of all aspects and the nature of the dependency investigation. (APA #3 p. 10). Per her request, a letter, dated April 17, 2017, was mailed to Mrs. Bradley but no response was received.

Further, attempts were made to contact Claimant's three children in order to complete the dependency investigation. (APA #3 p. 8). In April 2017, voicemail messages were left for Derwin Bradley and Lavare Seltun and letters were sent to all three children requesting further contact. (APA #8). Numerous attempts were made to contact Raymond Tillery, Derwin Bradley's attorney, in order to be put in contact with Mr. Bradley. (APA #3 pp. 10-11). Attorney Tillery indicated that he attempted to contact Mr. Bradley, but Mr. Bradley failed to return his calls. A text message was sent to Mr. Bradley, in which he redirected contact to Attorney Tillery. (APA #3 p. 11). No further communication or response has been received from Mrs. Bradley of any of Claimant's children with regards to the dependency investigation. (APA #3 p. 5).

Courthouse searches for proof of Claimant's marriage license were conducted in Mecklenberg County, North Carolina, Lee, Sumter, and Darlington Counties, South Carolina but proof of a marriage license was not discovered. (APA #3 pp. 8-9). Although proof of a marriage license was not discovered, Mrs. Bradley is listed as Claimant's wife on the March 27, 2017 death certificate and she is listed as Claimant's wife and survivor in Claimant's obituary dated February 11, 2017. (APA #1; APA #3 pp. 14-15).

Pursuant to the request of the Single Commissioner, Chris Tuten provided testimony regarding his attempts to conduct a good faith investigation to determine beneficiaries to whom benefits were payable in order that the Defendants may fulfill their obligations pursuant to the South Carolina Workers' Compensation Act. Mr. Tuten stated that he completed a preliminary dependency investigation, but was unable to complete the dependency investigation due to a lack of cooperation provided by the Claimant's wife and children. Pursuant to the request of the Single Commissioner, Victoria Lichtenberger provided testimony in her capacity as Guardian ad

Litem. Ms. Lichtenberger stated that she has maintained an account on behalf of the Claimant, and that the current balance of the above-referenced account is $10,133.07.

Christine Bradley testified that she was the lawful wife of the Claimant on the date of the Claimant's accident as well the lawful wife of the Claimant on the date of the Claimant's death. Mrs. Bradley stated that she has opened an estate on behalf of the Claimant, and that the estate was opened with the Lee County Probate Court. The file number of the estate opened with the Lee County Probate Court is 2017-ES-31055. Mrs. Bradley indicated that she had not yet been appointed as personal representative of the Claimant's estate nor had a personal representative of the Claimant's estate been appointed.

FULL COMMISSION FINDINGS OF FACTS AND CONCLUSIONS OF LAW

FINDINGS OF FACT

1. The South Carolina Workers' Compensation Commission has jurisdiction over the subject matter and parties of this claim.
2. Claimant's average weekly wage is One Thousand Two Hundred Eighty Seven Dollars ($1,287.34) and 34/100 with a corresponding compensation rate of Seven Hundred Four Dollars ($704.92) and 92/100.
3. Based upon the preponderance of the evidence, we find that Claimant was involved in a work-related accident and sustained permanent physical brain damage arising out of and in the course of the Claimant's employment on May 16, 2011. (Commission File).
4. Based upon the preponderance of the evidence, including the death certificate and the autopsy report, we find that Claimant died as a result of complications of diffuse acute bronchopneumonia. (APA #1; #2).

5. Based upon the preponderance of the evidence, at the time of Claimant's death, we find that Claimant continued to receive causally-related medical care. (Commission File).
6. Based upon the preponderance of the evidence, we find that Claimant was married to Christine Bradley and had three non-dependent children at the time of his death. (APA #1; #3).
7. Based upon the preponderance of the evidence, upon Claimant's death, we find that Defendants' requested a dependency investigation regarding the allocation of remaining workers' compensation benefits that would have been payable to Claimant. (APA #3).
8. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, we find that Claimant's wife and three children were uncooperative with regards to completion of the Dependency Investigation. (APA #3).
9. Based upon the preponderance of the evidence, we find that Christine Bradley, Claimant's wife, was wholly dependent upon Claimant at the time of Claimant's death.
10. Based upon the preponderance of the evidence, we find that no others were financially dependent upon Claimant.
11. Based upon the preponderance of the evidence, we find that the Claimant's three non-dependent children, all above the age of eighteen (18) years of age, waive any entitlement to permanent disability benefits in light of Christine Bradley's, the claimant's wife, entitlement to benefits.
12. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, we find that Defendants completed a "good faith" Dependency Investigation in accordance with the Act, to determine whether Claimant had dependents to receive death benefits. (APA #3).

13. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, we find that Claimant's wife, Christine Bradley, is entitled to receive the balance of unpaid compensation and benefits as the surviving spouse.

14. Based upon the preponderance of the evidence, including testimony, we find that Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, has maintained an account on behalf of the Claimant at the direction of the Single Commissioner, and that the current balance of the above-referenced account is $10,133.07.

15. Based upon the preponderance of the evidence, including testimony, we find that Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the Single Commissioner, to the personal representative of the Claimant's estate, which has been opened in the Lee County Clerk of Court (Case Number 2017-ES-31055).

16. Based upon the preponderance of the evidence, including testimony, we find that Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the Single Commissioner, to the Lee County Clerk of Court (Case Number 2017-ES-31055) if no personal representative of the Claimant's estate has been appointed.

17. Based upon the preponderance of the evidence, including testimony, we find that Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall provide certification of her payment of $10,133.07 from the account, which she maintained on

behalf of the Claimant at the direction of the Single Commissioner, to the Single Commissioner and shall also provide an accounting to the Single Commissioner.

18. Based upon the preponderance of the evidence, including testimony, we find that once Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, provides certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the Single Commissioner, to the personal representative of the Claimant's estate or to the Lee County Clerk of Court (Case Number 2017-ES-31055) and provides an accounting to the Single Commissioner, then Victoria Lichtenberger is discharged from any and all responsibilities in her capacity as Guardian ad litem for Albert Bradley.

19. Based upon the preponderance of the evidence, including testimony, we find that the Defendants shall make payment of funeral expenses in the amount of $2,500.00 to Christine Bradley upon provision by Christine Bradley of documentation of funeral expenses.

20. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, we find that Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation. The Defendants shall make payment of the balance of unpaid compensation and benefits to Christine Bradley, as the surviving spouse, in the amount of $136,977.59 through sending payment to Christine Bradley at 475 Lower Lee School Road, Mayesville, South Carolina 29104.

CONCLUSIONS OF LAW

1. Pursuant to S.C. Code Ann. Section 42-9-280, when an employee dies of causes unrelated to the injury for which he is entitled to compensation, payment of the unpaid balance shall be paid to his next of kin dependent upon him for support.
2. Pursuant to S.C. Code Ann. Section 42-9-290 is applicable and sets forth the amount of compensation due for the death of an employee due to an accident.
3. South Carolina Workers' Compensation Commission Regulation 67-902 is applicable and sets forth the requirements for conducting a "good faith" investigation concerning dependency issues.
4. Pursuant to South Carolina Workers' Compensation Commission Regulation 67-902 and other applicable law, Defendants conducted a "good faith" Dependency Investigation. Defendants identified all possible dependents, and they were all properly notified of the hearing in this matter.
5. Pursuant to S.C. Code Ann. Section 42-9-290, Claimant's dependent is entitled to receive the balance of unpaid compensation and benefits, at the compensation rate of $704.92.
6. Pursuant to S.C. Code Ann. Section 42-9-110, Christine Bradley is Claimant's surviving spouse and is therefore presumed to be wholly dependent upon Claimant at the time of Claimant's death. No others were financially dependent upon Claimant.
7. Pursuant to S.C. Code Ann. Section 42-9-290, all benefits are to be paid to Christine Bradley, Claimant's wife.
8. Pursuant to S.C. Code Ann. Section 42-9-301, Mrs. Bradley is entitled to a lump-sum payment of benefits.
9. Pursuant to S.C. Code Ann. Section 42-9-110 and Section 42-9-120, and based upon the preponderance of the evidence, Defendants completed a "good faith" Dependency

Investigation in accordance with the Act to determine whether Claimant had dependents to receive death benefits. (APA #3).

10. Pursuant to S.C. Code Ann. Section 42-9-110 and based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife, Christine Bradley, is entitled to receive the balance of unpaid compensation and benefits as the surviving spouse conclusively presumed to be wholly dependent for support.

11. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, has maintained an account on behalf of the Claimant at the direction of the Single Commissioner, and that the current balance of the above-referenced account is $10,133.07.

12. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the Single Commissioner, to the personal representative of the Claimant's estate, which has been opened in the Lee County Clerk of Court (Case Number 2017-ES-31055).

13. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the Single Commissioner, to the Lee County Clerk of Court if no personal representative of the Claimant's estate has been appointed.

18. Pursuant to S.C. Code Ann. Section 42-9-110, Section 42-9-290 and Section 42-9-301, and based upon the preponderance of the evidence, including testimony, Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation. The Defendants shall make payment of the balance of unpaid compensation and benefits to Christine Bradley, as the surviving spouse, in the amount of $136,977.59 through sending payment to Christine Bradley at 475 Lower Lee School Road, Mayesville, South Carolina 29104.

ORDER

IT IS HEREBY ORDERED, ADJUDGED AND DECREED that the greater weight of the evidence supports a finding that the Decision and Order of the Single Commissioner is **AFFIRMED.**

IT IS FURTHER ORDERED that the greater weight of the evidence does support a finding that the Defendants completed a "good faith" Dependency Investigation in accordance with the Act, to determine whether Claimant had dependents to receive death benefits.

IT IS FURTHER ORDERED that the greater weight of the evidence does support a finding that Claimant's surviving spouse, Christine Bradley, is determined to have been wholly dependent upon Claimant at the time of Claimant's death.

IT IS FURTHER ORDERED that the greater weight of the evidence does support a finding that an award of death benefits, pursuant to Section 42-9-110, Section 42-9-290 and Section 42-9-301, shall be paid to Christine Bradley at the compensation rate of $704.92.

IT IS FURTHER ORDERED that the greater weight of the evidence does support a finding that Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation.

IT IS SO ORDERED.

Commissioner Melody L. James
For the Appellate Panel

WE CONCUR:

Commissioner Avery B. Wilkerson, Jr.

Commissioner Gene McCaskill

CERTIFICATE OF SERVICE

This is to certify that the undersigned has on this date served a copy of this order in the above entitled action upon all parties to this case by sending an electronic copy hereof by electronic mail addressed to the attorneys for said parties; or if there is an unrepresented party(ies), by depositing a copy hereof, postage paid in the United States mail, first class, addressed to the unrepresented party(ies) and to the attorney(s) for the represented party(ies).

By Eugenia on July 26, 2018

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

APPEAL FROM THE SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

Appellant Court Judges

W.C.C. FILE NO: 1105628

RECEIVED
AUG 23 2018
SC Court of Appeals

South Carolina Workers' Compensation Commission, — Respondent

v.

Albert Bradley/
Christine W. Bradley, *pro se* — Appellant

PROOF OF SERVICE

I certify that I have served the Notice of Appeal on the South Carolina Workers' Compensation Commission, hand-delivered, on August 21, 2018, to 1333 Main St., Suite 500, Columbia, SC 29201

August 21, 2018

Christine W. Bradley

RECEIVED
AUG 21 2018
SC Court of Appeals

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

APPEAL FROM THE SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

Appellant Court Judges

W.C.C. FILE NO: 1105628

Southern Industrial Constructors, Inc.
Zurich American Insurance Company c/o
Zurich North America
Victoria Lichtenberger
Tereasa Osborne,

Respondent,

v.

Albert Bradley/
Christine W. Bradley, *pro se*

Appellant

PROOF OF SERVICE

I certify that I have served the Notice of Appeal on Southern Industrial Constructors, Inc. and Zurich American Insurance Company by depositing a copy of it in the United States Mail, postage prepaid, on August 20, 2018, addressed to their attorney of record, Jason Lockhart, P.O. Box 12519, Columbia, SC 29201. I certify that I have served the Notice of Appeal on Victoria Lichtenberger by depositing a copy of it in the United States Mail, postage prepaid on August 20, 2018, addressed to the respondent, at 1018 E. Blvd., Suite 3, Charlotte, NC 28203. I certify that I have served the Notice of Appeal on Tereasa Osborne by depositing a copy of it in the United States Mail, postage prepaid, on August 20, 2018, addressed to the respondent, at 330 Dr. Martin Luther King Jr. Way, Gastonia, NC 28052.

August 20, 2018

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE NO: 1105628

ALBERT BRADLEY,

Employee,

Claimant,

vs.

SOUTHERN INDUSTRIAL CONSTRUCTORS, INC.,

Employer,

AND

ZURICH AMERICAN INSURANCE COMPANY c/o ZURICH NORTH AMERICA,

Carrier,

Defendants.

DECISION AND ORDER

DATE OF HEARING: Hearing held in Columbia, South Carolina on December 6, 2017.

APPEARANCES: Victoria Lichtenberger, Guardian *ad Litem* on behalf of Claimant.

Defendants represented by Jason W. Lockhart, Esquire of McAngus Goudelock & Courie, L.L.C. of Columbia, South Carolina.

PURPOSE OF THE HEARING: To determine to whom benefits are payable and in what amount.

COMMISSIONER: Commissioner T. Scott Beck

FILED: January 22, 2018

STIPULATIONS

The parties stipulate to the following:

1. Venue is proper in Richland County.
2. Notice of the Hearing was timely and properly served on all parties of interest, including Claimant's wife, Christine Bradley, and Claimant's children, Derwin Bradley, Lavare Seltun and Christy James.
3. The South Carolina Workers' Compensation Commission has jurisdiction over the parties and subject matter of the claim.
4. Claimant's average weekly wage is One Thousand Two Hundred Eighty Seven Dollars ($1,287.34) and 34/100 with a corresponding compensation rate of Seven Hundred Four Dollars ($704.92) and 92/100.
5. Claimant sustained compensable physical brain damage while in the course and scope of his employment with Defendants on May 16, 2011 and was entitled to lifetime causally-related medical treatment and lifetime compensation at the time of his death.

APA SUBMISSIONS

Defendants' APA Submissions

1. North Carolina Department of Health & Human Services, dated 02/25/17, page 1;
2. Carol J. Weida, MD, dated 03/07/17, pages 2-6;

Defendants' Exhibits

3. Dependency Investigation by Tuten Insurance Services, dated 06/08/17, pages 7-41.

STATEMENT OF THE CASE

A hearing was scheduled on September 13, 2017 before the undersigned Commissioner pursuant to Defendants' Form 21. Claimant sustained compensable physical brain damage while

in the course and scope of his employment with Defendants on May 16, 2011 and was entitled to lifetime causally-related medical treatment and lifetime compensation. Subsequently, on February 5, 2017, Claimant died as a result of complications of diffuse acute bronchopneumonia.

Defendants maintain that they have conducted a good faith dependency investigation and that the proper parties are before the Commission. Defendants requesting that the undersigned Commissioner find that Defendants conducted a good faith investigation and also seek a determination of the dependents entitled to receive benefits pursuant to S.C. Code Ann. §42-9-290.

Defendants request that the undersigned Commissioner verify the accounting from the Guardian ad Litum of funds, which are in the possession of the Guardian ad Litum, that have been utilized by the Guardian ad Litum in the best interests of the Claimant and in accordance with the prior Decision and Order of the undersigned Commissioner. Defendants request that the undersigned Commissioner determine whether the remaining balance of the funds, which are in the possession of the Guardian ad Litum and have been utilized by the Guardian ad Litum in the best interests of the Claimant, should be returned to the Claimant's estate. Defendants request that the undersigned Commissioner discharge the Guardian ad Litum of any and all obligations to the Claimant previously established by the prior Decision and Order of the undersigned Commissioner.

EVIDENCE OF THE CASE

Claimant was pronounced dead on February 5, 2017 at Carolinas Medical Center in Charlotte, North Carolina. (APA#1 p.1). Upon receiving authorization from Claimant's next of kin, Derwin Bradley, Dr. Carol Weida conducted Claimant's autopsy on February 6, 2017 and

concluded that Claimant's cause of death was a result of complications of diffuse acute bronchopneumonia. (APA #2 p. 3).

Upon Claimant's death, Defendants' requested a dependency investigation regarding the allocation of remaining workers' compensation benefits that would have been payable to Claimant. (APA #3). The investigation revealed that Claimant was born in Lee County, South Carolina on October 27, 1949. (APA #3 p.14). Claimant married Christine Bradley and, per the dependency investigation, had three children, Derwin Bradley, Lavare Seltun, and Christy James, all of whom are over the age of eighteen. (APA #3 pp. 7, 14). From February 24, 2017 to April 17, 2017, numerous attempts were made to contact Mrs. Bradley in order to complete the dependency investigation. (APA #3). On February 24, 2017, Mrs. Bradley was contacted, via telephone, to initiate the investigation but she indicated that she did not wish to cooperate with Defendants regarding completion of the investigation and requested further contact via letter. (APA #3 pp. 7-8). A letter, dated March 8, 2017, was mailed to Mrs. Bradley's address explaining the purposes of the investigation and requesting contact. (APA #3 p. 8). No response was received until Mrs. Bradley's April 10, 2017 letter, which requested a full description of all aspects and the nature of the dependency investigation. (APA #3 p. 10). Per her request, a letter, dated April 17, 2017, was mailed to Mrs. Bradley but no response was received.

Further, attempts were made to contact Claimant's three children in order to complete the dependency investigation. (APA #3 p. 8). In April 2017, voicemail messages were left for Derwin Bradley and Lavare Seltun and letters were sent to all three children requesting further contact. (APA #8). Numerous attempts were made to contact Raymond Tillery, Derwin Bradley's attorney, in order to be put in contact with Mr. Bradley. (APA #3 pp. 10-11). Attorney Tillery indicated that he attempted to contact Mr. Bradley, but Mr. Bradley failed to

return his calls. A text message was sent to Mr. Bradley, in which he redirected contact to Attorney Tillery. (APA #3 p. 11). No further communication or response has been received from Mrs. Bradley of any of Claimant's children with regards to the dependency investigation. (APA #3 p. 5).

Courthouse searches for proof of Claimant's marriage license were conducted in Mecklenberg County, North Carolina, Lee, Sumter, and Darlington Counties, South Carolina but proof of a marriage license was not discovered. (APA #3 pp. 8-9). Although proof of a marriage license was not discovered, Mrs. Bradley is listed as Claimant's wife on the March 27, 2017 death certificate and she is listed as Claimant's wife and survivor in Claimant's obituary dated February 11, 2017. (APA #1; APA #3 pp. 14-15).

Pursuant to the request of the undersigned Commissioner, Chris Tuten provided testimony regarding his attempts to conduct a good faith investigation to determine beneficiaries to whom benefits were payable in order that the Defendants may fulfill their obligations pursuant to the South Carolina Workers' Compensation Act. Mr. Tuten stated that he completed a preliminary dependency investigation, but was unable to complete the dependency investigation due to a lack of cooperation provided by the Claimant's wife and children. Pursuant to the request of the undersigned Commissioner, Victoria Lichtenberger provided testimony in her capacity as Guardian ad litem. Ms. Lichtenberger stated that she has maintained an account on behalf of the Claimant, and that the current balance of the above-referenced account is $10,133.07.

Christine Bradley testified that she was the lawful wife of the Claimant on the date of the Claimant's accident as well the lawful wife of the Claimant on the date of the Claimant's death. Mrs. Bradley stated that she has opened an estate on behalf of the Claimant, and that the estate

was opened with the Lee County Probate Court. The file number of the estate opened with the Lee County Probate Court is 2017-ES-31055. Mrs. Bradley indicated that she had not yet been appointed as personal representative of the Claimant's estate nor had a personal representative of the Claimant's estate been appointed.

FINDINGS OF FACT

Based upon the testimony and exhibits submitted, the undersigned Commissioner makes the following findings of fact:

1. The parties hereto are subject to and bound by the South Carolina Workers' Compensation Act.
2. Claimant's average weekly wage is One Thousand Two Hundred Eighty Seven Dollars ($1,287.34) and 34/100 with a corresponding compensation rate of Seven Hundred Four Dollars ($704.92) and 92/100.
3. Based upon the preponderance of the evidence, Claimant was involved in a work-related accident and sustained permanent physical brain damage arising out of and in the course of the Claimant's employment on May 16, 2011. (Commission File).
4. Based upon the preponderance of the evidence, including the death certificate and the autopsy report, Claimant died as a result of complications of diffuse acute bronchopneumonia. (APA #1; #2).
5. Based upon the preponderance of the evidence, at the time of Claimant's death, Claimant continued to receive causally-related medical care. (Commission File).
6. Based upon the preponderance of the evidence, Claimant was married to Christine Bradley and had three non-dependent children at the time of his death. (APA #1; #3).

7. Based upon the preponderance of the evidence, upon Claimant's death, Defendants' requested a dependency investigation regarding the allocation of remaining workers' compensation benefits that would have been payable to Claimant. (APA #3).

8. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife and three children were uncooperative with regards to completion of the Dependency Investigation. (APA #3).

9. Based upon the preponderance of the evidence, Christine Bradley, Claimant's wife, was wholly dependent upon Claimant at the time of Claimant's death.

10. Based upon the preponderance of the evidence, no others were financially dependent upon Claimant.

11. Based upon the preponderance of the evidence, the Claimant's three non-dependent children, all above the age of eighteen (18) years of age, waive any entitlement to permanent disability benefits in light of Christine Bradley's, the claimant's wife, entitlement to benefits.

12. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Defendants completed a "good faith" Dependency Investigation in accordance with the Act, to determine whether Claimant had dependents to receive death benefits. (APA #3).

13. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife, Christine Bradley, is entitled

to receive the balance of unpaid compensation and benefits as the surviving spouse.

14. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, has maintained an account on behalf of the Claimant at the direction of the undersigned Commissioner, and that the current balance of the above-referenced account is $10,133.07.

15. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the personal representative of the Claimant's estate, which has been opened in the Lee County Clerk of Court (Case Number 2017-ES-31055).

16. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the Lee County Clerk of Court (Case Number 2017-ES-31055) if no personal representative of the Claimant's estate has been appointed.

17. Based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall provide certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned

Commissioner, to the undersigned Commissioner and shall also provide an accounting to the undersigned Commissioner.

18. Based upon the preponderance of the evidence, including testimony, once Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, provides certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the personal representative of the Claimant's estate or to the Lee County Clerk of Court (Case Number 2017-ES-31055) and provides an accounting to the undersigned Commissioner, then Victoria Lichtenberger is discharged from any and all responsibilities in her capacity as Guardian ad litem for Albert Bradley.

19. Based upon the preponderance of the evidence, including testimony, the Defendants shall make payment of funeral expenses in the amount of $2,500.00 to Christine Bradley upon provision by Christine Bradley of documentation of funeral expenses.

20. Based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation. The Defendants shall make payment of the balance of unpaid compensation and benefits to Christine Bradley, as the surviving spouse, in the amount of

$136,977.59 through sending payment to Christine Bradley at 475 Lower Lee School Road, Mayesville, South Carolina 29104.

CONCLUSIONS OF LAW

Pursuant to the South Carolina Code of Laws §42-1-10, et seq. and the South Carolina Workers' Compensation Act, it is concluded that:

1. Pursuant to S.C. Code Ann. Section 42-9-280, when an employee dies of causes unrelated to the injury for which he is entitled to compensation, payment of the unpaid balance shall be paid to his next of kin dependent upon him for support.
2. Pursuant to S.C. Code Ann. Section 42-9-290 is applicable and sets forth the amount of compensation due for the death of an employee due to an accident.
3. South Carolina Workers' Compensation Commission Regulation 67-902 is applicable and sets forth the requirements for conducting a "good faith" investigation concerning dependency issues.
4. Pursuant to South Carolina Workers' Compensation Commission Regulation 67-902 and other applicable law, Defendants conducted a "good faith" Dependency Investigation. Defendants identified all possible dependents, and they were all properly notified of the hearing in this matter.
5. Pursuant to S.C. Code Ann. Section 42-9-290, Claimant's dependent is entitled to receive the balance of unpaid compensation and benefits, at the compensation rate of $704.92.
6. Pursuant to S.C. Code Ann. Section 42-9-110, Christine Bradley is Claimant's surviving spouse and is therefore presumed to be wholly dependent upon

Claimant at the time of Claimant's death. No others were financially dependent upon Claimant.

7. Pursuant to S.C. Code Ann. Section 42-9-290, all benefits are to be paid to Christine Bradley, Claimant's wife.

8. Pursuant to S.C. Code Ann. Section 42-9-301, Mrs. Bradley is entitled to a lump-sum payment of benefits.

9. Pursuant to S.C. Code Ann. Section 42-9-110 and Section 42-9-120, and based upon the preponderance of the evidence, Defendants completed a "good faith" Dependency Investigation in accordance with the Act to determine whether Claimant had dependents to receive death benefits. (APA #3).

10. Pursuant to S.C. Code Ann. Section 42-9-110 and based upon the preponderance of the evidence, including the dependency investigation report and testimony, Claimant's wife, Christine Bradley, is entitled to receive the balance of unpaid compensation and benefits as the surviving spouse conclusively presumed to be wholly dependent for support.

11. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, has maintained an account on behalf of the Claimant at the direction of the undersigned Commissioner, and that the current balance of the above-referenced account is $10,133.07.

12. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the

account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the personal representative of the Claimant's estate, which has been opened in the Lee County Clerk of Court (Case Number 2017-ES-31055).

13. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall make payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the Lee County Clerk of Court if no personal representative of the Claimant's estate has been appointed.

14. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, shall provide certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the undersigned Commissioner and shall also provide an accounting to the undersigned Commissioner.

15. Pursuant to S.C. Code Ann. Section 42-15-55 and based upon the preponderance of the evidence, including testimony, once Victoria Lichtenberger, in her capacity as Guardian ad litem for Albert Bradley, provides certification of her payment of $10,133.07 from the account, which she maintained on behalf of the Claimant at the direction of the undersigned Commissioner, to the undersigned Commissioner and provides an accounting to the undersigned Commissioner, then Victoria

Lichtenberger is discharged from any and all responsibilities in her capacity as Guardian ad litem for Albert Bradley.

16. Pursuant to S.C. Code Ann. Section 42-9-290 and based upon the preponderance of the evidence, including testimony, the Defendants shall make payment of funeral expenses in the amount of $2,500.00 to Christine Bradley upon provision by Christine Bradley of documentation of funeral expenses.

17. Pursuant to S.C. Code Ann. Section 42-9-110, Section 42-9-290 and Section 42-9-301, and based upon the preponderance of the evidence, including testimony, Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation.

18. Pursuant to S.C. Code Ann. Section 42-9-110, Section 42-9-290 and Section 42-9-301, and based upon the preponderance of the evidence, including testimony, Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation. The Defendants shall make payment of the balance of unpaid compensation and benefits to Christine Bradley, as the surviving spouse, in the amount of $136,977.59 through sending payment to Christine Bradley at 475 Lower Lee School Road, Mayesville, South Carolina 29104.

ORDER

IT IS HEREBY ORDERED that the Defendants completed a "good faith" Dependency Investigation in accordance with the Act, to determine whether Claimant had dependents to receive death benefits.

IT IS HEREBY ORDERED that Claimant's surviving spouse, Christine Bradley, is determined to have been wholly dependent upon Claimant at the time of Claimant's death.

IT IS FURTHER ORDERED that an award of death benefits, pursuant to Section 42-9-110, Section 42-9-290 and Section 42-9-301, shall be paid to Christine Bradley at the compensation rate of $704.92.

IT IS FURTHER ORDERED that Claimant's wife, Christine Bradley, is entitled to and the Defendants shall make payment of the balance of unpaid compensation and benefits as the surviving spouse in the amount of $136,977.59 representing the present-day value of the remaining 202 weeks of compensation.

AND IT IS SO ORDERED.

Order served upon:

Christine Bradley 475 Lower Lee School Road Mayesville, SC 29104	Derwin Bradley 520 Abbeyhill Drive Columbia, SC 29229	Lavare Seltun 4324 Stone Mountain Dr. Gastonia, NC 28054
Christy James 3441 Shadow Burch Road Florence, SC 29505	Jason Lockhart, Esquire McAngus Goudelock & Courie, LLC PO Box 12519 Columbia, SC 29211	Victoria Lichtenberger as Guardian ad Litem 1018 East Boulevard, Ste. 3 Charlotte, NC 28203

T. Scott Beck, Commissioner

CERTIFICATE OF SERVICE

This is to certify the undersigned has this date served this order in the above entitled action upon all parties to this cause by sending an electronic copy hereof by electronic mail addressed to the attorney or attorneys for said parties or by depositing a copy hereof, postage paid, in the United States certified mail addressed to any unrepresented party.
January 22, 2018

By: Shawnee DeBruhl, Administrative Assistant to Commissioner Beck

DESIGNATION OF MATTER TO BE INCLUDED IN THE RECORD ON APPEAL

The State of South Carolina
In The Court of Appeals
In the Supreme Court

APPEAL FROM SOUTH CAROLINA
Workers' Compensation Commission

Commissioner T. Scott Beck, Chairman

RECEIVED
NOV 05 2019
SC Court of Appeals

Appellate Court Judges

Case No: 2018-001535

Christine Bradley (Albert Bradley), *Pro se* — Appellant

v.

SC Workers' Compensation Commission — Respondents
Zurich America Insurance Company %
Zurich North America, Southern Industrial
Constructors, Inc. , Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS

DESIGNATION OF MATTER TO BE INCLUDED IN THE RECORD ON APPEAL

Christine N. Bradley

Appellant proposes the following to be included in the Record on Appeal:

1. Orders pertaining to the case of Albert Bradley from the SC Workers' Compensation Commission.
2. Financial Records of Guardians/Guardians Ad Litem for Albert Bradley
3. Medical Records
4. Transcripts of all proceedings
5. Medical Bills

I certify that this designation contains no matter which is irrelevant to this appeal.

September 12, 2019

Christine Bradley, *Pro se*
475 Lower Lee School Rd.
Mayesville, SC 29104

Christine W. Bradley

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

Appellate Court Judges

Case No: 2018-001535

Christine Bradley (Albert Bradley), *Pro se* Appellant,

v.

SC Workers' Compensation Commission, Respondents

Zurich America Insurance Company %

Zurich North America, Southern Industrial

Constructors, Inc. ,

Victoria Lichtenberger, Guardian Ad Litem

Tereasa Osborne, Gaston County DHHS

MOTION To Request Designation of Matter To Be Included in the Record On Appeal

Christine Bradley, *Pro se* respectfully requests this Honorable Court to grant this Motion to allow the Designation of Matter to be included in the record on appeal outside of the filing deadline as established in Rule 209, SCACR. A copy of this Motion has been served on the Respondents.

Sincerely,

Christine Bradley, *Pro se*

RECEIVED
NOV 05 2019
SC Court of Appeals

PROOF OF SERVICE

THE STATE OF SOUTH CAROLINA

In The Court of Appeals
In The Supreme Court

Appellate Court Judges

Case No: 2018-001535

RECEIVED
NOV 05 2019
SC Court of Appeals

Christine Bradley (Albert Bradley), Pro se — Appellant

v.

SC Workers' Compensation Commission
Southern Industrial Constructors, Inc.,
Zurich American Insurance Company c/o
Zurich North America,
Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS — Respondents

I certify that I have issued a copy of the Motion to Request Designation of Matter to be included in the record of appeal to SC Workers' Compensation Commission on September 12, 2019, by depositing a copy of it in the United States Mail to P.O. Box 1715, Columbia, SC 29202-1715 or via hand-delivery to 1333 Main St., Suite 500, Columbia SC. I certify that I have served the same upon Southern Industrial Constructors and Zurich American Insurance Company on September 12, 2019 by depositing a copy of it in the United States Mail, to the attorney of record, Jason W. Lockhart at P.O. Box 12519, Columbia, SC 29201, and via hand delivery to his office at 1320 Main St., Columbia, SC 29201. I certify that I have served a copy to Helen Hiser, by depositing a copy in the U.S. Mail to, 735 Johnnie Dodds Blvd. Suite 200, Mt. Pleasant, SC 29464. I certify that I have served a copy to the Gaston County DHHS, by depositing a copy of it in the United States Mail, to the attorney of record, Tereasa Osborne, at 330 Dr. Martin Luther King, Jr. Way, Gastonia, NC 28052. I certify that I have served a copy to Victoria Lichtenberger, Guardian, by depositing a copy of it in the United States Mail to 1018 East Blvd., Suite 3, Charlotte, NC 28203.

September 12, 2019

Christine Bradley (Albert Bradley), *Pro se*

475 Lower Lee School Rd.

Mayesville, SC 29104

Christine Bradley

INITIAL BRIEF OF THE APPELLANT

THE STATE OF SOUTH CAROLINA
In the Court of Appeals
In the Supreme Court

RECEIVED
JUL 25 2019
SC Court of Appeals

APPEAL from the SC Workers' Compensation Commission

Appellate Court Judges

Case No. 2018001535

Christine Bradley, *Pro se* for Albert Bradley, Appellant

V.

SC Workers' Compensation Commission,
Southern Industrial Constructors Inc.,
Zurich American Insurance Company %
Zurich North America, Victoria Lichtenberger,
Gaston County DHHS (Tereasa Osborne, Stephanie Stevenson), Respondents

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INITIAL BRIEF OF APPELLANT

Christine Bradley, *Pro se* for Albert Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104
(704) 608-2024

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2. Family members were not present at any hearings or served notice of appointment of Guardian Ad Litem, guardians.

3. The claimant had benefits and beneficiaries through all employers. A full dependency investigation was not performed to determine whom benefits should be payable to.

4. Partial or temporary disability payments cannot be applied to the worker who has a brain injury and thus, is totally and permanently disabled.

5. Zurich American Insurance has a history and a pattern of denying and not fulfilling rightful benefits of claimants; and in this case, denied payment of claims, services, and benefits to Albert Bradley.

6. Albert Bradley, a permanent and totally disabled worker, and family members were denied due process of law.

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TABLE OF AUTHORITIES

CASES

Rhodes, et al. v. AIG Domestic Claims, Zurich, et al.....

Nunn vs. Noodles & Co, Zurich.....

Clemmons v. Lowe's et al.....

Floyd v. Zurich American Insurance, Co.....

STATUTES

SC Code of Laws, Title 42, Chapter 17, § 42-17-60
SC Code of Laws, Title 42, Chapter 9, § 42-9-10, (A)(B)(C)(D)
SC Code of Laws, Title 42, Chapter 9, § 42-9-220
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SC Code of Laws, Title 42, Chapter 15, § 42-15-55
SC Code of Laws, Title 42, Chapter 15, § 42-15-80
SC Code of Laws, Title 42, Chapter 1, §42-1-560
SC Code of Laws, § 67-902
SC Code of Laws, § 67-903
SC Code of Laws, § 67-904
SC Code of Laws, § 67-216
SC Code of Laws, § 67-1301

STATEMENT OF THE ISSUES

1. SC Workers' Compensation Commission acted in bad faith and failed to protect incapacitated and injured worker Albert Bradley with the appointment of a Guardian Ad Litem. This Guardian Ad Litem failed to act on behalf of the injured worker and collaborated with Gaston County DSS when there were willing and able family members to provide total care and had provided total care without any compensation. The negligence of those appointed led to the death of injured worker Albert Bradley.

2. Family members were not present at any hearings or served notice of appointment of Guardian Ad Litem, guardians. This violates civil procedures for guardianship.

3. The claimant had benefits and beneficiaries through all employers. A full dependency investigation was not performed to determine whom benefits should be payable to.

4. Partial or temporary disability payments cannot be applied to the worker who has a brain injury and thus, is totally and permanently disabled.

5. Family members, namely Christine Bradley and Lavare Seltun, provided total care to the claimant. No compensation was provided for the care they provided.

6. Albert Bradley, a permanent and totally disabled worker, and family members were denied due process of law.

STATEMENT OF THE CASE

Albert Bradley suffered catastrophic injuries on May 16, 2011 while working for Southern Industrial Constructors, Inc. of Columbia, SC. Metal fragments from a chain link were impaled into his airway, causing severe facial and tongue lacerations, and leaving him with

anoxic and traumatic brain injuries. These injuries caused Albert Bradley to be totally disabled and completely reliant upon others for all his care needs. Albert Bradley was cared for in his home by his primary caregivers, Christine W. Bradley and Lavare Seltun until he was taken away from family members during a brief hospital visit at Caromont Regional Medical Center in Gastonia, NC on March 17, 2016. Christine Bradley and Lavare Seltun were banned from Caromont Regional Medical Center in Gastonia, NC on March 17, 2016. Albert Bradley was taken into custody by Zurich American Insurance/Zurich North America/Jason Lockhart and Gaston County Department of Health and Human Services in Gastonia, NC on March 17, 2016.

Family members had no contact and no knowledge of Albert Bradley's whereabouts for approximately 30 days after separation. Family members received notification approximately 30 days later that Albert Bradley was in Mecklenburg County, NC at Carolinas Medical Center-Main in Charlotte, NC on life support. Family members had very limited access to Albert Bradley. They were often not allowed to touch him, even if they were permitted to visit for short periods of time. Christine Bradley was prohibited from visiting with her husband, Albert Bradley. She was not allowed to see him or touch him at all.

There is no documentation of a hearing for appointment of Guardian/Guardian Ad Litem, Victoria Lichtenberger. The defendants purport that there was a hearing, yet no family members, not even the claimant, were notified, served, or present at any such hearing. Albert Bradley

suffered immensely under the hands of Guardian/Guardian Ad Litem Victoria Lichtenberger. Presiding Commissioner was notified of the status via letters regarding the status of Albert Bradley's condition and photos were provided as evidence. After several hospital admissions for treatment of severe medical conditions under the direction of South Carolina's Workers' Compensation Commission appointed Guardian/Guardian Ad litem Victoria Lichtenberger and Gaston County DHHS, Albert Bradley subsequently died. Family members were notified after his death on February 5, 2017.

The defendants claim that Albert Bradley died of diffuse acute bronchopneumonia. Requests were made for autopsy report, toxicology report, expert witness testimony, and the medical records to support this claim. The family requested that all sealed medical records on this matter be opened for full review and these requests have yet to be granted.

APA submissions presented for testimony at hearings held by the defense have not been provided to the appellant for review and examination.

The defense argues that Victoria Lichtenberger has maintained an accounting for the claimant when in fact the claimant was also in the custody of the state of NC with the Gaston County Department of Health and Human Services (DHHS). Attorney Travis Page in Gastonia, NC was appointed to manage the accounting for the claimant for Gaston County DHHS.

Requests were made all financial records pertaining to the claimant, and these records have yet to be received.

The defense maintains that there was good faith in conducting a dependency investigation, yet they still fail to show documentation of all family members notified. They also failed to provide documentation from all employers to show benefits due to beneficiaries on behalf of the claimant. Chris Tuten initially contacted Christine Bradley by phone shortly after the death of Albert Bradley and stated that he was investigating Albert Bradley's death.

The defense highlights that no medical bills were brought before the commission for consideration for payment. Albert Bradley was in the custody of Victoria Lichtenberger and Gaston County DHHS. Albert Bradley was admitted to multiple facilities from March 17, 2016 until the time of his death.

The defense highlights that the South Carolina's Workers' Compensation Commission has full jurisdiction over the subject matter and parties pertaining to this case. However, this case was never brought before the commission for review, even with all the factors that occurred from March 17, 2016 until the time of his death.

STANDARD OF REVIEW

After extensive research and review of cases to highlight as they relate to this case, it can be noted that while each case presents its own uniqueness, there is a special uniqueness to this case with consideration to all the added layers of law it carries as a basis for what is "standard."

Albert Bradley was denied the right to fair and impartial hearings, denied the right to have fair representation through the appointment of third party individuals who represented Zurich American Insurance as opposed to his best interests, and denied the right to medical care and medical services deemed necessary for the level of his injury. However, the standard remains that this court should weigh the preponderance of evidence of the actual facts in this case. The case of Clemmons v. Lowe's argued for claimant receiving temporary benefits for a back injury that was originally denied by the Commission. This ruling was reversed by the Court of Appeals. Again, with this case, there was no issue with regards to total and permanent disability, there was no issue of guardianship, nor did it seem to be an issue with receiving medical care with this claimant. Yet, its ruling was reversed. Although not in SC, pertinent cases to highlight include Rhodes, et. al v. AIG, Zurich et al. which involved a motorist who was struck by a truck driver. She became paraplegic as a result of her injuries. The carriers involved in this case denied payments for the complex care required for Rhodes who suffered catastrophic injuries. After several years of litigation, the Court would rule in Rhodes favor and award substantial damages. Nunn v. Noodles & Co., the claimant argued there was an intentional obstruction of workers' compensation payments by misleading the employee about the intent of meetings held and false statements in claims, all in an effort to deny payment. Nunn was eventually awarded benefits after trial. In Floyd v. Zurich, Floyd was denied benefits because the argument was that Floyd had reached maximum medical improvement. The respondents argued that Floyd's injuries were not work-related. It was held that Floyd was entitled to temporary disability from the time payments were terminated. Another important argument in this case was that the views of the independent medical examiner were weighed more heavily than those of the treating physician.

Albert Bradley was injured while working for Southern Industrial Constructors on May 16, 2011. From the time of his injury to the date of his death, Albert Bradley was denied basic human rights because of his incapacitation resulting from his injuries. The errors in the case of Albert Bradley are too numerous, but they must be restated. Albert Bradley and his family were denied due process for hearings, especially in the appointment of Guardian Ad Litem Victoria Lichtenberger and state-appointed Guardians in NC from Gaston County DSS. Albert Bradley was denied medical equipment and medical services to include access to specialists such as neurologists. Albert Bradley paid out-of-pocket for medications, supplies, and transportation and travel to hearings and medical appointments without any reimbursements provided. Albert Bradley received total care 24 hours a day and 7 days a week in his home primarily by his wife, Christine Bradley and his daughter, Lavare Seltun who were never compensated for their health care services to claimant.

The workers' compensation cases presented share a very common theme: denial of payment of benefits to the injured worker. The very same applies to the case of Albert Bradley, who is now deceased, who underwent a myriad of health events that ultimately led to his death because of that very same thing--denial of payment of benefits. Review of the preponderance of evidence of this case requires the evidence from all

FACTS

1. Albert Bradley sustained traumatic brain injury while working for Southern Industrial Constructors, Inc. of Columbia, SC on May 16, 2011. Because of his injuries, he was declared permanently and totally disabled by the South Carolina Workers' Compensation Commission.

2. Albert Bradley received total care in his home by his wife Christine Bradley and his daughter Lavare Seltun until the time he was taken away from his family on March 17, 2016.
3. Attorney Mike Farry with Horton Law Firm in Greenville, SC was appointed as Guardian for Albert Bradley.
4. There is no evidence to support the appointment of Victoria Lichtenberger as Guardian/Guardian Ad litem for the claimant Albert Bradley. No family members, not even the claimant, were notified, were served, or were present at any hearing.
5. Expert witness testimony, medical records, autopsy report, and toxicology report have been excluded for examination and review by the appellant to provide support to the claimant's cause of death.
6. Albert Bradley had multiple severe medical conditions during the timeframe he was under the care of Victoria Lichtenberger/Zurich and Gaston County Department of Health and Human Services to include the following: life support; severe dehydration and renal failure; widespread thrombosis; diabetic ketoacidosis; and fall with head injury resulting in laceration and stitches. He was also receiving life-ending medications.
7. Albert Bradley was taken into custody by Victoria Lichtenberger/Zurich Insurance/Jason Lockhart and Gaston County Department of Health and Human Services (DSS) after a brief hospital visit at Caromont Regional Medical Center on March 17, 2016.
8. Albert Bradley was also under the custody of Gaston County Department of Health and Human Services (DSS) in Gastonia, NC from March 17, 2016 until the time of his death February 5, 2017.
9. The family received notification after 30 days of no contact at all with the claimant that he was on life support in Mecklenburg County at Carolinas Medical Main in Charlotte, NC. Albert Bradley had numerous hospital visits with multiple hospitals for serious medical conditions from the time he was taken from March 17, 2016 until his death.
10. Chris Tuten did not provide documentation to show good faith in conducting a dependency investigation. All family members were not contacted. Documentation was not provided to the court to show beneficiaries of the claimant held through all employers.
11. APA submissions presented to the court for evidence by the defense was not provided to the appellant for review and examination.
12. Albert Bradley paid for transportation, medical care, and medical expenses out of his own monies.
13. Financial records have not been provided to show proof of full accounting of the claimant.
14. Victoria Lichtenberger, is a geriatric care manager and owner and operator of Eldersource Eldercare in Charlotte, NC, who places aging adults into adult homes and facilities.

15. Albert Bradley, the claimant, has a living spouse, Christine Bradley, and three living children: Derwin Bradley, Lavare Seltun, and Christy James.

ARGUMENTS

Did the commissioner fail to consider important reasons for award for compensation? If so, what reasons?

Section 42-9-10(A)(B)(C)(D). Amount of compensation for total disability and what constitutes total disability. During proceedings and order, temporary compensation was applied to a permanent disability claim. Although Commissioner Beck stated that claimant Albert Bradley was declared permanently disabled, law was applied for temporary disability with attempt to settle the claim on that basis.

Section 42-15-60 (C)- Albert Bradley, now deceased claimant, who received total care and medical services in his home by family members 24/7 up until the year he was taken, were never compensated for the services they provided to the claimant even after care plan which was requested was presented to the court to show the care the claimant was receiving in the home. There was a court order which ordered monies which Albert Bradley paid out of his own monies to be reimbursed by the carrier for expenses such as medications and supplies dating back to 2013 which still have not been paid as of this date. Albert Bradley paid for his own transportation to court hearings, doctors' visits, medications, and nursing services, all which no reimbursement was received. Albert Bradley even had to purchase his own wheelchair accessible van for transportation out of his own money and was never reimbursed.

67-902-Dependency investigation. The argument here is that a thorough investigation of benefits on behalf of the claimant for all dependents through his employers should be brought before the court. Christine Bradley stated before the court in a prior hearing and made pleas to the Commission that she was due spousal benefits as she was the beneficiary listed for Albert Bradley through his employer Southern Industrial. Her request for further information and documentation pertaining to the above was not acknowledged.

Section 42-17-60. Christine Bradley, spouse of claimant, has been denied benefits. "In case of appeal from the decision of the commission on questions of law, the appeal does not operate as a

supersedeas, and, after that time the employer is required to make weekly payments of compensation."

Sections 42-9-220, 42-9-230. Christine Bradley was separated from her husband on March 17, 2016, and all benefits that Albert Bradley had been receiving had stopped in December 2015.

Did the commissioner incorrectly decide the facts? If so, what facts?

Section 42-9-10(A)(B)(C)(D). Albert Bradley was declared permanently and totally disabled.

Section 42-15-80. It was ordered that Albert Bradley died of acute bronchopneumonia. No medical records including autopsy and toxicology results were submitted to support this diagnosis. No expert witness testified at the hearing to provide expert testimony to support this diagnosis.

Albert Bradley died in the custody of Gaston County DSS/Tereasa Osborne, Stephanie Stevenson and Victoria Lichtenberger, appointed Guardian/Guardian ad Litem through the SC Workers' Compensation Commission. Victoria Lichtenberger is owner of ElderSource, located at 1018 East Blvd., Suite 3, Charlotte, NC, a geriatric care management company that is responsible for the placement of geriatric patients into adult homes and facilities.

Albert Bradley suffered immensely under the hands of Guardian Ad Litem Victoria Lichtenberger and Gaston County DSS/Tereasa Osborne, Stephanie Stevenson. From the time of their acquisition of the claimant, there was a rapid decline in his health evidenced by multiple hospital visits and admissions that ultimately led to his death.

Section 42-15-60- The claimant has medical bills that have not been paid by the carrier. These bills have not been brought before the court to show proof of payment.

67-902, 67-903, 67-904. Tuten testified that he conducted the dependency investigation in good faith when in fact he failed to make contact with all of the claimant's family members and failed to provide documentation to support his findings.

APA submission presented by Attorney Jason Lockhart used as evidence was not provided to all parties prior to hearing or after the hearing and was used as facts for the case.

67-216, 42-15-55. Victoria Lichtenberger, Guardian ad Litem, said representative for the deceased claimant, was speaking on behalf of the insurance company instead of the claimant.

Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem and Gaston County DSS/Tereasa Osborne/Stephanie Stevenson when he died. Victoria Lichtenberger, Guardian Ad Litem was also documented as dependent of the claimant. Proof of guardianship was never provided during court when requested. Family members, or the claimant himself, Albert Bradley, was not present at any hearing for the appointment of Guardian Ad Litem.

Family members had very limited contact with Albert Bradley during the last year of his life, and visits with him were supervised when they were allowed.

Do you think the Commissioner applied the wrong law? If so, what law?

Section 42-9-20. Temporary compensation, partial disability law cannot be applied to a claimant who has suffered physical brain damage. Albert Bradley sustained physical brain damage on May 16, 2011, and was permanently and totally disabled on the date of his accident.

Do you feel there are any other reasons why the Commissioner's judgment was wrong? If so, what?

42-9-20. Based on the findings and the laws, as highlighted above a temporary compensation and partial disability cannot be applied when an individual has suffered a permanent disability.

Family members were denied their rights to civil proceedings for guardianship for Albert Bradley. Albert Bradley has a living spouse Christine Bradley.

67-902. There was failure to conduct a thorough dependency investigation through the claimant's employer Southern Industrial.

Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem, and owner of ElderSource and Gaston County DSS/Tereasa Osborne, Agency Attorney/Stephanie Stevenson, guardianship supervisor. No proof of guardianship was ever provided.

67-1301. Expert physician testimony was not heard on the given diagnosis, acute bronchopneumonia, as to the cause of Albert Bradley's death.

Other documentation which were ordered by the Commissioner to include the complete financial record of the claimant held by the Guardian Ad Litem Victoria Lichtenberger as well as her final accounting, full medical records from the time that Albert Bradley was taken into custody from

3/17/2016 until the date of his death including autopsy and toxicology were not submitted as ordered for review and evidence.

Apply the laws accordingly, consider the facts in this case, and apply due process to be fair in his decision-making and execution of the laws. Every individual has the right to fair and equal representation.

CONCLUSION

Given the facts as discussed above, it can be concluded that the Commission's findings were not supported by actual facts, the evidence, and the appellant's evidence was not considered as a basis for rulings. Appellant moves the Court to reverse the judgement of the lower court and uphold that the laws which govern this case are adhered to for just awards.

Christine Bradley

PROOF OF SERVICE

IN THE STATE OF SOUTH CAROLINA

RECEIVED
JUL 25 2019
SC Court of Appeals

In the Court of Appeals

In the Supreme Court

Appellate Court Judges

Case No: 2018001535

Christine Bradley, *Pro se* for Albert Bradley — Appellant

v.

SC Workers' Compensation Commission,
Southern Industrial Constructors Inc.,
Zurich American Insurance Company %
Zurich North America, Victoria Lichtenberger,
Gaston County DHHS (Tereasa Osborne, Stephanie Stevenson) — Respondents

I certify that I have served the Initial Brief on the SC Workers' Compensation Commission on July 25, 2019, by depositing a copy of it in the United States Mail to P.O. Box 1715, Columbia, SC 29202-1715, or via hand-delivery 1333 Main St., Suite 500, Columbia, SC, 29202. I certify that I have served the same upon Southern Industrial Constructors and Zurich American Insurance Company on July 25, 2019 by depositing a copy of it in the United States Mail, to the attorney of record, Jason W. Lockhart at P.O. Box 12519, Columbia, SC 29201, and via hand

delivery to his office at 1320 Main St., Columbia, SC 29201. I certify that I have served a copy to Helen Hiser, by depositing a copy in the U.S. Mail to, 735 Johnnie Dodds Blvd. Suite 200, Mt. Pleasant, SC 29464. I certify that I have served a copy to the Gaston County DHHS, by depositing a copy of it in the United States Mail, to the attorney of record, Tereasa Osborne, at 330 Dr. Martin Luther King, Jr. Way, Gastonia, NC 28052. I certify that I have served a copy to Victoria Lichtenberger, Guardian, by depositing a copy of it in the United States Mail to 1018 East Blvd., Suite 3, Charlotte, NC 28203.

July 25, 2019

Christine Bradley, *Pro se* for Albert Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Christine Bradley

July 17, 2019

Christine Bradley (Albert Bradley), *Pro se*
475 Lower Lee School Rd.
Mayesville, SC 29104

RECEIVED
JUL 17 2019
SC Court of Appeals

SC Workers' Compensation Commission
P.O. Box 1715
1333 Main St., Suite 500
Columbia, SC 29202-1715

Re: Court of Appeals Case Number Case No: 2018001535

Dear SCWCC:

Please be advised that I am requesting that the form that I completed for appointment of attorney be rescinded because I was never informed of any appointment. I contacted SCWCC several times, and I was told that someone would contact me about this issue. Yet, this never happened. Therefore, I will continue to function in the capacity as *Pro se* on my husband's, Albert Bradley's, behalf. As of this date, no changes have been made regarding my legal representation.

In addition, please correct your records to show that Attorney Preston McDaniel and Gerald Malloy were hired May 2011. The attorney-client relationship between myself and Attorney Preston McDaniel was terminated by me in June 2011 because he was not working in the best interests of my husband, Albert Bradley. The attorney-client relationship between myself and Attorney Gerald Malloy was terminated by me in November 2011, for the same reason-failing to act on behalf of his client, Albert Bradley.

Attorney Olin McDougal was appointed by Attorney Scott Roberts to assist with the matters involving the claim of Albert Bradley at the SCWCC. Both attorneys withdrew their representation after their first court appearance in September 2012, and were only active for a very short period (approximately 2 months). The family of Albert Bradley met with Olin McDougal only once, which was for a very brief period prior to the hearing in September 2012.

I have attached a copy of the list that your agency provided to me for contacts for individuals involved in the court reporting of hearings related to this case. Please provide all addresses for the agencies you have listed on your company's letterhead and please sign the document. Tatum and Deborah Thomas Court Reporting, Inc. were contacted by phone. They both informed me that they have no record of this case.

Once again, please make all corrections and provide me with the necessary documentation so that I will be able to comply with the procedures of the SC Court of Appeals.

Sincerely,

Christine Bradley

Christine Bradley, *Pro se* for Albert Bradley

RECEIVED
JUL 17 2019
SC Court of Appeals

Cc: Chief Justice James E. Lockemy, Jason Lockhart

May 1, 2019

Christine Bradley (Albert Bradley), Pro Se
475 Lower Lee School Rd.
Mayesville, SC 29104

Re: SC Court of Appeals, Case No: 2018001535

Dear Attorney Helen Hiser:

First, it is important that I remind you that I am Pro Se in this matter. Therefore, I kindly request that you address me as such pertaining to all matters in this appeal. In response to your motion, please review all the correspondence I sent to the court and copied to respective respondents. The files and documents that I have requested have been requested on multiple occasions, and I am still not in receipt of all files by all parties who were involved in the case of Albert Bradley. Decision and Order made by the Commission on December 6, 2017 was requested for review by me, and subsequently went before the Commission Review panel for full review on May 21, 2018. Please see the attached findings of fact which highlight the reason for review and my request for appeal by the SC Court of Appeals. Therefore, my request for subpoenas from the Appellate Court and for hearing before the court are justified, as parties fail to provide me with all files and documentation needed for further investigation into this case. Also, please note my right to appeal per Rule 201 (a)(b) and right for subpoenas, 413.0-Rule 15, Oaths, Subpoena Power, (a)(b)(c)(d)(e) and (f).

Sincerely,

Christine Bradley, Pro Se (Albert Bradley)

Cc: Chief Judge James E. Lockemy

July 30, 2018

Christine W. Bradley
475 Lower Lee School Road
Mayesville, SC 29104

SC Workers' Compensation Commission
Appellate Committee Panel Members
1333 Main St., Suite 500
Post Office Box
Columbia, SC

Dear Appellate Panel Members, Melody James, Avery Wilkerson, Jr. and Gene McCaskill:

I'm writing to make sure that each of you received my response that was hand delivered to your office on July 27, 2018. This was done after receiving the certified order from Jason Lockhart on July 24, 2018.
As I stated on that date, I dissent to the order that I received by certified mail on time. Please see the enclosed copies that were also hand delivered on July 27th and July 30th.

Again, I dissent with the order that I received on July 24, 2018 that was sent by Jason Lockhart to me by certified mail on July 24, 2018. Thanks for your consideration in this matter.

Sincerely,

Christine Bradley

C/c Keith Roberts, Legal Counsel SCWCC

July 29, 2018

RECEIVED
JUL 30 2018
SC WORKERS' COMPENSATION

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

SC Workers' Compensation Commission
Appellate Committee Panel Members
1333 Main St., Suite 500
Columbia, SC

Dear Appellate Panel Members Melody James, Avery Wilkerson, Jr., and Gene McCaskill:

I, Christine Bradley, *pro se*, am writing to express my dissent with your final decision and order. I am requesting to move forward with this process for further appeal of this decision. I was in receipt of a certified order by Jason Lockhart on July 24, 2018. I responded back the order stating that I was not in agreement with the order. This was in response to the order I received by Jason Lockhart on July 24, 2018. Enclosed were my findings of fact with supporting SC Codes of Laws as basis for argument. On Saturday, I received the final decision and order from the appellate panel. Again, I am not in agreement with the final decision and order that has been entered. Albert Bradley, the decedent and claimant, is without legal representation in this matter. Also, the children of the claimant do not waive any of their rights. Once again, please provide me with the necessary forms to move forward in this matter.

Thank you for your assistance in this matter.

Sincerely,

Christine Bradley

Christine Bradley

Cc: Keith Roberts, Legal Counsel SCWCC

July 26, 2018

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Jason Lockhart, MGC, Attorney for the Defendants
Zurich North American Insurance
Southern Industrial Constructors
Victoria Lichtenberger, Guardian/Guardian Ad Litem for the Claimant
Gaston County DSS/Tereasa Osborne/Stephanie Stevenson

Re: Answer to Appellate Panel Decision and Order Filed

Dear Appellate Panel Members Melody James, Avery Wilkerson, Jr., and Gene McCaskill:

I, Christine Bradley, *pro se*, am writing to express my dissent with the order issued by Jason Lockhart, Attorney for the defendants on this matter. As previously argued by myself before the appellate panel on May 21, 2018, the findings of fact are as stated according to the SC Code of Laws and described in my appeal. There is a lack of evidence provided by the defendants, and that is clearly argued in the appeal. Please see the attached document to review those findings. Please also be reminded that Albert Bradley, the decedent, does not have legal representation in this matter. Also, the children of the claimant are not waiving their rights to their father. Again, I do not agree with this order.

Thank you for your assistance in this matter.

Yours truly,

Christine Bradley

Hand delivered July 12, 2018 Resubmitted

To: S.C. Workers' Compensation Commissioner
Main Street
Columbia, SC 29201

Reference: Albert Bradley
475 Lower Lee School Road
Mayesville, SC 29104

To the Appeal Panel:

On today I request to review my husband's file and was denied access to it. I was told that it was all on the computer; then I asked to review it on the computer and this was denied. I was told that we all were given copies of the entire file. This continue to bother me because Mr. Lockhart continues to talk about things what we have no knowledge off. It is even more puzzling when I'm not being allow to view what's in my husband file for clarity.

Once again I am requesting that the SC Workers' Compensation Commissioner appoint an attorney for Mr. Bradley, my husband as it is required by the SC Code of Law. At this time, I will continue to seek out as to what happened to Albert Bradley. No one is providing or allowing this family to secure facts about what really happened to him.

Just a reminder that Jason Lockhart who works for Zurich insurance company was an accomplice to my husband's death.

Sincerely,

Christine W. Bradley
Spouse of Albert Bradley

CB Hand-delivered

December 7, 2017

Christine W. Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

1105628

Commissioner T. Scott Beck
1333 Main St., Suite 500
Columbia, SC 29201

RECEIVED
MAY 01 2019
SC Court of Appeals

Re: Albert Bradley, dependency hearing

Dear Commissioner Beck:

I am writing to follow up with you regarding the dependency hearing that was held before your presence on yesterday for claimant Albert Bradley to determine to whom benefits would be paid and in what amounts. After careful attention to the total amount due, it has been determined that monies have been excluded from this calculation to include social security payments for 11 months, SC state retirement benefits for 3 months, and weekly workers' compensation payments from January 2016 until February 5, 2017.

It was also documented at the hearing yesterday that the appointed Guardian Ad Litem Victoria Lichtenberger testified that she did not spend any monies for the care of Albert Bradley and that everything he got was donated to him. Also, because Albert Bradley's injury was deemed permanent and total, and this was a workers' compensation claim, all medical claims and other related expenses are to be paid by workers' compensation. I am requesting that the above items be added to the order to be drafted, as well as the spousal income that I never received during the entire time my husband, Albert Bradley, was injured. Again, as requested on previous letters to you, I am requesting the court orders and records pertaining to Albert Bradley. Refer to letter previously written regarding this request. Also, please make sure payments are calculated using the permanent disability calculation and the appropriate forms are being used. Your corrections and addendum to this will be greatly appreciated. If we need to return to address the issues cited above, please advise as well. Again, thank you for your time and attention.

sewce
FEB 05 2018
JUDICIAL

Sincerely,

Christine W. Bradley

RECEIVED
FEB 02 2018
SC WORKERS' COMPENSATION

Cc: Jason Lockhart, Gary Cannon, Keith Roberts

CB Hand-delivered

November 29, 2017

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Commissioner T. Scott Beck
1333 Main St., Suite 500
P.O. Box 1715
Columbia, SC 29201

Dear Commissioner Beck:

I am writing to you to request that you please clarify and provide all legal documents that were submitted at the said pre-hearing briefing to include APA submissions. The family of Albert Bradley is unaware of any prior hearing pertaining to the above. Also, I requested at the last attempted hearing all medical reports, all hospital visits, all facility stays, healthcare professionals including physicians, nurses, nursing assistants, and others involved in the care of my husband Albert Bradley from March 17, 2016 until present. I requested the complete medical file which should also include all lab reports, exams including x-rays, and medications administered from all hospitals and facilities held. Please provide the requested guardianship documentation of all individuals claiming to have guardianship over Albert Bradley to include court dates, times, and reasons for such hearings. Please include why family was not informed of hearing on the matter. If notification was sent, please provide the documentation to support such.

The Fifth and Fourteenth Amendments of the U.S. Constitution state each individual has a right to due process of law. Therefore, the vulnerable and incapacitated Albert Bradley must have legal representation at all times. I asked the court to appoint Albert Bradley legal counsel, and I also requested the above documents. I have yet to receive the documents I requested, and I have not been notified of legal counsel being provided for my husband, Albert Bradley.

Lastly, there were several individuals claiming to be Albert Bradley's guardian: Jason Lockhart/Zurich Insurance Co.; Tereasa Osborne, Gaston County DSS Attorney; Stephanie Stevenson, Gaston County DSS Social Worker; and Victoria Lichtenberger, ElderSource, Charlotte, NC. Again, please provide the supporting documentation to substantiate their position. Thank you for your assistance.

Sincerely,

Christine W. Bradley

Cc: Jason Lockhart, Gary Cannon, Keith Roberts

October 9, 2017

Lavare Seltun
4324 Stone Mountain Dr.
Gastonia, NC 28054

Commissioner T. Scott Beck
SC Workers' Compensation Commission
1333 Main St., Suite 500
Columbia, SC 29202-1715

Re: Albert Bradley, claimant

Dear Commissioner Beck:

This letter is to acknowledge that I am in receipt of some documents. However, the documents received do not cover the entire period of Albert Bradley's claim. Full financial disclosures and financial records are not included for the claimant. All medical records are not included to include the claimant's name listed under all aliases and all locations where the claimant received treatment from the period of March 15, 2016 to present. All documents pertaining to guardianship hearings for the claimant are not included in the file. Decisions and orders regarding guardianship hearings are needed to verify the status of guardians/guardian ad litem for the claimant's entire claim period. Christine Bradley requests guardianship documents pertaining to her husband, Albert Bradley, which were said to be in order and were executed during the claim period by the following parties: Jason Lockhart/Zurich Insurance; Victoria Lichtenberger, and Stephanie Stevenson/Tereasa Osborne, Gaston County DSS. Thank you very much for your assistance.

Sincerely,

Lavare Seltun

Cc: Gary Cannon, Keith Roberts, Jason Lockhart, Christine Bradley, Derwin Bradley, Christy James

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500
P.O. BOX 1715
Columbia, SC 29202-1715
803-737-5675

WCC File #: 1105628
Carrier File #: 1105628
Carrier Code #:
Employer FEIN #:

Claimant's Name: Albert Bradley SSN: 249-90-0113
Address: 475 Lower Lee School Rd
City: Mayesville State: SC Zip: 29104
Home Phone: (704)608-3034 Work Phone:
Preparer's Name: Christine W. Bradley Law Firm: None

Employer's Name: Southern Industrial Constructors
Address:
City: Columbia State: SC Zip:
Insurance Carrier: Zurich American Insurance CO.
Preparer's Phone #: 704)608-3034 803)799-9501

REQUEST FOR COMMISSION REVIEW

Request for Commission Review by ☑ claimant ☐ employer (check one) Date of injury: 05-16-2011

The undersigned makes application for review of the findings of the Commissioner in the above-captioned case. The request for review is based on the following grounds: (State the grounds of your appeal in the form of questions presented. Each question presented must contain a concise statement of one proposition of law or fact. Refer to evidence by title and exhibit number. Use additional pages if necessary).

See the Attached documents. CWB

CWB

(Check one) Oral argument ☑ is ☐ is not requested. Appellant's request for oral argument is waived if not indicated on this form.

I certify that I have served this document pursuant to R.67-211 by delivering a copy to Commissioner T. Scott Beck
Name

Address

on the ____ day of _____, _____ by ☐ first class mail ☐ personal service ☐ certified mail.

Christine W. Bradley — Spouse — 02-02-2018
Preparer's Signature — Title — Date

Check this box if you are not represented by an attorney. ☑

RECEIVED
FEB 02 2018
SC WORKERS' COMPENSATION

If the claimant appeals and is representing himself or herself, the Judicial Department will prepare the additional copies of this form and serve this form on the opposing party. R.67-701B. Otherwise, file the original and four copies of this form with the Judicial Department. The appeal must be postmarked no later than 14 days from the date of service of the Hearing Commissioner's decision. R.67-701 and R.67-205. Attach the filing fee to this form. Attach a Form 32 if you are unable to pay the filing fee. Refer to R.67-701 through R.67-711 for additional information.

Did the commissioner fail to consider important reasons for award for compensation? If so, what reasons?

Section 42-9-10(A)(B)(C)(D). Amount of compensation for total disability and what constitutes total disability. During proceedings and order, temporary compensation was applied to a permanent disability claim. Although Commissioner Beck stated that claimant Albert Bradley was declared permanently disabled, law was applied for temporary disability with attempt to settle the claim on that basis.

Section 42-15-60 (C)- Albert Bradley, now deceased claimant, who received total care and medical services in his home by family members 24/7 up until the year he was taken, were never compensated for the services they provided to the claimant even after care plan which was requested was presented to the court to show the care the claimant was receiving in the home. There was a court order which ordered monies which Albert Bradley paid out of his own monies to be reimbursed by the carrier for expenses such as medications and supplies dating back to 2013 which still have not been paid as of this date. Albert Bradley paid for his own transportation to court hearings, doctors' visits, medications, and nursing services, all which no reimbursement was received. Albert Bradley even had to purchase his own wheelchair accessible van for transportation out of his own money and was never reimbursed.

67-902-Dependency investigation. The argument here is that a thorough investigation of benefits on behalf of the claimant for all dependents through his employers should be brought before the court. Christine Bradley stated before the court in a prior hearing and made pleas to the Commission that she was due spousal benefits as she was the beneficiary listed for Albert Bradley through his employer Southern Industrial. Her request for further information and documentation pertaining to the above was not acknowledged.

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Albert Bradley died in the custody of Gaston County DSS/Tereasa Osborne, Stephanie Stevenson and Victoria Lichtenberger, appointed Guardian/Guardian ad Litem through the SC Workers' Compensation Commission. Victoria Lichtenberger is owner of ElderSource, located at 1018 East Blvd., Suite 3, Charlotte, NC, a geriatric care management company that is responsible for the placement of geriatric patients into adult homes and facilities.

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Family members had very limited contact with Albert Bradley during the last year of his life, and visits with him were supervised when they were allowed.

Do you think the Commissioner applied the wrong law? If so, what law?

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Apply the laws accordingly, consider the facts in this case, and apply due process to be fair in his decision-making and execution of the laws. Every individual has the right to fair and equal representation.

May 1, 2019

Christine Bradley (Albert Bradley), Pro Se
475 Lower Lee School Rd.
Mayesville, SC 29104

RECEIVED
MAY 01 2019
SC Court of Appeals

Re: SC Court of Appeals, Case No: 2018001535

Dear Attorney Helen Hiser:

First, it is important that I remind you that I am Pro Se in this matter. Therefore, I kindly request that you address me as such pertaining to all matters in this appeal. In response to your motion, please review all the correspondence I sent to the court and copied to respective respondents. The files and documents that I have requested have been requested on multiple occasions, and I am still not in receipt of all files by all parties who were involved in the case of Albert Bradley. Decision and Order made by the Commission on December 6, 2017 was requested for review by me, and subsequently went before the Commission Review panel for full review on May 21, 2018. Please see the attached findings of fact which highlight the reason for review and my request for appeal by the SC Court of Appeals. Therefore, my request for subpoenas from the Appellate Court and for hearing before the court are justified, as parties fail to provide me with all files and documentation needed for further investigation into this case. Also, please note my right to appeal per Rule 201 (a)(b) and right for subpoenas, 413.0-Rule 15, Oaths, Subpoena Power, (a)(b)(c)(d)(e) and (f).

Sincerely,

Christine Bradley

Christine Bradley, Pro Se (Albert Bradley)

Cc: Chief Judge James E. Lockemy

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500
P.O. BOX 1715
Columbia, SC 29202-1715
803-737-5675

WCC File #: 1105628
Carrier File #: 1105628
Carrier Code #:
Employer FEIN #:

Claimant's Name: Albert Bradley SSN: 249-90-0113
Address: 475 Lower Lee School Rd
City: Mayesville State: SC Zip: 29104
Home Phone: (704) 608-2034 Work Phone:
Preparer's Name: Christine W. Bradley Law Firm: None

Employer's Name: Southern Industrial Constructors
Address:
City: Columbia State: SC Zip:
Insurance Carrier: Zurich American Insurance Co.
Preparer's Phone #: 704 608-2034 803 739-3501

REQUEST FOR COMMISSION REVIEW

Request for Commission Review by ☑ claimant ☐ employer (check one) Date of injury: 05-16-2011

The undersigned makes application for review of the findings of the Commissioner in the above-captioned case. The request for review is based on the following grounds: (State the grounds of your appeal in the form of questions presented. Each question presented must contain a concise statement of one proposition of law or fact. Refer to evidence by title and exhibit number. Use additional pages if necessary).

CWB

See the Attached documents.

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MAY 01 2019
SC Court of Appeals

CWB

(Check one) Oral argument ☑ is ☐ is not requested. Appellant's request for oral argument is waived if not indicated on this form.

I certify that I have served this document pursuant to R.67-211 by delivering a copy to Commissioner T. Scott Beck
Name

Address

on the ____ day of _____, _____ by ☐ first class mail ☐ personal service ☐ certified mail.

Christine W. Bradley Spouse 02-02-2018
Preparer's Signature Title Date

Check this box if you are not represented by an attorney. ☑

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SC WORKERS' COMPENSATION

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REQUEST FOR COMMISSION REVIEW

WCC Form # 30
Rev. 3/97

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KS

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KS

Statement of the Case

Albert Bradley suffered catastrophic injuries on May 16, 2011 while working for Southern Industrial Constructors, Inc. of Columbia, SC. Metal fragments from a chain link were impaled into his airway, and left him with anoxic and traumatic brain injuries. These injuries caused Albert Bradley to be totally disabled and completely reliant upon others for all his care needs. Albert Bradley was cared for in his home by his primary caregivers, Christine W. Bradley and Lavare Seltun until he was taken away from family members during a brief hospital visit at Caromont Regional Medical Center in Gastonia, NC on March 17, 2016. Christine Bradley and Lavare Seltun were banned from Caromont Regional Medical Center in Gastonia, NC on March 17, 2016. Albert Bradley was taken into custody by Zurich American Insurance/Zurich North America/Jason Lockhart and Gaston County Department of Health and Human Services in Gastonia, NC on March 17, 2016.

Family members had no contact and no knowledge of Albert Bradley's whereabouts for approximately 30 days after separation. Family members received notification approximately 30 days later that Albert Bradley was in Mecklenburg County, NC at Carolinas Medical Center-Main in Charlotte, NC on life support. Family members had very limited access to Albert Bradley. They were often not allowed to touch him, even if they were permitted to visit for short periods of time. Christine Bradley was prohibited from visiting with her husband, Albert Bradley. She was not allowed to see him or touch him at all.

There is no documentation of a hearing for appointment of Guardian/Guardian Ad Litem, Victoria Lichtenberger. The defendants purport that there was a hearing, yet no family members, not even the claimant, were notified, served, or present at any such hearing. Albert Bradley suffered immensely under the hands of Guardian/Guardian Ad Litem Victoria Lichtenberger.

Presiding Commissioner was notified of the status via letters regarding the status of Albert Bradley's condition and photos were provided as evidence. After several hospital admissions for treatment of severe medical conditions under the direction of South Carolina's Workers' Compensation Commission appointed Guardian/Guardian Ad litem Victoria Lichtenberger and Gaston County DHHS, Albert Bradley subsequently died. Family members were notified after his death on February 5, 2017.

The defendants claim that Albert Bradley died of diffuse acute bronchopneumonia. Requests were made for autopsy report, toxicology report, expert witness testimony, and the medical records to support this claim. The family requested that all sealed medical records on this matter be opened for full review and these requests have yet to be granted.

APA submissions presented for testimony at hearings held by the defense have not been provided to the appellant for review and examination.

The defense argues that Victoria Lichtenberger has maintained an accounting for the claimant when in fact the claimant was also in the custody of the state of NC with the Gaston County Department of Health and Human Services (DHHS). Attorney Travis Page in Gastonia, NC was appointed to manage the accounting for the claimant for Gaston County DHHS. Requests were made all financial records pertaining to the claimant, and these records have yet to be received.

The defense maintains that there was good faith in conducting a dependency investigation, yet they still fail to show documentation of all family members notified. They also failed to provide documentation from all employers to show benefits due to beneficiaries on behalf of the claimant. Chris Tuten initially contacted Christine Bradley by phone shortly after the death of Albert Bradley and stated that he was investigating Albert Bradley's death.

The defense highlights that no medical bills were brought before the commission for consideration for payment. Albert Bradley was in the custody of Victoria Lichtenberger and Gaston County DHHS. Albert Bradley was admitted to multiple facilities from March 17, 2016 until the time of his death.

The defense highlights that the South Carolina's Workers' Compensation Commission has full jurisdiction over the subject matter and parties pertaining to this case. However, this case was never brought before the commission for review, even with all the factors that occurred from March 17, 2016 until the time of his death.

FINDINGS OF FACT

1. Albert Bradley sustained traumatic brain injury while working for Southern Industrial Constructors, Inc. of Columbia, SC on May 16, 2011. Because of his injuries, he was declared permanently and totally disabled by the South Carolina Workers' Compensation Commission.
2. Albert Bradley received total care in his home by his wife Christine Bradley and his daughter Lavare Seltun until the time he was taken away from his family on March 17, 2016.
3. Attorney Mike Farry with Horton Law Firm in Greenville, SC was appointed as Guardian for Albert Bradley.
4. There is no evidence to support appointment of Victoria Lichtenberger as Guardian/Guardian Ad litem for the claimant Albert Bradley. No family members, not even the claimant, were notified, were served, or were present at any hearing.
5. Expert witness testimony, medical records, autopsy report, and toxicology report have been excluded for examination and review by the appellant to provide support to the claimant's cause of death.
6. Albert Bradley had multiple severe medical conditions during the timeframe he was under the care of Victoria Lichtenberger/Zurich and Gaston County Department of Health and Human Services to include the following: life support; severe dehydration and renal failure; widespread thrombosis; diabetic ketoacidosis; and fall with head injury resulting in laceration and stitches. He was also receiving life-ending medications.

7. Albert Bradley was taken into custody by Victoria Lichtenberger/Zurich Insurance/Jason Lockhart and Gaston County Department of Health and Human Services (DSS) after a brief hospital visit at Caromont Regional Medical Center on March 17, 2016.
8. Albert Bradley was also under the custody of Gaston County Department of Health and Human Services (DSS) in Gastonia, NC from March 17, 2016 until the time of his death February 5, 2017.
9. The family received notification after 30 days of no contact at all with the claimant that he was on life support in Mecklenburg County at Carolinas Medical Main in Charlotte, NC. Albert Bradley had numerous hospital visits with multiple hospitals for serious medical conditions from the time he was taken from March 17, 2016 until his death.
10. Chris Tuten did not provide documentation to show good faith in conducting a dependency investigation. All family members were not contacted. Documentation was not provided to the court to show beneficiaries of the claimant held through all employers.
11. APA submissions presented to the court for evidence by the defense was not provided to the appellant for review and examination.
12. Albert Bradley paid for transportation, medical care, and medical expenses out of his own monies.
13. Financial records have not been provided to show proof of full accounting of the claimant.
14. Victoria Lichtenberger, is a geriatric care manager and owner and operator of Eldersource Eldercare in Charlotte, NC, who places aging adults into adult homes and facilities.

15. Albert Bradley, the claimant, has a living spouse, Christine Bradley, and three living children: Derwin Bradley, Lavare Seltun, and Christy James.

BASED ON CONCLUSIONS OF LAW AND FINDINGS OF FACT

Did the commissioner fail to consider important reasons for award for compensation? If so, what reasons?

Section 42-9-10(A)(B)(C)(D). Amount of compensation for total disability and what constitutes total disability. During proceedings and order, temporary compensation was applied to a permanent disability claim. Although Commissioner Beck stated that claimant Albert Bradley was declared permanently disabled, law was applied for temporary disability with attempt to settle the claim on that basis.

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PROOF OF SERVICE

IN THE STATE OF SOUTH CAROLINA

In the Court of Appeals
In the Supreme Court

Appellate Court Judges

Case No: 2018001535

RECEIVED
MAY 01 2019
SC Court of Appeals

Christine Bradley (Albert Bradley), Pro se — Appellant

v.

SC Workers' Compensation Commission,
Southern Industrial Constructors Inc.,
Zurich American Insurance Company %
Zurich North America, Victoria Lichtenberger,
Gaston County DHHS (Tereasa Osborne, Stephanie Stevenson) — Respondents

I certify that I have served the Answer to Counter Motion on the SC Workers' Compensation Commission on May 1, 2019, by depositing a copy of it in the United States Mail to P.O. Box 1715, Columbia, SC 29202-1715, or via hand-delivery 1333 Main St., Suite 500, Columbia, SC, 29202. I certify that I have served the same upon Southern Industrial Constructors and Zurich American Insurance Company on April 22, 2019 by depositing a copy of it in the United States Mail, to the attorney of record, Jason W. Lockhart at P.O. Box 12519, Columbia, SC 29201, and via hand delivery to his office at 1320 Main St., Columbia, SC 29201. I certify that I have served a copy to attorney of record Helen Hiser, by depositing a copy in the U.S. Mail to, 735 Johnnie Dodds Blvd., Suite 200, Mt. Pleasant, SC 29464. I certify that I have served a copy to the Gaston County DHHS, by depositing a copy of it in the United States Mail, to the attorney of record, Tereasa Osborne, at 330 Dr. Martin Luther King, Jr. Way, Gastonia, NC 28052. I certify that I have served a copy to Victoria Lichtenberger, Guardian, by depositing a copy of I in the United States Mail to 1018 East Blvd., Suite 3, Charlotte, NC 28203.

May 1, 2019

Christine Bradley

Christine Bradley (Albert Bradley), Pro se
475 Lower Lee School Rd.
Mayesville, SC 29104

March 22, 2019

Christine Bradley, Pro se
475 Lower Lee School Rd.
Mayesville, SC 29104

RECEIVED
MAR 22 2019
SC Court of Appeals

SC Workers' Compensation Commission
1333 Main St.
Columbia, SC 29201

Re: Albert Bradley

Dear SCWCC:

I am in receipt of a letter dated and stamped March 14, 2019 that I received on March 21, 2019 from MGC (see attached). I contacted the court reporters with the contact information provided to me. I have received feedback from Creel Reporting, Inc. in which I have informed both SCWCC and the SC Court of Appeals that the document provided was incomplete and contained numerous errors. Initially, I was informed that Rob Fitzgerald was the reporter who for Creel Reporting, Inc. and the agency denied that he worked there. Deborah Thompson informed me initially that she did not have anything and that she only worked for one judge located in Beaufort, SC. I contacted Deborah Thompson again, and she informed me that she wasn't sure and that she would get back with me. Skylet Kean stated she performed reporting for one hearing for the case of Albert Bradley. However, she refused to provide me with information pertaining to her business for verification. I am also in receipt of court reporting provided by Jason Lockhart dated December 06, 2017 that is inaccurate.

I am still awaiting official documentation from all court reporters who recorded the hearings and meetings pertaining the case of Albert Bradley from the onset of his case to the present. Also, please inform me of the date and time that I may review files pertaining to the case of Albert Bradley. Thank you for your assistance.

RECEIVED
MAR 22 2019
SC WORKERS' COMPENSATION

Sincerely,

Christine Bradley

Christine Bradley, Pro se (Albert Bradley)

Cc: Jason Lockhart, Helen Hiser, Amanda Creel-Godfrey/Rob Fitzgerald, SC Court of Appeals

BASED ON CONCLUSIONS OF LAW AND FINDINGS OF FACT

Did the commissioner fail to consider important reasons for award for compensation? If so, what reasons?

Section 42-9-10(A)(B)(C)(D). Amount of compensation for total disability and what constitutes total disability. During proceedings and order, temporary compensation was applied to a permanent disability claim. Although Commissioner Beck stated that claimant Albert Bradley was declared permanently disabled, law was applied for temporary disability with attempt to settle the claim on that basis.

Section 42-15-60 (C)- Albert Bradley, now deceased claimant, who received total care and medical services in his home by family members 24/7 up until the year he was taken, were never compensated for the services they provided to the claimant even after care plan which was requested was presented to the court to show the care the claimant was receiving in the home. There was a court order which ordered monies which Albert Bradley paid out of his own monies to be reimbursed by the carrier for expenses such as medications and supplies dating back to 2013 which still have not been paid as of this date. Albert Bradley paid for his own transportation to court hearings, doctors' visits, medications, and nursing services, all which no reimbursement was received. Albert Bradley even had to purchase his own wheelchair accessible van for transportation out of his own money and was never reimbursed.

67-902-Dependency investigation. The argument here is that a thorough investigation of benefits on behalf of the claimant for all dependents through his employers should be brought before the court. Christine Bradley stated before the court in a prior hearing and made pleas to the Commission that she was due spousal benefits as she was the beneficiary listed for Albert Bradley through his employer Southern Industrial. Her request for further information and documentation pertaining to the above was not acknowledged.

Section 42-17-60. Christine Bradley, spouse of claimant, has been denied benefits. "In case of appeal from the decision of the commission on questions of law, the appeal does not operate as a supersedeas, and, after that time the employer is required to make weekly payments of compensation."

Sections 42-9-220, 42-9-230. Christine Bradley was separated from her husband on March 17, 2016, and all benefits that Albert Bradley had been receiving had stopped in December 2015.

Did the commissioner incorrectly decide the facts? If so, what facts?

Section 42-9-10(A)(B)(C)(D). Albert Bradley was declared permanently and totally disabled.

Section 42-15-80. It was ordered that Albert Bradley died of acute bronchopneumonia. No medical records including autopsy and toxicology results were submitted to support this

diagnosis. No expert witness testified at the hearing to provide expert testimony to support this diagnosis.

Albert Bradley died in the custody of Gaston County DSS/Tereasa Osborne, Stephanie Stevenson and Victoria Lichtenberger, appointed Guardian/Guardian ad Litem through the SC Workers' Compensation Commission. Victoria Lichtenberger is owner of ElderSource, located at 1018 East Blvd., Suite 3, Charlotte, NC, a geriatric care management company that is responsible for the placement of geriatric patients into adult homes and facilities.

Albert Bradley suffered immensely under the hands of Guardian Ad Litem Victoria Lichtenberger and Gaston County DSS/Tereasa Osborne, Stephanie Stevenson. From the time of their acquisition of the claimant, there was a rapid decline in his health evidenced by multiple hospital visits and admissions that ultimately led to his death.

Section 42-15-60- The claimant has medical bills that have not been paid by the carrier. These bills have not been brought before the court to show proof of payment.

67-902, 67-903, 67-904. Tuten testified that he conducted the dependency investigation in good faith when in fact he failed to make contact with all of the claimant's family members and failed to provide documentation to support his findings.

APA submission presented by Attorney Jason Lockhart used as evidence was not provided to all parties prior to hearing or after the hearing and was used as facts for the case.

67-216, 42-15-55. Victoria Lichtenberger, Guardian ad Litem, said representative for the deceased claimant, was speaking on behalf of the insurance company instead of the claimant. Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem and Gaston County DSS/Tereasa Osborne/Stephanie Stevenson when he died. Victoria Lichtenberger, Guardian Ad Litem was also documented as dependent of the claimant. Proof of guardianship was never provided during court when requested. Family members, or the claimant himself, Albert Bradley, was not present at any hearing for the appointment of Guardian Ad Litem.

Family members had very limited contact with Albert Bradley during the last year of his life, and visits with him were supervised when they were allowed.

Do you think the Commissioner applied the wrong law? If so, what law?

Section 42-9-20. Temporary compensation, partial disability law cannot be applied to a claimant who has suffered physical brain damage. Albert Bradley sustained physical brain damage on May 16, 2011, and was permanently and totally disabled on the date of his accident.

Do you feel there are any other reasons why the Commissioner's judgment was wrong? If so, what?

42-9-20. Based on the findings and the laws, as highlighted above a temporary compensation and partial disability cannot be applied when an individual has suffered a permanent disability.

Family members were denied their rights to civil proceedings for guardianship for Albert Bradley. Albert Bradley has a living spouse Christine Bradley.

67-902. There was failure to conduct a thorough dependency investigation through the claimant's employer Southern Industrial.

Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem, and owner of ElderSource and Gaston County DSS/Tereasa Osborne, Agency Attorney/Stephanie Stevenson, guardianship supervisor. No proof of guardianship was ever provided.

67-1301. Expert physician testimony was not heard on the given diagnosis, acute bronchopneumonia, as to the cause of Albert Bradley's death.

Other documentation which were ordered by the Commissioner to include the complete financial record of the claimant held by the Guardian Ad Litem Victoria Lichtenberger as well as her final accounting, full medical records from the time that Albert Bradley was taken into custody from 3/17/2016 until the date of his death including autopsy and toxicology were not submitted as ordered for review and evidence.

What action do you want the Commission to take in this case?

Apply the laws accordingly, consider the facts in this case, and apply due process to be fair in his decision-making and execution of the laws. Every individual has the right to fair and equal representation.

Statement of the Case

Albert Bradley suffered catastrophic injuries on May 16, 2011 while working for Southern Industrial Constructors, Inc. of Columbia, SC. Metal fragments from a chain link were impaled into his airway, and left him with anoxic and traumatic brain injuries. These injuries caused Albert Bradley to be totally disabled and completely reliant upon others for all his care needs. Albert Bradley was cared for in his home by his primary caregivers, Christine W. Bradley and Lavare Seltun until he was taken away from family members during a brief hospital visit at Caromont Regional Medical Center on March 17, 2016. He was taken into custody by Zurich American Insurance/Zurich North America/Jason Lockhart and Gaston County Department of Health and Human Services in Gastonia, NC.

Family members had no contact and no knowledge of Albert Bradley's whereabouts for approximately 30 days after separation. Family members received notification approximately 30 days later that Albert Bradley was in Mecklenburg County, NC at Carolinas Medical Center-Main in Charlotte, NC on life support. Family members had very limited access to Albert Bradley. They were often not allowed to touch him, even if they were permitted to visit for short periods of time. Christine Bradley was prohibited from visiting with her husband, Albert Bradley. She was not allowed to see him or touch him at all.

There is no documentation of a hearing for appointment of Guardian/Guardian Ad Litem, Victoria Lichtenberger. The defendants purport that there was a hearing, yet no family members, not even the claimant, were notified, served, or present at any such hearing. Albert Bradley suffered immensely under the hands of Guardian/Guardian Ad Litem Victoria Lichtenberger. Presiding Commissioner was notified of the status via letters regarding the status of Albert Bradley's condition and photos were provided as evidence. After several hospital admissions for

treatment of severe medical conditions under the direction of South Carolina's Workers' Compensation Commission appointed Guardian/Guardian Ad litem Victoria Lichtenberger and Gaston County DHHS, Albert Bradley subsequently died. Family members were notified after his death on February 5, 2017.

The defendants claim that Albert Bradley died of diffuse acute bronchopneumonia. Requests were made for autopsy report, toxicology report, expert witness testimony, and the medical records to support this claim. The family requested that all sealed medical records on this matter be opened for full review and these requests have yet to be granted.

APA submissions presented for testimony at hearings held by the defense have not been provided to the appellant for review and examination.

The defense argues that Victoria Lichtenberger has maintained an accounting for the claimant when in fact the claimant was also in the custody of the state of NC with the Gaston County Department of Health and Human Services (DHHS). Attorney Travis Page in Gastonia, NC was appointed to manage the accounting for the claimant for Gaston County DHHS. Requests were made all financial records pertaining to the claimant, and these records have yet to be received.

The defense maintains that there was good faith in conducting a dependency investigation, yet they still fail to show documentation of all family members notified. They also failed to provide documentation from all employers to show benefits due to beneficiaries on behalf of the claimant. Chris Tuten initially contacted Christine Bradley by phone shortly after the death of Albert Bradley and stated that he was investigating Albert Bradley's death.

The defense highlights that no medical bills were brought before the commission for consideration for payment. Albert Bradley was in the custody of Victoria Lichtenberger and

Gaston County DHHS. Albert Bradley was admitted to multiple facilities from March 17, 2016 until the time of his death.

The defense highlights that the South Carolina's Workers' Compensation Commission has full jurisdiction over the subject matter and parties pertaining to this case. However, this case was never brought before the commission for review, even with all the factors that occurred from March 17, 2016 until the time of his death.

FINDINGS OF FACT

1. Albert Bradley sustained traumatic brain injury while working for Southern Industrial Constructors, Inc. of Columbia, SC on May 16, 2011. Because of his injuries, he was declared permanently and totally disabled by the South Carolina Workers' Compensation Commission.
2. Albert Bradley received total care in his home by his wife Christine Bradley and his daughter Lavare Seltun until the time he was taken away from his family on March 17, 2016.
3. Attorney Mike Farry with Horton Law Firm in Greenville, SC was appointed as Guardian for Albert Bradley.
4. There is no evidence to support appointment of Victoria Lichtenberger as Guardian/Guardian Ad litem for the claimant Albert Bradley. No family members, not even the claimant, were notified, were served, or were present at any hearing.
5. Expert witness testimony, medical records, autopsy report, and toxicology report have been excluded for examination and review by the appellant to provide support to the claimant's cause of death.
6. Albert Bradley was taken into custody by Victoria Lichtenberger/Zurich Insurance/Jason Lockhart and Gaston County Department of Health and Human Services (DSS) after a brief hospital visit at Caromont Regional Medical Center on March 17, 2016.
7. Albert Bradley was also under the custody of Gaston County Department of Health and Human Services (DSS) in Gastonia, NC from March 17, 2016 until the time of his death February 5, 2017.

8. The family received notification after 30 days of no contact at all with the claimant that he was on life support in Mecklenburg County at Carolinas Medical Main in Charlotte, NC. Albert Bradley had numerous hospital visits with multiple hospitals for serious medical conditions from the time he was taken from March 17, 2016 until his death.
9. Chris Tuten did not provide documentation to show good faith in conducting a dependency investigation. All family members were not contacted. Documentation was not provided to the court to show beneficiaries of the claimant held through all employers.
10. APA submissions presented to the court for evidence by the defense was not provided to the appellant for review and examination prior to hearings.
11. Albert Bradley paid for transportation, medical care, and medical expenses out of his own monies.
12. Financial records have not been provided to show proof of full accounting of the claimant.
13. Victoria Lichtenberger, is a geriatric care manager and owner and operator of Eldersource Eldercare in Charlotte, NC.
14. Albert Bradley, the claimant, has a living spouse, Christine Bradley, and three living children: Derwin Bradley, Lavare Seltun, and Christy James.

PROOF OF SERVICE

THE STATE OF SOUTH CAROLINA

In The Court of Appeals
In The Supreme Court

RECEIVED
MAR 22 2019
SC Court of Appeals

Appellate Court Judges

Case No: 2018-001535

Christine Bradley (Albert Bradley), Pro se — Appellant

v.

RECEIVED
MAR 22 2019
SC WORKERS' COMPENSATION

SC Workers' Compensation Commission — Respondents
Southern Industrial Constructors, Inc.,
Zurich American Insurance Company c/o
Zurich North America,
Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS

I certify that I have issued a response to SC Workers' Compensation Commission on March 22, 2019, by depositing a copy of it in the United States Mail to P.O. Box 1715, Columbia, SC 29202-1715 or via hand-delivery to 1333 Main St., Suite 500, Columbia SC. I certify that I have issued a copy to Southern Industrial Constructors on March 22, 2019, by depositing a copy of it in the United States Mail, to the attorney of record, Jason W. Lockhart at P.O. Box 12519, Columbia, SC, 29201, and via personal to delivery to his office at 1320 Main St., Columbia, SC, 29201. I certify that I have issued a copy Creel Reporting, Inc. to Amanda Creel-Godfrey/Rob Fitzgerald to 1230 Richland St., Columbia, SC 29201.

March 22, 2019

Christine Bradley (Albert Bradley), Pro se
475 Lower Lee School Rd.
Mayesville, SC 29104

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2.
3.

ALDERSGATE ☐ EP ☒ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert
RM # 213
DR Bradley

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
5/30/16	- D/c'd previous (R) sacrum wound care order d/t healed
	V.O Dr Bradley / Grace Ryon RN
	1

Signature of Nurse Receiving Order: Grace Ryon RN Time: 1520 Physician's Signature: [signature] Date:

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2.
3.

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert
#213
Bradley

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
6/1/16 1219	↑FSBS TO Q6 HRS x 5 days + log to PEC on Monday Use SSI that is already ordered if coverage needed
	2

Signature of Nurse Receiving Order: [signature] Time: 1326 Physician's Signature: [signature], DNP Date: 6/1/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2.
3.

ALDERSGATE ☐ EP ☒ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley
Albert
10/27/49
DR Bradley

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
6/2/16	Continue same dose of Coumadin 4mg p.o q.d Recheck PT/INR on monday TLO Stacey Agne NP
	3

Signature of Nurse Receiving Order: S. Thrasher RN Time: 1100 Physician's Signature: [signature], DNP Date: 10/3/16

PHYSICIAN'S ORDERS

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

2. _____
3. _____

ALDERSGATE ☐ EP ☑ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR: JOSEPH PIERCE
ACCT 4805 DOB 10/27/1949

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
7/19/16	Follow instructions to prep resident for G-Tube placement, instructions from CMC main T/O P Bennett / Dr Kent Holzmueller

1

Signature of Nurse Receiving Order: S. Anderson Time: 16:30 Physician's Signature: [signature] Date: 7/20/16

PHYSICIAN'S ORDERS

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR: JOSEPH PIERCE
ACCT 4805 DOB 10/27/1949

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
7/25/16	0955
	Δ to Coumadin
	R/V PT/INR 1 Week

2

Signature of Nurse Receiving Order: S. Anderson Time: 1200 Physician's Signature: [signature] DNP Date: 7/26/16

PHYSICIAN'S ORDERS

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

ALDERSGATE ☐ EP ☑ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR: JOSEPH PIERCE
ACCT 4805 DOB 10/27/1949

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
7/27/16	1229
	Tylenol to 1Gm QD
	PEC Flu BS 2wells
	levsin 0.125 SL Q4 hrs prn throat congestion

3

Signature of Nurse Receiving Order: [signature] Time: [illegible] Physician's Signature: [signature] DNP Date: 7/27/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2.
3.

ALDERSGATE ☐ EP ☑ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Albert Bradley Room 213

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
	7/27/16 1725
	Clarification order:
	D/C Levemir order
	↑ Lantus to 13 units, QD
	To Stacy Ache NP / Dr Gambino

1

Signature of Nurse Receiving Order	Time	Physician's Signature	Date
Evelyn Bohn			7/29/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2.
3.

ALDERSGATE ☐ EP ☑ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley Albert DOB - 10/27/49 Dr Gambino

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
7/27/16	Hold Levsin 0.125 SL q 4hrs prn throat congestion until order is clarify by P&C:
	Albuterol Sulfate Nebulization Solution 1.25mg/3mL q 6hrs x 3 days.
	To Callie Stegall PA / O Grantham

2

Signature of Nurse Receiving Order	Time	Physician's Signature	Date
O Grantham			7/29/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2.
3.

ALDERSGATE ☐ EP ☑ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley Albert Dr Gambino Rm 213

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
	D/C Levsin
	Scopolamine patch 1 behind ear q 72° (↑ secretions)

3

Signature of Nurse Receiving Order	Time	Physician's Signature	Date
			7/29/16

Physicians Eldercare

Last	First	SSN	DOB
Bradley	Albert	249900113	10/27/49

Physician	Midlevel	Facility	Hospice/ Co. Name
John Gambino, MD		Asbury	

Chief Complaint: F/u HTN
Source from: Patient Nurse Family

History of Present Illness: Mandated Visit
Visit requested by: Patient Nurse Family

Pt cannot provide HPI. Nonverbal. No sls pain. Tol TF
No Δ in respn. Wt stable x 2 months
FS log: all FS generally 250-350

PMH DM GERD HTN PEG PE/DVT TBI

Medications: ☑ Reviewed and in chart Changes? Yes/No
lant 20 cum Dexil Bethan Kepp Lisino

Allergies: ☑ Reviewed and in chart Changes? Yes/No
Many

SOB
Review of Systems:
Pt cannot answer secondary to: ☐ dementia, ☑ aphasia, ☐ _____
☑ Family not available to provide ROS
☐ Nursing/ family was able to provide the following ROS
Systems: Constit., Respir., CV, ENT, Eyes, Endo, Psych, GI, GU, MS, Hem/Lymph, Allergy/Imm, Neuro, Skin

☐ All other ROS are negative

BP	HR	Temp	RR	Weight	Pulse Ox
150/100	90	98.6	20	209.6	95

ADL Independent? [yes=circle; no=line] Bathing Dressing Toileting Ambulation Feeding

Reg rhythm on DE

Constit: frail, elderly, M/F, WD/WN, ~~No Acute Distress~~, Cooperative
Respir: clear and equal BS Bilat, ~~No R/R/W~~, ~~no use of accessory muscles~~
Cardio: ~~Regular Rate~~, ~~w/o any Murmur/ Rub/ Gallop~~
GI: ~~+~~ BS, soft, NT/ ~~ND~~, no rebound or guarding
Musculo/ Ext: ~~no~~ edema, cyanosis, erythema, kyphosis
Atrophic
Skin:

Assessment and Plan:

1) HTN (CIO) SBP goal 130-150 on ACEI. Lytes ok.
No Δ BP log: 139/68‡; 158/90, 127/85, 140/67, 133/81

2) PE large, Dx 5/16 on coumadin Bedbound. INR goal met.
Ø overt bleeding. Will keep coumadin lifelong.

3) NIDDM Type 2 insulin req w/ CKD3. Adj meds as needed
Avoid low FS Routine foot care; on lantus. A1c goal ≤ 8.5
Will ↑ lantus further.

4) TBI, ABI Cont full ADL care. On Keppra 52 mg/h.

I spent _____ min. on the floor/unit. Greater than 50% of that time was related to counseling and coordination of care

Disposition: Home ALF LTC/ Prognosis: Good Fair Poor
Rehab Potential: Good Fair Poor

SNF or H	Subseq	D/C	ALF or GH	Established
	99307 99308	99315 99316 <30 min >30 min Tobacco 99406 (3-10)____ min counseled		99334 99335 Face to face time w/Pt.
	309			

Pertinent labs/ x-rays
INR 2.6 (8/15/16) 133/42 | 96/32 | 17 | 6.76 | 280 (7/18/16)
A1c 8.5 (7/16) LFT (3/16)

8/19/16
John Gambino, MD Date

**Property of Physicians Eldercare. Not to be used without expressed written permission.

5) oropharyngeal dysphagia on TF Monitor Monthly wts. PEG care

his blood sugars are running all above 200, with many in the high 300s. Increase his Lantus to 27 units daily. Follow up in 2 weeks goal is for blood sugars between 100-200

707.9 / L98.491: Skin ulcer, limited to breakdown of skin
skin breakdown at the crease in the base of the penis. Continue with skin protocol calmoseptine and wound nurse to follow

OTHER

>25min evaluation of patient/discussion with nurse/med review/chart review/lab review/coordination of care - greater than 50% of time spent in counselling with patient/nursing

***** Document e-signed by Stacey Ashe, NP on Sep 19 2016 1:22PM EDT *****
Physicians Eldercare

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR. JOSEPH PIERCE
ACC# 4805
DOB 10/27/1949

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
4/29/16	1125
	D/C current Coumadin orders
	Coumadin 6mg PT QD
	Rev PT/INR Monday

Signature of Nurse Receiving Order: S. Lindsey RN | Time: 1500 | Physician's Signature: [signature], FNP-C | Date: 4/29/16

DRUG SENSITIVITY
1. NONE ( )
2.
3.

PHYSICIAN'S ORDERS

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

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PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR. JOSEPH PIERCE
ACC# 4805
DOB 10/27/1949

RM #213

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
4/29/16	
	- D/c'd previous Both (R/L) ear lobe dressing
	- Δ Both ear lobe wounds: Apply Silon prep BID
	V.O Dr Pierce/ Grace Ryoo RN

Signature of Nurse Receiving Order: Grace Ryoo RN | Time: 1500 | Physician's Signature: [signature], FNP-C | Date: 5/2/16

DRUG SENSITIVITY
1. NONE ( )
2.
3.

PHYSICIAN'S ORDERS

ORIGINAL

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PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR. JOSEPH PIERCE
ACC# 4805
DOB 10/27/1949

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
4/29/16	D/C Trypsin/balsam Castor oil - Apply Risamine ointment to Both anal after each incontinent care evening shift. T/O Stacey ACHE NP

Signature of Nurse Receiving Order: S. Lindsey | Time: 1500 | Physician's Signature: [signature], FNP-C | Date: 5/2/16

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

3. _____

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert #113 Pierce

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
5/2/16 1305	½ bottle mag citrate PT x1 now. If ø BM & within 3 hours, give ½ bottle again

1

Signature of Nurse Receiving Order: Ellen Haines Time: 1515 05/02/16

Physician's Signature: [illegible], FNP-C Date: 5/2/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert 213 Pierce

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
5/9/16	d/c current Tube Feed order from hospital. Start Glucerna 1.5 x 60 mL/hour continuous via PEG tube. Mary Pierce RD LDN

2

Signature of Nurse Receiving Order: [illegible] Time

Physician's Signature: [illegible], FNP-C Date: 5/11/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley Albert 213 Pierce

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date	
5/6/16	Flush G-tube with 180 mL H20 q 4 hours Mary Pierce RD LDN

3

Signature of Nurse Receiving Order: [illegible] Time

Physician's Signature: [illegible], FNP-C Date: 5/11/16

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

3. _____

ALDERSGATE ☐ EP ☑ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR. JOSEPH PIERCE
ACC 4505 DOB 10/27/1945

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

DATE	
5/10/16	- Give ½ bottle of Magnesium Citrate Now VT Then after an hour, give one Glycerine Suppository PR - - Vital Signs q 4hrs x 48hrs - Stat CXR - SOB - Duoneb Nebulizers i Neb T.i.d x 7days T/O Stacey Ashe NP

Signature of Nurse Receiving Order: S. [illegible] Time: 12:45 Physician's Signature: [illegible], FNP-C Date: 5/11/16

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

PHYSICIAN'S ORDERS

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR. JOSEPH PIERCE
ACC 4505 DOB 10/27/1945

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

DATE	
5/11	0200 Phenergan 25mg ~~G-Tube~~ Suppository Now x 1 Hold Feeding for 4hrs for n/v T.O. ~~Stacey Ashe NP~~ PA Heather Yates PA

Signature of Nurse Receiving Order: [signature] Time: Physician's Signature: [illegible], FNP-C Date: 5/11/16

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

PHYSICIAN'S ORDERS

ORIGINAL

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

BRADLEY, ALBERT
DR. JOSEPH PIERCE
ACC 4505 DOB 10/27/1945

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

DATE	
5/11/16	0450 Stat KUB - Vomiting, abd distension

Signature of Nurse Receiving Order: S. [illegible] Time: 1700 Physician's Signature: [illegible], FNP-C Date: 5/11/16

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, A
Rm: 213
Dr. Gambino

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

9/16 Increase rate of enteral feeding to 85 ml/hr x 20 hrs (4p-12p) r/t increased calorie/protein needs associated c skin breakdown. Decrease flush to 200ml q 6 hrs r/t edema.
[illegible] RD LDN

1

Signature of Nurse Receiving Order	Time	Physician's Signature	Date
Lindings LPN	1800	[illegible] ANP-C	9/21/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert
#213
Gambino

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

Date 9/21/16 1000

Prostat 30 mL PT BID - skin breakdown

2

Signature of Nurse Receiving Order	Time	Physician's Signature	Date
[illegible]	1145a	[illegible] ANP-C	9/21/16

ORIGINAL

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

DRUG SENSITIVITY
1. NONE ( )
2. _____
3. _____

ALDERSGATE ☐ EP ☒ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert
Rm #213

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN C

Date

9/21/16 - D/C'd previous (R) elbow skin abrasion order and (L) buttock wound care order d/t healed
(R) elbow skin abrasion: Cleanse c Anasept, Apply wound gel & Mepilex
q OD

3

Carolinas HealthCare System

Patient: BRADLEY, ALBERT
Gender: M
Patient Type: O
MRN: 3623932IDXMRN
Patient DOB: 10/27/1949
Report Date: 08/22/2016 18:22
Collection Date: 08/22/2016 12:00
Report: CBC
Status: Final
Ordering Provider: XPSAA Client Bill

Test Name		Result	Units	Normal Range	Status
WBC		4.2	10*3/uL	3.6-10.4	Final
RBC		5.03	10*6/uL	4.16-5.83	Final
HGB	L	12.8	g/dL	13.0-17.4	Final
HCT		41	%	39-52	Final
MCV	L	81	fL	82-99	Final
MCH	L	26	pg	27-34	Final
RDW	H	17.1	%	12.5-15.7	Final
PLATELET	L	104	10*3/uL	142-328	Final
MCHC		32	g/dL	32-35	Final
MPV	H	12.8	fL	6.9-11.6	Final

on coumadin
no bleeding
8/23/16

Carolinas Laboratory Network
1000 Blythe Boulevard, Charlotte, NC 28203
Phone: 704-355-9350

Generated: 08/22/2016 20:22

PHYSICIAN FACESHEET - PATIENT DEMOGRAPHICS UPDATED: 04/23/2016 1335

NAME	: ROBINSON,THOMAS ZZZZ	ADM DATE/TIME	: 04/20/2016 1500
PT. TYPE	: IP	DIS DATE	:
SERVICE	: MED	LOCATION	: TAC T103 01
ADDRESS #1	: GASTON COUNTY DDS	MED REC#	: 000574-48-51
ADDRESS #2	: 991 W. HUDSON BLVD	ACCOUNT #	: C16111-00348
CITY	: GASTONIA	PHONE (H)	: (704)862-7588
CO/ST/ZIP	: GASTON NC 28052	PHONE (W)	:
		RACE	: AFRICAN AMERICAN
BIRTHDATE	: 10/27/1949	SEX	: MALE
SS #	: XXX-XX-0113	MARITAL STAT	: SINGLE
		ACCIDENT	:
		ACCIDENT DATE	:
ADMIT DX	: HYPOXIA/TACHYCARDIA/RESPIRATROY FAILURE		
WORKING DX	: POSS SEPSIS	PRI CARE MD	: HANGER,BARRY J
ADMIT MD	: CMC,MEDICINE F		
ATTEND MD	: CAKIR,BERIL		
REFER MD	: WEST,KATHRYN		
ER MD	: PELUCIO,MARIA T		
GUARANTOR	: ROBINSON,THOMAS ZZZZ	RELATIVE	: GREEN,AMANDA
ADDRESS #1	: GASTON COUNTY DDS	REL ADDRESS 1	:
ADDRESS #2	: 991 W. HUDSON BLVD	REL ADDRESS 2	:
CITY	: GASTONIA	REL CITY	: GASTONIA
ST/ZIP	: NC 28052	REL ST/ZIP	: NC 28052
PHONE (W)	:	REL PHONE (H)	: (704)862-7588
REL TO PT	: SELF	REL PHONE (W)	:
		REL TO PT	: LEGAL GUARDIAN
EMPLOYER	: RETIRED5555		
ADDRESS #1	:	CITY	:
ADDRESS #2	:	ST/ZIP	: XX 99999

INSURANCE 1

COMPANY	: ZURICH WORKER'S COMPENSATIO
GROUP #	: WC#2800074691
POL/SS #	: 280074691
INSURED	: BRADLEY,ALBERT
REL TO INS	: *PATIENT IS POLIC
MAIL TO	: ADJUSTER'S NAME VIVIAN HARD
ADDRESS #1	: PO BOX 66946
ADDRESS #2	:
CITY/ST/ZIP	: CHICAGO IL 606660946
PHONE	: (704)551-3468 EXT:
CLAIM #	:
APPROV/REF	: VERBAL AUTH
COMMENT	:

INSURANCE 2

COMPANY	: WK CMP Z COMP 1500
GROUP #	: WC#2800074691
POL/SS #	: 280074691
INSURED	: BRADLEY,ALBERT
REL TO INS	: *PATIENT IS POLIC
MAIL TO	: ADJUSTER'S NAME VIVIAN HARDIN,
ADDRESS #1	: PO BOX 66946
ADDRESS #2	:
CITY/ST/ZIP	: CHICAGO IL 606660946
PHONE	: (704)551-3468 EXT:
CLAIM #	:
APPROV/REF	:
COMMENT	:

INSURANCE 3

COMPANY	:
GROUP #	:
POL/SS #	:
INSURED	: ,
REL TO INS	:
	,
ADDRESS #1	:
ADDRESS #2	:
CITY/ST/ZIP	:
PHONE	: EXT:
CLAIM #	:
APPROV/REF	:
COMMENT	:

INSURANCE 4

COMPANY	:
GROUP #	:
POL/SS #	:
INSURED	: ,
REL TO INS	:
MAIL TO	: ,
ADDRESS #1	:
ADDRESS #2	:
CITY/ST/ZIP	:
PHONE	: EXT:
CLAIM #	:
APPROV/REF	:
COMMENT	:

Facility #: —

Date: May 21, 2016

Time: 03:30:34 ET

Aldersgate Units SNF

Weights and Vitals Summary

Resident: Bradley, Albert (00004805) Vital: Blood Sugar

Date	Value	Warnings	Struck Out Information

Bradley, Albert (00004805) Location: South 213 S Bed 1 Height: 74 DOA: 03/25/2016

Blood Sugar Summary

05/21/2016 00:55	104 mg/dL
05/20/2016 17:40	113 mg/dL
05/20/2016 12:26	122 mg/dL
05/20/2016 06:06	112 mg/dL
05/20/2016 00:05	117 mg/dL
05/19/2016 18:08	99 mg/dL
05/19/2016 13:08	137 mg/dL
05/19/2016 05:47	113 mg/dL
05/19/2016 00:40	119 mg/dL
05/18/2016 17:15	112 mg/dL
05/18/2016 13:14	140 mg/dL
05/18/2016 06:05	136 mg/dL
05/18/2016 00:54	146 mg/dL
05/17/2016 17:17	130 mg/dL
05/17/2016 11:49	109 mg/dL
05/17/2016 05:37	146 mg/dL
05/17/2016 00:18	131 mg/dL
05/16/2016 19:10	146 mg/dL
05/16/2016 13:18	113 mg/dL
05/16/2016 05:55	124 mg/dL
05/16/2016 00:32	122 mg/dL
05/15/2016 19:06	128 mg/dL
05/15/2016 11:37	120 mg/dL
05/15/2016 06:13	125 mg/dL
05/15/2016 00:26	139 mg/dL
05/14/2016 17:26	117 mg/dL
05/14/2016 12:47	121 mg/dL
05/14/2016 06:00	105 mg/dL
05/14/2016 00:45	114 mg/dL
05/13/2016 17:57	112 mg/dL
05/13/2016 12:32	98 mg/dL
05/13/2016 05:46	114 mg/dL
05/13/2016 00:08	119 mg/dL
05/12/2016 17:37	111 mg/dL

Only vitals with data are displayed

Can we reduce the frequency of ~~FSBS~~ Accuchecks? Results consistently WNL.

[illegible], FNP-C
5/23/16

Date: May 21, 2016

Time: 03:30:34 ET

Weights and Vitals Summary

esident: Bradley, Albert (00004805) Vital: Blood Sugar

Date	Value	Warnings	Struck Out Information
05/12/2016 11:47	115 mg/dL		
05/12/2016 05:48	124 mg/dL		
05/12/2016 01:22	115 mg/dL		
05/11/2016 19:04	113 mg/dL		
05/11/2016 11:50	128 mg/dL		
05/11/2016 01:46	120 mg/dL		
05/10/2016 17:39	122 mg/dL		
05/10/2016 12:22	147 mg/dL		
05/10/2016 06:42	114 mg/dL		
05/10/2016 00:25	130 mg/dL		
05/09/2016 18:09	127 mg/dL		
05/02/2016 18:03	156 mg/dL		
05/02/2016 13:22	116 mg/dL		
05/02/2016 05:03	152 mg/dL		
05/02/2016 00:41	148 mg/dL		
05/01/2016 17:15	140 mg/dL		
05/01/2016 12:14	149 mg/dL		
05/01/2016 05:22	157 mg/dL		
04/30/2016 23:55	129 mg/dL		
04/30/2016 17:05	117 mg/dL		
04/30/2016 12:21	145 mg/dL		
04/30/2016 06:21	167 mg/dL		
04/30/2016 00:16	157 mg/dL		
04/29/2016 19:13	143 mg/dL		
04/29/2016 12:44	137 mg/dL		
04/29/2016 05:43	146 mg/dL		
04/29/2016 00:41	131 mg/dL		
04/28/2016 17:21	178 mg/dL		
04/28/2016 12:29	160 mg/dL		
04/28/2016 05:11	179 mg/dL		
04/28/2016 00:06	119 mg/dL		
04/27/2016 19:18	157 mg/dL		
04/27/2016 11:14	144 mg/dL		
04/27/2016 05:34	134 mg/dL		
04/27/2016 00:31	147 mg/dL		

Only vitals with data are displayed

Focus	Goal	Interventions/Tasks	Position	Freq/Resolved
fluid deficit r/t tube feeding 5/25 Resident currently tolerating tube feeding regimen. Tolerating tube feeding regimen. Significant weight gain over past 1 week. See RD documentation on 5/31. 7/11/16 Currently tolerating tube feeding regimen. Lasix x 5 days initiated. See RD documentation on 7/11. Date Initiated: 04/05/2016 Revision on: 07/11/2016	symptoms of dehydration and maintain moist mucous membranes, good skin turgor. Date Initiated: 04/05/2016 Revision on: 07/11/2016 Target Date: 11/24/2016	effectiveness. Date Initiated: 04/05/2016 • Monitor vital signs as ordered and record. Notify MD of significant abnormalities. Date Initiated: 04/05/2016 Revision on: 08/26/2016 • Monitor/document/report PRN any s/sx of dehydration: decreased or no urine output, concentrated urine, strong odor, tenting skin, cracked lips, furrowed tongue, new onset confusion, dizziness on sitting/standing, increased pulse, headache, fatigue/weakness, dizziness, fever, thirst, recent/sudden weight loss, dry/sunken eyes. Date Initiated: 04/05/2016 • Obtain and monitor lab/diagnostic work as ordered. Report results to MD and follow up as indicated. Date Initiated: 04/05/2016 • Water Flushes as ordered. Date Initiated: 04/05/2016	RN CNA LPN RN CNA LPN RN LPN RN LPN RN	
• The resident requires tube feeding r/t dysphagia s/p traumatic brain injury Discussed tube feeding changes with guardian via phone on 5/18 and attempted to contact guardian on 5/20 re: tube feeding change. See RD documentation on 5/20. 5/25 Resident currently tolerating tube feeding regimen See RD documentation on 7/11 re: weight/edema. Continue with current POC.	• The resident will remain free of side effects or complications related to tube feeding through review date. Date Initiated: 04/01/2016 Revision on: 07/11/2016 Target Date: 11/24/2016 • The resident's insertion site will be free of s/sx of infection through the review date. Date Initiated: 04/01/2016 Revision on: 07/11/2016 Target Date: 11/24/2016	• Monitor/document/report PRN any s/sx of: Aspiration- fever, SOB, Tube dislodged, Infection at tube site, Self-extubation, Tube dysfunction or malfunction, Abnormal breath/lung sounds, Abnormal lab values, Abdominal pain, distension, tenderness, Constipation or fecal impaction, Diarrhea, Nausea/vomiting, Dehydration. Date Initiated: 04/01/2016 • Obtain and monitor lab/diagnostic work as ordered. Report results to MD and follow up as indicated. Date Initiated: 04/01/2016 • RD to evaluate quarterly and PRN. Monitor caloric intake, estimate needs. Make recommendations for changes to tube feeding as needed. Date Initiated: 04/01/2016 • The resident is dependent with tube feeding and water flushes. See MD orders for current feeding orders. Date Initiated: 04/01/2016	LPN RN LPN RN LPN RN LPN RN	

Allergies	Ceftin, Flomax, Prilosec	D.O.B.	10/27/1949	Physician	John P Gambino
Facility	Aldersgate UMRC- SNF				
Resident	Bradley, Albert (00004805)	Admission Date	03/25/2016	Location	South 213-S Bed 1

Focus	Goal	Interventions/Tasks	Position	Freq/Resolved
Revision on: 05/27/2016	Date Initiated: 05/27/2016 Revision on: 06/08/2016 Target Date: 11/24/2016	Date Initiated: 05/27/2016 • Follow facility policy and procedures for line listing, summarizing and reporting infections. Date Initiated: 05/27/2016 • Maintain universal precautions when providing resdient care. Date Initiated: 05/27/2016 • Monitor/document/report to MD PRN for s/sx of UTI: malaise, foul smelling urine, fever, nausea and vomiting, hematuria, cloudy urine, altered mental status, loss of appetite, behavioral changes. Date Initiated: 05/27/2016 Revision on: 05/27/2016 • Monitor/document/report to MD s/sx of delirium: Changes in behavior, Altered mental status, Periods of lethargy, Restlessness and agitation, Altered sleep cycle. Date Initiated: 05/27/2016 Revision on: 05/27/2016	RN LPN RN CNA LPN RN CNA LPN RN CNA LPN RN	
• The resident has UNS R sacrum pressure ulcer and potential for additional pressure ulcer development r/t immobility d/t Traumatic brain injury 4/8/16 I 3/25 UNS R sacrum 3x4cm wound care clinic pending 4/25/16 Currently in hospital 4/15/16 UNS R sacrum 2.5x3.3cm, tx: anasept, santyl, and mepilex QD and PRN 5/2/16 Return from hosp 4/26 stage III R sacrum 2x2.7x0.1cm Full thickness with 90% pink tissue 10% yellow slough, Stage II sacrum 1x1cm partial thickness, 100% pink, Stage II R ear 0.5x0.3, Stage II L ear 0.3x0.3cm 100% pink. To hosp 5/2/16	• The resident's will Pressure ulcer will show signs of healing and remain free from infection by/through review date. Date Initiated: 04/02/2016 Revision on: 06/08/2016 Target Date: 11/24/2016 • The resident will have intact skin, free of redness, blisters or discoloration by/through review date. Date Initiated: 04/02/2016 Revision on: 06/08/2016 Target Date: 11/24/2016	• Administer medications as ordered. Monitor/document for side effects and effectiveness. Date Initiated: 04/02/2016 • Administer treatments as ordered and monitor for effectiveness. Date Initiated: 04/02/2016 • Assess/record/monitor wound healing. Measure length, width and depth where possible. Assess and document status of wound perimeter, wound bed and healing progress. Report improvements and declines to the MD. Date Initiated: 04/02/2016 Revision on: 04/02/2016 • Avoid positioning the resident on R sacrum. Date Initiated: 04/02/2016 Revision on: 04/02/2016 • Follow facility policies/protocols for the prevention/treatment of skin breakdown. Date Initiated: 04/02/2016 • Inform the resident/family/caregivers of any new area of skin breakdown. Date Initiated: 04/02/2016 • LAL mattress, Heel lift boots Date Initiated: 04/09/2016	LPN RN LPN RN LPN RN CNA LPN RN CNA LPN RN LPN RN LPN RN	

Allergies	Ceftin, Flomax, Prilosec	D.O.B.	10/27/1949	Physician	John P Gambino
Facility	Aldersgate UMRC- SNF				
Resident	Bradley, Albert (00004805)	Admission Date	03/25/2016	Location	South 213-S Bed 1

Focus	Goal	Interventions/Tasks	Position	Freq/Resolved
8/26/16 Q1, No foley, remains incontinent. Date Initiated: 04/05/2016 Revision on: 08/26/2016	• The resident will be/remain free from catheter-related trauma through review date. Date Initiated: 04/05/2016 Revision on: 06/08/2016 Target Date: 11/24/2016	Revision on: 08/26/2016 • Monitor for s/sx of discomfort on urination and frequency. Date Initiated: 04/05/2016 • Monitor/document for pain/discomfort due to catheter. Date Initiated: 04/05/2016 • Monitor/record/report to MD for s/sx UTI: pain, burning, blood tinged urine, cloudiness, no output, deepening of urine color, increased pulse,increased temp, Urinary frequency, foul smelling urine, fever, chills, altered mental status, change in behavior, change in eating patterns. Date Initiated: 04/05/2016	RN LPN RN CNA LPN RN CNA LPN RN	
• The resident has bladder incontinence r/t persistent vegetative state Date Initiated: 08/26/2016 Revision on: 08/26/2016	• The resident will remain free from skin breakdown due to incontinence and brief use through the review date. Date Initiated: 08/26/2016 Target Date: 11/24/2016 • The resident's risk for septicemia will be minimized/prevented via prompt recognition and treatment of symptoms of UTI through the review date. Date Initiated: 08/26/2016 Target Date: 11/24/2016	• BRIEF USE: The resident uses disposable briefs. Change prn. Date Initiated: 08/26/2016 Revision on: 08/26/2016 • Clean peri-area with each incontinence episode. Date Initiated: 08/26/2016 • INCONTINENT: Check as required for incontinence. Wash, rinse and dry perineum. Change clothing PRN after incontinence episodes. Date Initiated: 08/26/2016 Revision on: 08/26/2016 • Monitor/document for s/sx UTI: pain, burning, blood tinged urine, cloudiness, no output, deepening of urine color, increased pulse,increased temp, Urinary frequency, foul smelling urine, fever, chills, altered mental status, change in behavior, change in eating patterns. Date Initiated: 08/26/2016	CNA LPN RN CNA LPN RN CNA LPN RN CNA LPN RN	

Allergies	Ceftin, Flomax, Prilosec	D.O.B.	10/27/1949	Physician	John P Gambino
Facility	Aldersgate UMRC- SNF				
Resident	Bradley, Albert (00004805)	Admission Date	03/25/2016	Location	South 213-S Bed 1

Carolinas HealthCare System

LM#23

Patient: BRADLEY, ALBERT
Gender: M
Patient Type: O
MRN: 3623932IDXMRN
Patient DOB: 10/27/1949
Report Date: 03/29/2016 13:53
Collection Date: 03/29/2016 06:01
Report: COMP MET PKG REF LAB W/GFR
Status: Final
Ordering Provider: XPSAA Client Bill

Test Name		Result	Units	Normal Range	Status
SODIUM		139	mmol/L	134-143	Final
POTASSIUM REF LAB		4.1	mmol/L	3.5-5.1	Final
CHLORIDE		105	mmol/L	98-107	Final
CO2		27	mmol/L	21-31	Final
ANION-GAP		7	mmol/L	3-15	Final
GLUCOSE	H	196	mg/dL	74-118	Final
BUN	H	26	mg/dL	7-25	Final
CREATININE		0.88	mg/dL	0.67-1.17	Final
Estimated GFR Non-African Amer		>59	mL/min/1.73_m2	>59	Final
Calculated GFR for Non-African American patients using IDMS-Traceable MDRD formula.					
Estimated GFR African American		>59	mL/min/1.73_m2	>59	Final
Calculated GFR for African American patients using IDMS-Traceable MDRD formula.					
ALBUMIN	L	3.3	g/dL	3.5-5.7	Final
TOTAL PROTEIN		7.5	g/dL	6.6-8.3	Final
BILIRUBIN	L	0.2	mg/dL	0.3-1.0	Final
ALKALINE PHOSPHATASE		57	[IU]/L	34-104	Final
AST(SGOT)		16	[IU]/L	13-39	Final
CALCIUM		9.1	mg/dL	8.6-10.3	Final
ALT(SGPT)		21	[IU]/L	7-52	Final

CB/10, FNP-C 3/30/16

Carolinas Laboratory Network
1000 Blythe Boulevard, Charlotte, NC 28203
Phone: 704-355-9350

Generated: 03/29/2016 15:54

HHH45

Carolinas HealthCare System

Patient: BRADLEY, ALBERT
Gender: M
Patient Type: O
MRN: 3623932IDXMRN
Patient DOB: 10/27/1949
Report Date: 03/29/2016 14:03
Collection Date: 03/29/2016 06:01
Report: VITAMIN B12
Status: Final
Ordering Provider: XPSAA Client Bill

Test Name		Result	Units	Normal Range	Status
VITAMIN B12	H	925	pg/mL	180-914	Final

[illegible], FNP-C
3/30/16

Carolinas Laboratory Network
1000 Blythe Boulevard, Charlotte, NC 28203
Phone: 704-355-9350

Generated: 03/29/2016 16:04

PHYSICIAN FACESHEET - PATIENT DEMOGRAPHICS UPDATED: 04/23/2016 1335

NAME : ROBINSON,THOMAS ZZZZ
PT. TYPE : IP
SERVICE : MED

\ Albert Bradley

ADDRESS #1 : GASTON COUNTY DDS
ADDRESS #2 : 991 W. HUDSON BLVD
CITY : GASTONIA
CO/ST/ZIP : GASTON NC 28052

BIRTHDATE : 10/27/1949
SS # : XXX-XX-0113

ADMIT DX : HYPOXIA/TACHYCARDIA/RESPIRATROY FAILURE
WORKING DX : POSS SEPSIS
ADMIT MD : CMC,MEDICINE F
ATTEND MD : CAKIR,BERIL
REFER MD : WEST,KATHRYN
ER MD : PELUCIO,MARIA T
GUARANTOR : ROBINSON,THOMAS ZZZZ
ADDRESS #1 : GASTON COUNTY DDS
ADDRESS #2 : 991 W. HUDSON BLVD
CITY : GASTONIA
ST/ZIP : NC 28052
PHONE (W) :
REL TO PT : SELF

EMPLOYER : RETIRED5555
ADDRESS #1 :
ADDRESS #2 :

ADM DATE/TIME: 04/20/2016 1500
DIS DATE :
LOCATION : TAC T103 01

MED REC# : 000574-48-51
ACCOUNT # : C16111-00348
PHONE (H) : (704)862-7588
PHONE (W) :
RACE : AFRICAN AMERICAN.

SEX : MALE
MARITAL STAT : SINGLE

ACCIDENT :
ACCIDENT DATE:
PRI CARE MD : HANGER,BARRY J

RELATIVE : GREEN,AMANDA
REL ADDRESS 1:
REL ADDRESS 2:
REL CITY : GASTONIA
REL ST/ZIP: NC 28052
REL PHONE (H): (704)862-7588
REL PHONE (W):
REL TO PT : LEGAL GUARDIAN

CITY :
ST/ZIP : XX 99999

INSURANCE 1
COMPANY : ZURICH WORKER'S COMPENSATIO
GROUP # : WC#2800074691
POL/SS # : 280074691
INSURED : BRADLEY,ALBERT
REL TO INS : *PATIENT IS POLIC
MAIL TO : ADJUSTER'S NAME VIVIAN HARD
ADDRESS #1 : PO BOX 66946
ADDRESS #2 :
CITY/ST/ZIP: CHICAGO IL 606660946
PHONE : (704)551-3468 EXT:
CLAIM # :
APPROV/REF : VERBAL AUTH
COMMENT :

INSURANCE 2
COMPANY : WK CMP Z COMP 1500
GROUP # : WC#2800074691
POL/SS # : 280074691
INSURED : BRADLEY,ALBERT
REL TO INS : *PATIENT IS POLIC
MAIL TO : ADJUSTER'S NAME VIVIAN HARDIN,
ADDRESS #1 : PO BOX 66946
ADDRESS #2 :
CITY/ST/ZIP : CHICAGO IL 606660946
PHONE : (704)551-3468 EXT:
CLAIM # :
APPROV/REF :
COMMENT :

INSURANCE 3
COMPANY :
GROUP # :
POL/SS # :
INSURED : ,
REL TO INS :
,
ADDRESS #1 :
ADDRESS #2 :
CITY/ST/ZIP:
PHONE : EXT:
CLAIM # :
APPROV/REF :
COMMENT :

INSURANCE 4
COMPANY :
GROUP # :
POL/SS # :
INSURED : ,
REL TO INS :
MAIL TO : ,
ADDRESS #1 :
ADDRESS #2 :
CITY/ST/ZIP :
PHONE : EXT:
CLAIM # :
APPROV/REF :
COMMENT :

Facility #: --

Date: May 21, 2016

Time: 03:30:34 ET

Aldergate [illegible]

Weights and Vitals Summary

Resident: Bradley, Albert (00004805) Vital: Blood Sugar

Date	Value	Warnings	Struck Out Information

Bradley, Albert (00004805) Location: South 213-S Bed 1 Height: 74 DOA: 03/25/2016

Blood Sugar Summary

05/21/2016 00:55	104 mg/dL
05/20/2016 17:40	113 mg/dL
05/20/2016 12:26	122 mg/dL
05/20/2016 06:06	112 mg/dL
05/20/2016 00:05	117 mg/dL
05/19/2016 18:08	99 mg/dL
05/19/2016 13:08	137 mg/dL
05/19/2016 05:47	113 mg/dL
05/19/2016 00:40	119 mg/dL
05/18/2016 17:15	112 mg/dL
05/18/2016 13:14	140 mg/dL
05/18/2016 06:05	136 mg/dL
05/18/2016 00:54	146 mg/dL
05/17/2016 17:17	130 mg/dL
05/17/2016 11:49	109 mg/dL
05/17/2016 05:37	146 mg/dL
05/17/2016 00:18	131 mg/dL
05/16/2016 19:10	146 mg/dL
05/16/2016 13:18	113 mg/dL
05/16/2016 05:55	124 mg/dL
05/16/2016 00:32	122 mg/dL
05/15/2016 19:06	128 mg/dL
05/15/2016 11:37	120 mg/dL
05/15/2016 06:13	125 mg/dL
05/15/2016 00:26	139 mg/dL
05/14/2016 17:26	117 mg/dL
05/14/2016 12:47	121 mg/dL
05/14/2016 06:00	105 mg/dL
05/14/2016 00:45	114 mg/dL
05/13/2016 17:57	112 mg/dL
05/13/2016 12:32	98 mg/dL
05/13/2016 05:46	114 mg/dL
05/13/2016 00:08	119 mg/dL
05/12/2016 17:37	111 mg/dL

Only vitals with data are displayed

Can we reduce the frequency of ~~FSBS~~ Accuchecks? Results consistently WNL.

[illegible], FNP-C
5/23/16

Date: May 21, 2016

Time: 03:30:34 ET

Weights and Vitals Summary

esident: Bradley, Albert (00004805) Vital: Blood Sugar

Date	Value	Warnings	Struck Out Information
05/12/2016 11:47	115 mg/dL		
05/12/2016 05:48	124 mg/dL		
05/12/2016 01:22	115 mg/dL		
05/11/2016 19:04	113 mg/dL		
05/11/2016 11:50	128 mg/dL		
05/11/2016 01:46	120 mg/dL		
05/10/2016 17:39	122 mg/dL		
05/10/2016 12:22	147 mg/dL		
05/10/2016 06:42	114 mg/dL		
05/10/2016 00:25	130 mg/dL		
05/09/2016 18:09	127 mg/dL		
05/02/2016 18:03	156 mg/dL		
05/02/2016 13:22	116 mg/dL		
05/02/2016 05:03	152 mg/dL		
05/02/2016 00:41	148 mg/dL		
05/01/2016 17:15	140 mg/dL		
05/01/2016 12:14	149 mg/dL		
05/01/2016 05:22	157 mg/dL		
04/30/2016 23:55	129 mg/dL		
04/30/2016 17:05	117 mg/dL		
04/30/2016 12:21	145 mg/dL		
04/30/2016 06:21	167 mg/dL		
04/30/2016 00:16	157 mg/dL		
04/29/2016 19:13	143 mg/dL		
04/29/2016 12:44	137 mg/dL		
04/29/2016 05:43	146 mg/dL		
04/29/2016 00:41	131 mg/dL		
04/28/2016 17:21	178 mg/dL		
04/28/2016 12:29	160 mg/dL		
04/28/2016 05:11	179 mg/dL		
04/28/2016 00:06	119 mg/dL		
04/27/2016 19:18	157 mg/dL		
04/27/2016 11:14	144 mg/dL		
04/27/2016 05:34	134 mg/dL		
04/27/2016 00:31	147 mg/dL		

Only vitals with data are displayed

Carolinas HealthCare System

LMH#213

Patient: BRADLEY, ALBERT
Gender: M
Patient Type: O
MRN: 3623932IDXMRN
Patient DOB: 10/27/1949
Report Date: 03/29/2016 13:53
Collection Date: 03/29/2016 06:01
Report: COMP MET PKG REF LAB W/GFR
Status: Final
Ordering Provider: XPSAA Client Bill

Test Name		Result	Units	Normal Range	Status
SODIUM		139	mmol/L	134-143	Final
POTASSIUM REF LAB		4.1	mmol/L	3.5-5.1	Final
CHLORIDE		105	mmol/L	98-107	Final
CO2		27	mmol/L	21-31	Final
ANION-GAP		7	mmol/L	3-15	Final
GLUCOSE	H	196	mg/dL	74-118	Final
BUN	H	26	mg/dL	7-25	Final
CREATININE		0.88	mg/dL	0.67-1.17	Final
Estimated GFR Non-African Amer		>59	mL/min/1.73_m2	>59	Final
Calculated GFR for Non-African American patients using IDMS-Traceable MDRD formula.					
Estimated GFR African American		>59	mL/min/1.73_m2	>59	Final
Calculated GFR for African American patients using IDMS-Traceable MDRD formula.					
ALBUMIN	L	3.3	g/dL	3.5-5.7	Final
TOTAL PROTEIN		7.5	g/dL	6.6-8.3	Final
BILIRUBIN	L	0.2	mg/dL	0.3-1.0	Final
ALKALINE PHOSPHATASE		57	[IU]/L	34-104	Final
AST(SGOT)		16	[IU]/L	13-39	Final
CALCIUM		9.1	mg/dL	8.6-10.3	Final
ALT(SGPT)		21	[IU]/L	7-52	Final

OB/10, FNP-C 3/30/16

Carolinas Laboratory Network
1000 Blythe Boulevard, Charlotte, NC 28203
Phone: 704-355-9350

Generated: 03/29/2016 15:54

Hand delivered CB

Christine W. Bradley
475 Lower Lee School Road
Mayesville, S.C. 29104
November 20, 2018

To: Alan Watkins
P.O. Box 309
Bishopville, S.C. 29010

Reference: Albert Bradley
Lee County Employee

Dear Mr. Alan,

On several occasions I have tried to review my husband's personnel file and my ability to do this was denied each time. As you know my husband died last year and I still do not know what benefits that he was entitle to or his insurance coverages that is due to his family.

Once again, I'm requesting to review my husband entire employee files. Please let me know when I can move onward with this matter.

Sincerely,

Christine W. Bradley, spouse

October 9, 2017

Lavare Seltun
4324 Stone Mountain Dr.
Gastonia, NC 28054

Commissioner T. Scott Beck
SC Workers' Compensation Commission
1333 Main St., Suite 500
Columbia, SC 29202-1715

Re: Albert Bradley, claimant

Dear Commissioner Beck:

This letter is to acknowledge that I am in receipt of some documents. However, the documents received do not cover the entire period of Albert Bradley's claim. Full financial disclosures and financial records are not included for the claimant. All medical records are not included to include the claimant's name listed under all aliases and all locations where the claimant received treatment from the period of March 15, 2016 to present. All documents pertaining to guardianship hearings for the claimant are not included in the file. Decisions and orders regarding guardianship hearings are needed to verify the status of guardians/guardian ad litem for the claimant's entire claim period. Christine Bradley requests guardianship documents pertaining to her husband, Albert Bradley, which were said to be in order and were executed during the claim period by the following parties: Jason Lockhart/Zurich Insurance; Victoria Lichtenberger, and Stephanie Stevenson/Tereasa Osborne, Gaston County DSS. Thank you very much for your assistance.

Sincerely,

Lavare Seltun

Lavare Seltun

Cc: Gary Cannon, Keith Roberts, Jason Lockhart, Christine Bradley, Derwin Bradley, Christy James

CB Hand-delivered

November 29, 2017

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Commissioner T. Scott Beck
1333 Main St., Suite 500
P.O. Box 1715
Columbia, SC 29201

Dear Commissioner Beck:

I am writing to you to request that you please clarify and provide all legal documents that were submitted at the said pre-hearing briefing to include APA submissions. The family of Albert Bradley is unaware of any prior hearing pertaining to the above. Also, I requested at the last attempted hearing all medical reports, all hospital visits, all facility stays, healthcare professionals including physicians, nurses, nursing assistants, and others involved in the care of my husband Albert Bradley from March 17, 2016 until present. I requested the complete medical file which should also include all lab reports, exams including x-rays, and medications administered from all hospitals and facilities held. Please provide the requested guardianship documentation of all individuals claiming to have guardianship over Albert Bradley to include court dates, times, and reasons for such hearings. Please include why family was not informed of hearing on the matter. If notification was sent, please provide the documentation to support such.

The Fifth and Fourteenth Amendments of the U.S. Constitution state each individual has a right to due process of law. Therefore, the vulnerable and incapacitated Albert Bradley must have legal representation at all times. I asked the court to appoint Albert Bradley legal counsel, and I also requested the above documents. I have yet to receive the documents I requested, and I have not been notified of legal counsel being provided for my husband, Albert Bradley.

Lastly, there were several individuals claiming to be Albert Bradley's guardian: Jason Lockhart/Zurich Insurance Co.; Tereasa Osborne, Gaston County DSS Attorney; Stephanie Stevenson, Gaston County DSS Social Worker; and Victoria Lichtenberger, ElderSource, Charlotte, NC. Again, please provide the supporting documentation to substantiate their position. Thank you for your assistance.

Sincerely,

Christine W. Bradley

Cc: Jason Lockhart, Gary Cannon, Keith Roberts

What does the SC workers' compensation law state regarding workers who suffer catastrophic injuries resulting in total disability and incapacitation which occurred from a work-related injury?

Section 42-9-5(C)(D); Section 42-15-60

Albert Bradley sustained a severe brain injury and several other injuries such as such severe tongue and facial/jaw laceration and inhalation of metal fragments into lung tissue while working for Southern Industrial Constructors of Columbia, SC on May 16, 2011. These injuries left him totally incapacitated. Albert Bradley was deemed permanently and totally disabled because of these injuries by the SC Workers' Compensation Commission (Commissioner T. Scott Beck). He received the maximum weekly benefits allowable under the law.

Attorney Jason Lockhart argues that Albert Bradley died of diffuse acute bronchopneumonia in his submission. What is that? Please provide the official signed medical documentation from the medical provider who diagnosed Albert Bradley with this condition as his cause of death.

What does the law state regarding the appointment of a guardian for an injured worker? What decision-making is factored in to the appointment of a Guardian/Guardian ad litem for an injured worker? What is the role of the appointed Guardian ad litem in relationship to the injured worker (i.e. healthcare, finances, collaboration with other family members)? What does the law state about family members as guardian? What is a guardian? What is Guardian ad litem? Does this law apply in this case? If so, how?

Section 42-15-55; Chapter 67-216

Albert Bradley died in the hands of the court-appointed Guardian ad litem Victoria Lichtenberger who owns and operates an agency that receives federal funds from the government and who is affiliated with and collaborated with the Gaston County DSS/DHHS/Tereasa Osborne, Stephanie Stevenson. He had several hospital admissions while in the custody of Victoria Lichtenberger and Gaston County DSS. No family members were present at the time of appointment of guardianship for Albert Bradley which denied Albert Bradley, and his family their rights to be present, to be heard, and to be represented. Family members were not provided any documentation regarding Albert Bradley's health condition, his hospital visits, multiple tests performed, autopsy results, and toxicology screen, while in the custody of Victoria Lichtenberger and Gaston County DSS/DHHS/Tereasa Osborne, Stephanie Stevenson. Family members had very limited contact with Albert Bradley from 3/17/2016 to 2/05/2017.

What does the law state regarding appointment of an attorney for an individual who is not represented at a hearing?

Chapter 67-216

It was stated in the hearing that Victoria Lichtenberger is Albert Bradley's Guardian ad litem yet the claimant was without legal representation at the hearing which was held on December 6, 2017.

What is a dependency investigation?

Chapter 67-902

There was no good faith effort to conduct any dependency investigation as it was communicated to the commissioner that if in fact if there was such an investigation to be held, it was to be done in the Commissioner's presence in court. (See the attached letter). Also, there is documentation about good faith made to conduct a dependency investigation with all family members. However, there is no documentation of any communication with Christy James. Where is the proof of the letters that Tuten sent to all three of the children to include the date and time stamp?

Several requests were made for all medical records, guardianship court orders and all orders, financial statements, and the entire the SC Workers' Compensation Commission file pertaining to Albert Bradley for his entire claim period. These documents still have not been received to this date.

What does the law state about payment of benefits for the injured worker who had coverage for himself and his spouse? How did you calculate the benefits to paid?

Chapter 67-902

A good faith effort must be made to identify all beneficiaries of the claimant. Albert Bradley was employed by Southern Industrial Constructors of Columbia, SC until the time of his death. Who are his beneficiaries listed with his employer? Did Albert Bradley have any of his children listed as beneficiaries through his employer?

Chapter 67-902

Albert Bradley had benefits for his spouse through his employer that should have been paid from the time of his accident. Where are those benefits?

42-15-60

As previously documented to the SC Workers' Compensation Commission and Commissioner T. Scott Beck, Albert Bradley has medical bills that are the responsibility of Southern Industrial/Zurich Insurance. The Estate of Albert Bradley will not be responsible for any bills that have mounted up and have remained unpaid by the carrier, Zurich Insurance/Victoria Lichtenberger/Gaston County DSS/Tereasa Osborne, Stephanie Stevenson.

APA submissions provided to court by Attorney Jason Lockhart and used as evidence were not provided to Christine Bradley, Derwin Bradley, Lavare Seltun, and Christy James. The dependents of Albert Bradley have not received any legal documents with supporting evidence.

QUALITY MOBILE X-RAY

470 Hanes Mill Rd, Suite 107,
Winston-Salem, North Carolina 27105

Radiology Report
Phones: 336.724.9600
Fax: 1.800.840.4241

Patient Name	Date of Birth	Facility
BRADLEY ALBERT	10/27/1949	ASBURY 213

Referring Physician	Faxed To
PIERCE	7045325432

View Requested
74010 KUB AP, Oblique, Cone

Indication	Date
2 VOMITING	5/11/2016

Exam Date	Report Date
5/11/2016	5/11/2016

Accession: 426719

Examination: ABDOMEN

Clinical Indication: Vomiting.

Comparison: None.

Technique: Abdomen, two views.

Findings: Copious amounts of bowel gas without significant small bowel loop dilatation. No obvious organomegaly or particularly suspicious calcifications. No obviously abnormally prominent colorectal stool volume.

Impression: Nonspecific, but nonobstructive appearing bowel gas pattern. Correlate clinically for possible ileus or enteritis type process. Continued follow-up suggested.

Full report above

Please note, because not all fractures, especially those in the hips, show up on the initial films, repeat films in a few days are strongly advised if patient symptoms continue or worsen.

Electronically Signed by:

Christopher Tharrington, M.D.
ELECTRONICALLY SIGNED
5/11/2016 13:21

Tech: DREMA

(Continued to next page)

Transcribed by: SUBSCO
Reviewed by: TM

Attention! The Protected Health Information contained in this fax is highly confidential. It is intended for exclusive use by the Facility named above, and its designees. Unauthorized use is a violation of Federal Law (HIPAA), and will be reported as such. If you have received this fax in error, please destroy.

FNP-C
5/11/16

Carolinas HealthCare System

Patient: BRADLEY, ALBERT
Gender: M
Patient Type: O
MRN: 3623932IDXMRN
Patient DOB: 10/27/1949
Report Date: 07/05/2016 13:53
Collection Date: 07/05/2016 08:00
Report: BASIC MET PKG REF LAB W/GFR
Status: Final
Ordering Provider: XPSAA Client Bill

Test Name		Result	Units	Normal Range	Status
SODIUM		134	mmol/L	134-143	Final
POTASSIUM REF LAB		4.6	mmol/L	3.5-5.1	Final
SLIGHT HEMOLYSIS					
CHLORIDE		100	mmol/L	98-107	Final
CO2		24	mmol/L	21-31	Final
ANION-GAP		10	mmol/L	3-15	Final
GLUCOSE	H	186	mg/dL	74-118	Final
BUN		18	mg/dL	7-25	Final
CREATININE		0.83	mg/dL	0.67-1.17	Final
Estimated GFR Non-African Amer		>59	mL/min/1.73_m2	>59	Final
Calculated GFR for Non-African American patients using IDMS-Traceable MDRD formula.					
Estimated GFR African American		>59	mL/min/1.73_m2	>59	Final
Calculated GFR for African American patients using IDMS-Traceable MDRD formula.					
CALCIUM		8.9	mg/dL	8.6-10.3	Final

Blythe, FNP-C
7/6/16

Carolinas Laboratory Network
1000 Blythe Boulevard, Charlotte, NC 28203
Phone: 704-355-9350

Charlotte, NC, 28215-3220

Ordered By: Joseph Pierce J
National Provider ID #1952362832
4692 Brownsboro Road
Winston Salem, NC, 27106
(336) 251-1114

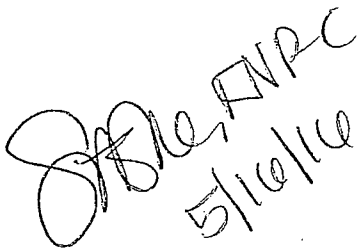
Resident: Bradley, Albert (00004805)

Location: South 213-S Bed 1

To: Prescriber

Joseph Pierce J
4692 Brownsboro Road
Winston Salem, NC, 27106

Created Date	05/16/2016 06:04
Communication Method:	Verbal
Order Summary:	Warfarin Sodium Tablet 4 MG Give 2 tablet via G-Tube in the evening for per order
HOLD Hold Date / Reason:	05/16/2016 06:01 - 05/18/2016 05:59 INR 5.5, PT 65.7 D/C LOVENOX, HOLD COUMADIN UNTIL WEDNESDAY MORNING AFTER RECHECKING PT/INR. CALL ONCALL TO CONFIRM THAT WE ARE TO CONTINUE SAME DOSAGE.
Confirmed By:	Felicia Dorgham (Licensed Practical Nurse)



Ordered By Signature: _____

Signed Date: _____

QUALITY MOBILE X-RAY

470 Hanes Mill Rd, Suite 107,
Winston-Salem, North Carolina 27105

Radiology Report
Phones: 336.724.9600
Fax: 1.800.840.4241

Patient Name	Date of Birth	Facility
ALBERT BRADLEY	10/27/1949	ASBURY 213
Referring Physician	**Faxed To**	
PIERCE	7045325432	
View Requested		
71010 Chest 1V		
Indication	**Date**	
1 COUGH CONGESTION	5/10/2016	
Exam Date	**Report Date**	
5/10/2016	5/10/2016	

Accession: 426576

Examination: CHEST

Clinical Indication: Cough and congestion.

Comparison: None.

Technique: Chest, single view.

Findings: Study reported limited by patient`s clinical status and cooperative capability. Shallow pulmonary inflation with lungs grossly clear of consolidation or visible effusion. Borderline-to-minimal cardiomegaly without definite pulmonary vascular redistribution. Elevated right hemidiaphragm.

called to Heather Yates
& new orders given.
noted by Ivo 5/10/16
3-71

Impression:

1. Cardiomegaly without overt congestive heart failure.
2. No focal pneumonia.

Full report above

(Continued in next page)

Attention! The Protected Health Information contained in this FAX is highly confidential. It is intended for exclusive use by the Facility named above, and its designees. Unauthorized use is a violation of Federal Law (HIPAA), and will be reported as such. If you have received this fax in error, please destroy.

FNP-C
5/11/16

QUALITY MOBILE X-RAY

470 Hanes Mill Rd, Suite 107,
Winston-Salem, North Carolina 27105

Radiology Report

Phones: 336.724.9600
Fax: 1.800.840.4241

Patient Name	Date of Birth	Facility
BRADLEY ALBERT	10/27/1949	ASBURY 213

Referring Physician	Faxed To
PIERCE	7045325432

View Requested

74010 KUB AP, Oblique, Cone

Indication	Date
2 VOMITING	5/11/2016

Exam Date	Report Date
5/11/2016	5/11/2016

Accession: 426719

Examination: ABDOMEN

Clinical Indication: Vomiting.

Comparison: None.

Technique: Abdomen, two views.

Findings: Copious amounts of bowel gas without significant small bowel loop dilatation. No obvious organomegaly or particularly suspicious calcifications. No obviously abnormally prominent colorectal stool volume.

Impression: Nonspecific, but nonobstructive appearing bowel gas pattern. Correlate clinically for possible ileus or enteritis type process. Continued follow-up suggested.

Full report above

Please note, because not all fractures, especially those in the hips, show up on the initial films, repeat films in a few days are strongly advised if patient symptoms continue or worsen.

(Continued in next page)

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John H. Moore, III, M.D.
Thomas J. Gavigan, M.D.
James L. Toussaint, M.D.
David G. Scholz, M.D.
Sam R. Fulp, M.D.
Dennis D. Kokenes, M.D.
Gardiner Roddey, M.D.
Steven A. Josephson, M.D.
Robert J. Schmitz, M.D.
Scott A. Brotze, M.D.
Simon Prendiville, M.D.
Sanjib P. Mohanty, M.D.
Michael W. Ryan, M.D.
Jason A. Wilson, M.D.
Jeffrey S. Zaidman, M.D.
Ashish D. Thekdi, M.D.
Nicole R. Cullen, M.D.
Atul Khanna, M.D.
Devi Thangavelu, M.D.
Ruth Jameson, FNP-C
Michelle Moulton, FNP-C
Marcie Pickett, ANP
Aimee Lawson, PA-C
Colleen Wisnosky, PA-C
Chris Maambo, PA-C
Erica DaCosta, PA-C

Kathy J. Sammis, CEO

All Locations (704) 377-4009

Appointments (704) 377-0246

Charlotte
2015 Randolph Rd., Ste. 208
Charlotte, NC 28207-1200
(704) 377-7406 Fax

Matthews
Matthews Township Office Park
1340 Matthews Township Pkwy.
Suite 301
Matthews, NC 28105
(704) 844-2679 Fax

Ballantyne
Ballantyne Medical Two
15830 Ballantyne Medical Place
(formerly John J. Delaney Dr.)
Suite 175
Charlotte, NC 28277
(704) 543-3198 Fax

Huntersville
The Park
13808 Professional Center Dr.
Huntersville, NC 28078
(704) 892-6638 Fax

Mooresville
Fairview Center
150 Fairview Rd., Ste. 120
Mooresville, NC 28117
(704) 235-2899 Fax

www.charlottegastro.com

CHARLOTTE GASTROENTEROLOGY & HEPATOLOGY, P.L.L.C.

Appointment Date: 8·10·16

Time: 9:45am

Location: Randolph

We are delighted to welcome you to Charlotte Gastroenterology & Hepatology.

Dr. _____ has referred you to see Dr. Paul

for your gastrointestinal evaluation and treatment. Please read and complete the enclosed information packet. Be sure to bring the completed forms with you at the time of your appointment.

IF YOU ARE UNABLE TO KEEP THIS RESERVED APPOINTMENT NOTIFY OUR APPOINTMENT LINE 704-377-0246 AT LEAST 48 HOURS IN ADVANCE SO THAT WE MAY OFFER THE APPOINTMENT TIME TO ANOTHER PATIENT.

If your insurance requires authorization, be sure your referring doctor has provided that information to our office. If we have not received your referral you will be required to pay at the time of your visit. We ask you to provide us with your insurance cards at the time of each visit. Please be aware that insurance companies are always changing and we may no longer participate with your insurance. Please verify with your insurance company prior to your visit.

We look forward to your visit and appreciate the opportunity to participate in your care. Should you have any questions or concerns, please do not hesitate to contact us.

Sincerely, Kathy

OFFICE CONSULT ONLY

Carolina Urology Partners

PO Box 2369
Huntersville, NC 28070

1 / 2

STATEMENT DATE	02/17/17
ACCOUNT NUMBER	83575
PAYMENT DUE DATE	Due Upon Receipt
PAY THIS AMOUNT	$140.42

Billing Questions? Call (888) 718-8827

Albert Bradley
864 HAWLEY AVE UNIT 222
BELMONT, NC 28012-3497

000061

STATEMENT - Carolina Urology Partners

DATE	DESCRIPTION	AMOUNT	INSURANCE BALANCE	PATIENT BALANCE
02/09/16	ENCOUNTER 576181 FOR BRADLEY WITH WATERHOUSE JR MD, ROBERT L	130.00		39.53
02/09/16	99213 - OFFICE OR OTHER OUTPATIENT VISIT LVL 3	0.00		
02/18/16	MEDICARE PAYMENT (PR1 (DEDUCTIBLE AMOUNT))	-59.71		
02/18/16	MEDICARE ADJUSTMENT (PR1 (DEDUCTIBLE AMOUNT))	-30.76		
07/26/16	BCBS PAYMENT	0.00		
07/26/16	BCBS ADJUSTMENT	39.53	0.00	39.53
	ENCOUNTER TOTAL			
02/17/16	ENCOUNTER 581635 FOR BRADLEY WITH WATERHOUSE JR MD, ROBERT L	195.00		72.32
02/17/16	99214 - OFFICE OR OTHER OUTPATIENT VISIT LVL 4	-6.29		
03/07/16	MEDICARE PAYMENT (PR1 (DEDUCTIBLE AMOUNT))	-91.39		
03/07/16	MEDICARE ADJUSTMENT (PR1 (DEDUCTIBLE AMOUNT))	0.00		
03/22/16	BCBS PAYMENT	-25.00		
07/22/16	PATIENT CHECK PAYMENT	46.00		3.57
02/17/16	51798 - BLADDER ULTRASOUND/ PVR	-28.43		
03/07/16	MEDICARE ADJUSTMENT	-14.00		
03/07/16	MEDICARE PAYMENT	0.00		
03/22/16	BCBS PAYMENT	6.00		
02/17/16	81003 - URNLS DIP STICK/TABLET RGNT AUTO	-3.00		
03/07/16	MEDICARE PAYMENT	-3.00		
03/07/16	MEDICARE ADJUSTMENT			

If paying by check, please include your account number on the checks memo line

Current	Over 30 Days	Over 60 Days	Over 90 Days	Over 121 Days	Total Amount Due
$0.00	$0.00	$0.00	$0.00	$140.42	$140.42

PLEASE DETACH AT THE PERFORATION AND MAIL THIS PORTION WITH YOUR PAYMENT

☐ Please check box if above address is incorrect or if insurance information has changed and indicate change(s) on reverse.

☐ VISA ☐ MASTERCARD ☐ DISCOVER ☐ AMEX

CARD NUMBER	3 DIGIT CODE	AMOUNT PAID
SIGNATURE		EXP. DATE
NAME		STATEMENT ID
Albert Bradley		53463740
AMOUNT DUE	ACCOUNT NUMBER	PAYMENT DUE DATE
$140.42	83575	Due Upon Receipt

To make your payment online, please visit www.carolinaurology.com and click Online Bill Pay

Please remit payments to:

Carolina Urology Partners
PO Box 2369
Huntersville, NC 28070

May 1, 2019

Christine Bradley (Albert Bradley), Pro Se
475 Lower Lee School Rd.
Mayesville, SC 29104

RECEIVED
MAY 01 2019
SC Court of Appeals

Re: SC Court of Appeals, Case No: 2018001535

Dear Attorney Helen Hiser:

First, it is important that I remind you that I am Pro Se in this matter. Therefore, I kindly request that you address me as such pertaining to all matters in this appeal. In response to your motion, please review all the correspondence I sent to the court and copied to respective respondents. The files and documents that I have requested have been requested on multiple occasions, and I am still not in receipt of all files by all parties who were involved in the case of Albert Bradley. Decision and Order made by the Commission on December 6, 2017 was requested for review by me, and subsequently went before the Commission Review panel for full review on May 21, 2018. Please see the attached findings of fact which highlight the reason for review and my request for appeal by the SC Court of Appeals. Therefore, my request for subpoenas from the Appellate Court and for hearing before the court are justified, as parties fail to provide me with all files and documentation needed for further investigation into this case. Also, please note my right to appeal per Rule 201 (a)(b) and right for subpoenas, 413.0-Rule 15, Oaths, Subpoena Power, (a)(b)(c)(d)(e) and (f).

Sincerely,

Christine Bradley

Christine Bradley, Pro Se (Albert Bradley)

Cc: Chief Judge James E. Lockemy

RECEIVED
MAY 01 2019
SC WORKERS' COMPENSATION

Kathryn Spence

(1)

What does the SC workers' compensation law state regarding workers who suffer catastrophic injuries resulting in total disability and incapacitation which occurred from a work-related injury?

Section 42-9-5(C)(D); Section 42-15-60

RECEIVED
MAY 01 2019
SC Court of Appeal

Albert Bradley sustained a severe brain injury and several other injuries such as such severe tongue and facial/jaw laceration and inhalation of metal fragments into lung tissue while working for Southern Industrial Constructors of Columbia, SC on May 16, 2011. These injuries left him totally incapacitated. Albert Bradley was deemed permanently and totally disabled because of these injuries by the SC Workers' Compensation Commission (Commissioner T. Scott Beck). He received the maximum weekly benefits allowable under the law.

Attorney Jason Lockhart argues that Albert Bradley died of diffuse acute bronchopneumonia in his submission. What is that? Please provide the official signed medical documentation from the medical provider who diagnosed Albert Bradley with this condition as his cause of death.

What does the law state regarding the appointment of a guardian for an injured worker? What decision-making is factored in to the appointment of a Guardian/Guardian ad litem for an injured worker? What is the role of the appointed Guardian ad litem in relationship to the injured worker (i.e. healthcare, finances, collaboration with other family members)? What does the law state about family members as guardian? What is a guardian? What is Guardian ad litem? Does this law apply in this case? If so, how?

Section 42-15-55; Chapter 67-216

Albert Bradley died in the hands of the court-appointed Guardian ad litem Victoria Lichtenberger who owns and operates an agency that receives federal funds from the government and who is affiliated with and collaborated with the Gaston County DSS/DHHS/Tereasa Osborne, Stephanie Stevenson. He had several hospital admissions while in the custody of Victoria Lichtenberger and Gaston County DSS. No family members were present at the time of appointment of guardianship for Albert Bradley which denied Albert Bradley, and his family their rights to be present, to be heard, and to be represented. Family members were not provided any documentation regarding Albert Bradley's health condition, his hospital visits, multiple tests performed, autopsy results, and toxicology screen, while in the custody of Victoria Lichtenberger and Gaston County DSS/DHHS/Tereasa Osborne, Stephanie Stevenson. Family members had very limited contact with Albert Bradley from 3/17/2016 to 2/05/2017.

RECEIVED
MAY 01 2019
SC WORKERS' COMPENSATION

What does the law state regarding appointment of an attorney for an individual who is not represented at a hearing?

Chapter 67-216

It was stated in the hearing that Victoria Lichtenberger is Albert Bradley's Guardian ad litem yet the claimant was without legal representation at the hearing which was held on December 6, 2017.

KS

(8)

What is a dependency investigation?

Chapter 67-902

There was no good faith effort to conduct any dependency investigation as it was communicated to the commissioner that if in fact if there was such an investigation to be held, it was to be done in the Commissioner's presence in court. (See the attached letter). Also, there is documentation about good faith made to conduct a dependency investigation with all family members. However, there is no documentation of any communication with Christy James. Where is the proof of the letters that Tuten sent to all three of the children to include the date and time stamp?

Several requests were made for all medical records, guardianship court orders and all orders, financial statements, and the entire the SC Workers' Compensation Commission file pertaining to Albert Bradley for his entire claim period. These documents still have not been received to this date.

What does the law state about payment of benefits for the injured worker who had coverage for himself and his spouse? How did you calculate the benefits to paid?

Chapter 67-902

A good faith effort must be made to identify all beneficiaries of the claimant. Albert Bradley was employed by Southern Industrial Constructors of Columbia, SC until the time of his death. Who are his beneficiaries listed with his employer? Did Albert Bradley have any of his children listed as beneficiaries through his employer?

Chapter 67-902

Albert Bradley had benefits for his spouse through his employer that should have been paid from the time of his accident. Where are those benefits?

42-15-60

As previously documented to the SC Workers' Compensation Commission and Commissioner T. Scott Beck, Albert Bradley has medical bills that are the responsibility of Southern Industrial/Zurich Insurance. The Estate of Albert Bradley will not be responsible for any bills that have mounted up and have remained unpaid by the carrier, Zurich Insurance/Victoria Lichtenberger/Gaston County DSS/Tereasa Osborne, Stephanie Stevenson.

RECEIVED
MAY 01 2019
SC WORKERS' COMPENSATION

KS

APA submissions provided to court by Attorney Jason Lockhart and used as evidence were not provided to Christine Bradley, Derwin Bradley, Lavare Seltun, and Christy James. The dependents of Albert Bradley have not received any legal documents with supporting evidence.

KS

January 17, 2019

Christine Bradley, Ex Parte (Albert Bradley) (Bradley v. Southern Industrial Contructors)
475 Lower Lee School Rd.
Mayesville, SC 29104

Creel Reporting, Inc.
1230 Richland St.
Columbia, SC 29201

Re: Appellate Case No. 2018-001535

To Whom It May Concern:

I am writing this letter to again request the entire transcript(s) pertaining to the case of Albert Bradley v. Southern Industrial Constructors, Inc. Initial request was made on September 7, 2018 via letter along with payment in the amount of 176.00 to Creel Reporting, Inc. As of this date, I still have not received copies of the transcript as requested. Thank you for your assistance.

Sincerely,

Christine Bradley, Ex Parte (Albert Bradley)

Cc: Jason Lockhart, Helen Hiser, SCWCC

January 17, 2019

Jenny Abbott Kitchings, Clerk
V. Claire Allen, Deputy Clerk
1220 Senate St.
Columbia, SC 29201

Re: Christine Bradley, Ex Parte, Appellant (Albert Bradley v. Southern Industrial Constructors, Zurich American Insurance Company, % Zurich North America, Carrier, Respondents)

Re: Appellate Case No. 2018-001535

Dear V. Claire Allen:

I am writing in response to the answer to the Motion to Compel Creel Reporting, Inc. for transcripts. Motion was submitted to the Court of Appeals by me on November 6, 2018 (please see attached). The answer to Motion states "denied" based on the following: "if Appellant has not received the transcript within the allotted time nor received notification of an extension within ten (10) days after the allotted time, appellant shall notify the Office of Court Administration, the clerk of the appellate court, and the court reporter in writing, Rule 207 SCACR" (please see attached). As of this date, January 17, 2019, I am still not in receipt of the transcripts from Creel Reporting, Inc., in which initial request was made by me on September 7, 2018 in writing. Payment for the transcripts in the amount of $176.00 was sent to Rob Fitzgerald, Creel Reporting, Inc., 1230 Richland St., Columbia, SC (please see attached). This agency's name, contact name, and address was provided to me by SC Workers' Compensation Commission. A follow up letter was written by me on October 9, 2018 to acknowledge proof of service regarding parties involved (please see attached). Again, Motion to Compel for release of transcripts was submitted to the Court of Appeals on November 6, 2018. Based on Rule 607 (d)(e)(g) SCACR, the transcripts have not been released within 60 days upon written request, no notification has been received that extension has been filed, and no notification has been received that notice of extension has been granted as of this date, January 17, 2019. Thank you for your assistance.

Sincerely,

Christine Bradley, Ex Parte (Albert Bradley)

Cc: Jason Lockhart, Helen Hiser, SCWCC

SAFE
FEDERAL CREDIT UNION

P.O. BOX 2008
Sumter, SC 29151
803-469-8600

OFFICIAL CHECK

67-7969
2532

CHECK NO. 4226899

DATE: 28-JAN-19

AMOUNT
$ **176.00

PAY THE SUM OF ONE HUNDRED SEVENTY SIX AND 00/100 DOLLARS

Kristi Mehr
AUTHORIZED SIGNATURE

PAY TO THE ORDER OF CREEL REPORTING, INC.***
ROB FITZGERALD AND AMANDA C GODFREY
REF: ALBERT AND CHRISTINE BRADLEY

HEAT SENSITIVE
RUB AREA TO VERIFY

⑈0004226899⑈ ⑆253279691⑆00202012176 3⑈

January 28, 2019

RECEIVED
JAN 28 2019
SC WORKERS' COMPENSATION

RECEIVED
JAN 28 2019
SC Court of Appeals

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Amanda Creel Godfrey
1230 Richland St.
Columbia, SC 29201

Re: Transcripts
Christine Bradley, Ex Parte (Albert Bradley)
Bradley v. Southern Industrial Constructors, Inc., Zurich American Insurance Co. %
Zurich North America

Dear Ms. Godfrey:

Please be advised that all correspondence from you and/or representatives from your agency, Creel Reporting, Inc., must be sent to my attention via U.S. Mail. All attempts by me to collect transcripts pertaining to the case of Albert Bradley v. Southern Industrial Constructors, Inc., Zurich American Insurance Co. % Zurich North America were done in compliance with the rules for obtaining transcripts (Rule 607). Payment for transcripts was previously sent to Rob Fitzgerald at Creel Reporting, Inc., 1230 Richland St., Columbia, SC 29201. This contact name (Rob Fitzgerald), along with agency name (Creel Reporting, Inc.) was provided to me by the SC Workers' Compensation Commission. This letter is to acknowledge that I will be paying for transcripts again (initial payment mailed September 7, 2018). This time payment is being made to your attention. Please notify me in writing when you are in receipt of the check for transcripts. Also, who is Rob Fitzgerald, as previous correspondence and payment were to sent to his attention at Creel Reporting, Inc.?

Thank you for your assistance.

Sincerely,
Christine Bradley
Christine Bradley, Ex Parte (Albert Bradley)

Cc: Jenny Kitchings, V. Claire Allen, Jason Lockhart, Helen Hiser, SCWCC

Received BB Ballard 1-28-19 C. Strickland Coral Strickland 1.28.19 RN Amanda Godfrey

PROOF OF SERVICE

THE STATE OF SOUTH CAROLINA

In The Court of Appeals

In The Supreme Court

RECEIVED
MAR 22 2019
SC Court of Appeals

Appellate Court Judges

Case No: 2018-001535

Christine Bradley (Albert Bradley), Pro se — Appellant

v.

Respondents

SC Workers' Compensation Commission
Southern Industrial Constructors, Inc.,
Zurich American Insurance Company c/o
Zurich North America,
Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS

RECEIVED
MAR 22 2019
SC WORKERS' COMPENSATION

I certify that I have issued a response to SC Workers' Compensation Commission on March 22, 2019, by depositing a copy of it in the United States Mail to P.O. Box 1715, Columbia, SC 29202-1715 or via hand-delivery to 1333 Main St., Suite 500, Columbia SC. I certify that I have issued a copy to Southern Industrial Constructors on March 22, 2019, by depositing a copy of it in the United States Mail, to the attorney of record, Jason W. Lockhart at P.O. Box 12519, Columbia, SC, 29201, and via personal to delivery to his office at 1320 Main St., Columbia, SC, 29201. I certify that I have issued a copy Creel Reporting, Inc. to Amanda Creel-Godfrey/Rob Fitzgerald to 1230 Richland St., Columbia, SC 29201.

March 22, 2019

Christine Bradley
03/22/19

Christine Bradley (Albert Bradley), Pro se
475 Lower Lee School Rd.
Mayesville, SC 29104

c/c Chief Justice James Lockem
Jenny Abbott Kitching

March 22, 2019

Christine Bradley, Pro se
475 Lower Lee School Rd.
Mayesville, SC 29104

RECEIVED
MAR 22 2019
SC Court of Appeals

SC Workers' Compensation Commission
1333 Main St.
Columbia, SC 29201

Re: Albert Bradley

Dear SCWCC:

I am in receipt of a letter dated and stamped March 14, 2019 that I received on March 21, 2019 from MGC (see attached). I contacted the court reporters with the contact information provided to me. I have received feedback from Creel Reporting, Inc. in which I have informed both SCWCC and the SC Court of Appeals that the document provided was incomplete and contained numerous errors. Initially, I was informed that Rob Fitzgerald was the reporter who for Creel Reporting, Inc. and the agency denied that he worked there. Deborah Thompson informed me initially that she did not have anything and that she only worked for one judge located in Beaufort, SC. I contacted Deborah Thompson again, and she informed me that she wasn't sure and that she would get back with me. Skylet Kean stated she performed reporting for one hearing for the case of Albert Bradley. However, she refused to provide me with information pertaining to her business for verification. I am also in receipt of court reporting provided by Jason Lockhart dated December 06, 2017 that is inaccurate.

I am still awaiting official documentation from all court reporters who recorded the hearings and meetings pertaining the case of Albert Bradley from the onset of his case to the present. Also, please inform me of the date and time that I may review files pertaining to the case of Albert Bradley. Thank you for your assistance.

RECEIVED
MAR 22 2019
SC WORKERS' COMPENSATION

Sincerely,

Christine Bradley

Christine Bradley, Pro se (Albert Bradley)

Cc: Jason Lockhart, Helen Hiser, Amanda Creel-Godfrey/Rob Fitzgerald, SC Court of Appeals, Chief Justice James Lockemy and Jenny A. Kitchings

Hand delivered CB

Christine W. Bradley
475 Lower Lee School Road
Mayesville, S.C. 29104
November 20, 2018

To: Alan Watkins
P.O. Box 309
Bishopville, S.C. 29010

Reference: Albert Bradley
Lee County Employee

Dear Mr. Alan,

On several occasions I have tried to review my husband's personnel file and my ability to do this was denied each time. As you know my husband died last year and I still do not know what benefits that he was entitle to or his insurance coverages that is due to his family.

Once again, I'm requesting to review my husband entire employee files. Please let me know when I can move onward with this matter.

Sincerely,

Christine Bradley

Christine W. Bradley, spouse

July 29, 2018

RECEIVED
JUL 30 2018
SC WORKERS' COMPENSATION

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

SC Workers' Compensation Commission
Appellate Committee Panel Members
1333 Main St., Suite 500
Columbia, SC

Dear Appellate Panel Members Melody James, Avery Wilkerson, Jr., and Gene McCaskill:

I, Christine Bradley, *pro se*, am writing to express my dissent with your final decision and order. I am requesting to move forward with this process for further appeal of this decision. I was in receipt of a certified order by Jason Lockhart on July 24, 2018. I responded back the order stating that I was not in agreement with the order. This was in response to the order I received by Jason Lockhart on July 24, 2018. Enclosed were my findings of fact with supporting SC Codes of Laws as basis for argument. On Saturday, I received the final decision and order from the appellate panel. Again, I am not in agreement with the final decision and order that has been entered. Albert Bradley, the decedent and claimant, is without legal representation in this matter. Also, the children of the claimant do not waive any of their rights. Once again, please provide me with the necessary forms to move forward in this matter.

Thank you for your assistance in this matter.

Sincerely,

Christine Bradley

Cc: Keith Roberts, Legal Counsel SCWCC

January 17, 2019

Christine Bradley, Ex Parte (Albert Bradley) (Bradley v. Southern Industrial Contructors)
475 Lower Lee School Rd.
Mayesville, SC 29104

Creel Reporting, Inc.
1230 Richland St.
Columbia, SC 29201

Re: Appellate Case No. 2018-001535

To Whom It May Concern:

I am writing this letter to again request the entire transcript(s) pertaining to the case of Albert Bradley v. Southern Industrial Constructors, Inc. Initial request was made on September 7, 2018 via letter along with payment in the amount of 176.00 to Creel Reporting, Inc. As of this date, I still have not received copies of the transcript as requested. Thank you for your assistance.

Sincerely,

Christine Bradley, Ex Parte (Albert Bradley)

Cc: Jason Lockhart, Helen Hiser, SCWCC

Commission

2) Jason Beckhart, Attorney for Southern Industrial, Inc.
3) Attorney Heken Hiser
4) Creel Reporting, Inc., Rob Fitzgerald
5) S.C. Court of Appeals

Omitted document from 01-11-19; each party notified.

mailed 01-19-19 C Bradley

THIS DOCUMENT HAS A GRAY BACKGROUND, MICROPRINTED SIGNATURE LINE, HEAT SENSITIVE PADLOCK AND A TRUE WATERMARK WHEN HELD TO LIGHT

S.C. State Federal Credit Union
Columbia, South Carolina
67-7573/2539

VOID AFTER 90 DAYS

OFFICIAL CHECK

NO. 1192648

STATE CREDIT UNION
P.O. Box 726 Columbia, SC 29202
800.868.8740 803.343.0300
scscu.com

DATE: 09-07-2018

AMOUNT: $ *********176.00

PAY TO THE ORDER OF:

One Hundred Seventy-Six and 00/100**********

Creeo Reporting

Christine Bradley

AUTHORIZED SIGNATURE

MP

⑈1192648⑈ ⑆253978730⑆ 43001750⑈

September 7, 2018

Christine Bradley

475 Lower Lee School Rd.

Mayesville, SC 29104

RECEIVED

SEP 07 2018

SC Court of Appeals

Re: Ex parte Christine Bradley (Bradley v. Southern Industrial Constructors)
Appellate Case No. 2018-001535

To Whom It May Concern:

I am requesting the entire transcript(s) of the proceedings pertaining to the case of Albert Bradley vs. Southern Industrial Constructors with the SC Workers' Compensation Commission held on May 21, 2018.

Yours truly,

Christine Bradley

Christine Bradley, Ex Parte

September 7, 2018

Re: Ex parte Christine Bradley (Bradley v. Southern Industrial Constructors)
Appellate Case No. 2018-001535

To Whom It May Concern:

I am requesting the entire transcript(s) of the proceedings pertaining to the case of Albert Bradley vs. Southern Industrial Constructors with the SC Workers' Compensation Commission.

Yours truly,

Christine Bradley

Christine Bradley, Ex Parte

RECEIVED
JUL 30 2018
SC WORKERS' COMPENSATION

July 29, 2018

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

SC Workers' Compensation Commission
Appellate Committee Panel Members
1333 Main St., Suite 500
Columbia, SC

Dear Appellate Panel Members Melody James, Avery Wilkerson, Jr., and Gene McCaskill:

I, Christine Bradley, *pro se*, am writing to express my dissent with your final decision and order. I am requesting to move forward with this process for further appeal of this decision. I was in receipt of a certified order by Jason Lockhart on July 24, 2018. I responded back the order stating that I was not in agreement with the order. This was in response to the order I received by Jason Lockhart on July 24, 2018. Enclosed were my findings of fact with supporting SC Codes of Laws as basis for argument. On Saturday, I received the final decision and order from the appellate panel. Again, I am not in agreement with the final decision and order that has been entered. Albert Bradley, the decedent and claimant, is without legal representation in this matter. Also, the children of the claimant do not waive any of their rights. Once again, please provide me with the necessary forms to move forward in this matter.

Thank you for your assistance in this matter.

Sincerely,

Christine Bradley

Cc: Keith Roberts, Legal Counsel SCWCC

July 26, 2018

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Jason Lockhart, MGC, Attorney for the Defendants
Zurich North American Insurance
Southern Industrial Constructors
Victoria Lichtenberger, Guardian/Guardian Ad Litem for the Claimant
Gaston County DSS/Tereasa Osborne/Stephanie Stevenson

Re: Answer to Appellate Panel Decision and Order Filed

Dear Appellate Panel Members Melody James, Avery Wilkerson, Jr., and Gene McCaskill:

I, Christine Bradley, *pro se*, am writing to express my dissent with the order issued by Jason Lockhart, Attorney for the defendants on this matter. As previously argued by myself before the appellate panel on May 21, 2018, the findings of fact are as stated according to the SC Code of Laws and described in my appeal. There is a lack of evidence provided by the defendants, and that is clearly argued in the appeal. Please see the attached document to review those findings. Please also be reminded that Albert Bradley, the decedent, does not have legal representation in this matter. Also, the children of the claimant are not waiving their rights to their father. Again, I do not agree with this order.

Thank you for your assistance in this matter.

Yours truly,

Christine Bradley

RECEIVED
JUL 27 2018
SC WORKERS' COMPENSATION

Hand delivered July 12, 2018 Resubmitted

To: S.C. Workers' Compensation Commissioner
P.O Box 1715
1333 Main Street suite 500
Columbia, SC 29202

Reference: Albert Bradley
475 Lower Lee School Road
Mayesville, SC 29104

To the Appeal Panel:

On today I request to review my husband's file and was denied access to it. I was told that it was all on the computer; then I asked to review it on the computer and this was denied. I was told that we all were given copies of the entire file. This continue to bother me because Mr. Lockhart continues to talk about things what we have no knowledge off. It is even more puzzling when I'm not being allow to view what's in my husband file for clarity.

Once again I am requesting that the SC Workers' Compensation Commissioner appoint an attorney for Mr. Bradley, my husband as it is required by the SC Code of Law. At this time, I will continue to seek out as to what happened to Albert Bradley. No one is providing or allowing this family to secure facts about what really happened to him.

Just a reminder that Jason Lockhart who works for Zurich insurance company was an accomplice to my husband's death.

Sincerely,

Christine W. Bradley
Spouse of Albert Bradley

Hand delivered July 12, 2018

RECEIVED
JUL 12 2018
SC WORKERS' COMPENSATION

To: S.C. Workers Composition Commissioner
Main Street
Columbia, SC 29201

Reference: Albert Bradley

To The Appeal Panel

On today I request to review my husband's file and I was denied access to it. I was told that it was all on the computer; then I asked to review it on the computer and this was denied. I was told that we all were given copies of the entire file. This continue to bother me because Mr. Lockhart continues to talk about things that we have no knowledge off. It is even more puzzling when I'm not being allow to view what's on my husband file for myself.

Once again I am requesting that the SC Workers Composition Commissioner to appoint an attorney for Mr. Bradley as it is required by the SC Code of Law. At this time, I continue to seek out what happened to Albert Bradley, my husband. No one is providing or allowing this family the facts about what really happened to him.

Just a reminder that Jason Lockhart who works for Zurich insurance company was an accomp~~anist~~ to my husband's death.

Sincerely,

Christine Bradley

Christine W. Bradley
Spouse of Albert Bradley

June 18, 2018

RECEIVED
JUN 19 2018
SC WORKERS' COMPENSATION

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Amy A. Bracey, Judicial Director
Judicial Department
1333 Main St., Suite 500
P.O. Box 1715
Columbia, SC 29202-1715

Dear Ms. Bracey:

I am writing to inquire about the status of the commission review held on May 21, 2018. I acted as pro se and gave oral argument. I have not received the outcome from the proceeding as of this date. Please provide me with the final decision and order. Thank you for your assistance.

Sincerely,
Christine Bradley
Christine Bradley

April 17, 2018

RECEIVED
APR 18 2018
SC WORKERS' COMPENSATION

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Amy Bracey, Director
Judicial Department
P.0. Box 1715
1333 Main St., Suite 500
Columbia, SC 29202-1715

Dear Ms. Bracey:

I am in receipt of the hearing brief which was served to the other party, Jason Lockhart, Attorney in this case. However, I noticed that pertinent party members in this case were not served, and their names have been omitted from the briefing. Please advise as to when Victoria Lichtenberger, Guardian Ad Litem for the claimant Albert Bradley and the employer Southern Industrial of the claimant will be served by reissuance of the brief to all members involved.

Sincerely,

Christine W. Bradley

CB Hand-delivered

November 29, 2017

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Commissioner T. Scott Beck
1333 Main St., Suite 500
P.O. Box 1715
Columbia, SC 29201

Dear Commissioner Beck:

I am writing to you to request that you please clarify and provide all legal documents that were submitted at the said pre-hearing briefing to include APA submissions. The family of Albert Bradley is unaware of any prior hearing pertaining to the above. Also, I requested at the last attempted hearing all medical reports, all hospital visits, all facility stays, healthcare professionals including physicians, nurses, nursing assistants, and others involved in the care of my husband Albert Bradley from March 17, 2016 until present. I requested the complete medical file which should also include all lab reports, exams including x-rays, and medications administered from all hospitals and facilities held. Please provide the requested guardianship documentation of all individuals claiming to have guardianship over Albert Bradley to include court dates, times, and reasons for such hearings. Please include why family was not informed of hearing on the matter. If notification was sent, please provide the documentation to support such.

The Fifth and Fourteenth Amendments of the U.S. Constitution state each individual has a right to due process of law. Therefore, the vulnerable and incapacitated Albert Bradley must have legal representation at all times. I asked the court to appoint Albert Bradley legal counsel, and I also requested the above documents. I have yet to receive the documents I requested, and I have not been notified of legal counsel being provided for my husband, Albert Bradley.

Lastly, there were several individuals claiming to be Albert Bradley's guardian: Jason Lockhart/Zurich Insurance Co.; Tereasa Osborne, Gaston County DSS Attorney; Stephanie Stevenson, Gaston County DSS Social Worker; and Victoria Lichtenberger, ElderSource, Charlotte, NC. Again, please provide the supporting documentation to substantiate their position. Thank you for your assistance.

Sincerely,

Christine W. Bradley

Cc: Jason Lockhart, Gary Cannon, Keith Roberts

CB Hand-delivered

November 29, 2017

Christine Bradley
475 Lower Lee School Rd.
Mayesville, SC 29104

Commissioner T. Scott Beck
1333 Main St., Suite 500
P.O. Box 1715
Columbia, SC 29201

Dear Commissioner Beck:

I am writing to you to request that you please clarify and provide all legal documents that were submitted at the said pre-hearing briefing to include APA submissions. The family of Albert Bradley is unaware of any prior hearing pertaining to the above. Also, I requested at the last attempted hearing all medical reports, all hospital visits, all facility stays, healthcare professionals including physicians, nurses, nursing assistants, and others involved in the care of my husband Albert Bradley from March 17, 2016 until present. I requested the complete medical file which should also include all lab reports, exams including x-rays, and medications administered from all hospitals and facilities held. Please provide the requested guardianship documentation of all individuals claiming to have guardianship over Albert Bradley to include court dates, times, and reasons for such hearings. Please include why family was not informed of hearing on the matter. If notification was sent, please provide the documentation to support such.

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Lastly, there were several individuals claiming to be Albert Bradley's guardian: Jason Lockhart/Zurich Insurance Co.; Tereasa Osborne, Gaston County DSS Attorney; Stephanie Stevenson, Gaston County DSS Social Worker; and Victoria Lichtenberger, ElderSource, Charlotte, NC. Again, please provide the supporting documentation to substantiate their position. Thank you for your assistance.

Sincerely,

Christine W. Bradley

Cc: Jason Lockhart, Gary Cannon, Keith Roberts

What does the SC workers' compensation law state regarding workers who suffer catastrophic injuries resulting in total disability and incapacitation which occurred from a work-related injury?

Section 42-9-5(C)(D); Section 42-15-60

Albert Bradley sustained a severe brain injury and several other injuries such as such severe tongue and facial/jaw laceration and inhalation of metal fragments into lung tissue while working for Southern Industrial Constructors of Columbia, SC on May 16, 2011. These injuries left him totally incapacitated. Albert Bradley was deemed permanently and totally disabled because of these injuries by the SC Workers' Compensation Commission (Commissioner T. Scott Beck). He received the maximum weekly benefits allowable under the law.

Attorney Jason Lockhart argues that Albert Bradley died of diffuse acute bronchopneumonia in his submission. What is that? Please provide the official signed medical documentation from the medical provider who diagnosed Albert Bradley with this condition as his cause of death.

What does the law state regarding the appointment of a guardian for an injured worker? What decision-making is factored in to the appointment of a Guardian/Guardian ad litem for an injured worker? What is the role of the appointed Guardian ad litem in relationship to the injured worker (i.e. healthcare, finances, collaboration with other family members)? What does the law state about family members as guardian? What is a guardian? What is Guardian ad litem? Does this law apply in this case? If so, how?

Section 42-15-55; Chapter 67-216

Albert Bradley died in the hands of the court-appointed Guardian ad litem Victoria Lichtenberger who owns and operates an agency that receives federal funds from the government and who is affiliated with and collaborated with the Gaston County DSS/DHHS/Tereasa Osborne, Stephanie Stevenson. He had several hospital admissions while in the custody of Victoria Lichtenberger and Gaston County DSS. No family members were present at the time of appointment of guardianship for Albert Bradley which denied Albert Bradley, and his family their rights to be present, to be heard, and to be represented. Family members were not provided any documentation regarding Albert Bradley's health condition, his hospital visits, multiple tests performed, autopsy results, and toxicology screen, while in the custody of Victoria Lichtenberger and Gaston County DSS/DHHS/Tereasa Osborne, Stephanie Stevenson. Family members had very limited contact with Albert Bradley from 3/17/2016 to 2/05/2017.

What does the law state regarding appointment of an attorney for an individual who is not represented at a hearing?

Chapter 67-216

It was stated in the hearing that Victoria Lichtenberger is Albert Bradley's Guardian ad litem yet the claimant was without legal representation at the hearing which was held on December 6, 2017.

What is a dependency investigation?

Chapter 67-902

There was no good faith effort to conduct any dependency investigation as it was communicated to the commissioner that if in fact if there was such an investigation to be held, it was to be done in the Commissioner's presence in court. (See the attached letter). Also, there is documentation about good faith made to conduct a dependency investigation with all family members. However, there is no documentation of any communication with Christy James. Where is the proof of the letters that Tuten sent to all three of the children to include the date and time stamp?

Several requests were made for all medical records, guardianship court orders and all orders, financial statements, and the entire the SC Workers' Compensation Commission file pertaining to Albert Bradley for his entire claim period. These documents still have not been received to this date.

What does the law state about payment of benefits for the injured worker who had coverage for himself and his spouse? How did you calculate the benefits to paid?

Chapter 67-902

A good faith effort must be made to identify all beneficiaries of the claimant. Albert Bradley was employed by Southern Industrial Constructors of Columbia, SC until the time of his death. Who are his beneficiaries listed with his employer? Did Albert Bradley have any of his children listed as beneficiaries through his employer?

Chapter 67-902

Albert Bradley had benefits for his spouse through his employer that should have been paid from the time of his accident. Where are those benefits?

42-15-60

As previously documented to the SC Workers' Compensation Commission and Commissioner T. Scott Beck, Albert Bradley has medical bills that are the responsibility of Southern Industrial/Zurich Insurance. The Estate of Albert Bradley will not be responsible for any bills that have mounted up and have remained unpaid by the carrier, Zurich Insurance/Victoria Lichtenberger/Gaston County DSS/Tereasa Osborne, Stephanie Stevenson.

APA submissions provided to court by Attorney Jason Lockhart and used as evidence were not provided to Christine Bradley, Derwin Bradley, Lavare Seltun, and Christy James. The dependents of Albert Bradley have not received any legal documents with supporting evidence.

APA submissions provided to court by Attorney Jason Lockhart and used as evidence were not provided to Christine Bradley, Derwin Bradley, Lavare Seltun, and Christy James. The dependents of Albert Bradley have not received any legal documents with supporting evidence.

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 06-66-49
ATTENDING PHYSICIAN:
AGE: 66 GENDER: MALE
Account#: No account given

SERVICE:
DICTATOR: CUI, DI MD
DOB: 10/27/1949

H & P - Created By - CUI, DI MD; On - Jun 03, 2011 02:33PM

DATE OF ADMISSION: 06/03/11

DATE OF INJURY: 05/16/2011

TRANSFERRING FACILITY: Palmetto Health Richland

PRIMARY ADMISSION DIAGNOSIS: Cognitive decline and decreased capacity for self care secondary TBI due to blunt trauma.

SECONDARY ADMISSION DIAGNOSES:
Superior mandible fracture
Nasal bone fracture
Fractured/loose teeth
Scattered Demyelinating lesion
Possible Cardiac Arrest.
DAI
Cerebral edema

CHIEF COMPLAINT: 61 y.o M with TBI from blunt trauma and possible cardiac arrest.

HISTORY OF PRESENT ILLNESS:
Pt is a 61 yo male who was at work working with a chain attached to a truck. Chain snapped and hit him in the face causing a loss of consciousness and possible cardiopulmonary arrest. It was unclear if the patient truly arrested as his friends started CPR once they found him down. Per OSH note, when paramedics arrived, the patient was noted to have a pulse. Pt arrived at the hospital intubated and sedated. Initial GCS 3I was documented at OSH. CT of the facial bones show fractures of the mandible, nasal bone, and several fractured teeth. Patient underwent debridement of the tongue and repair of the facial fracture, and was noted to be febrile on the day of discharge.

Patient has been admitted to the Shepherd Center for further medical management and to assess physiological impairments in order to initiate all aspects of acute inpatient rehabilitation including but not limited to: PT, OT, ST, TR, SW, Rehab Nursing and Psychology/Neuropsychology.

PRIOR FUNCTIONAL STATUS: Independent with all ADLs, mobility, and cognition prior to accident.

CURRENT FUNCTIONAL STATUS: Dependent for all ADL, mobility and cognition.

PAST MEDICAL HISTORY: Hypercholesterolemia

PROCEDURES
05/16/11 Trach, repair tongue laceration
05/20/11debridement of the tongue, open reduction of alveolar fracture, cheiloplasty on lower lip
06/01/11 PEG placement

RADIOLOGIC REPORT FINDINGS:
05/16 CT Brain Impression: 1)Sulci are not as large as pone would suspect for patient age. In addition, there is mild diffuse low density throughout the deep white matter suggesting mild cerebral edema. Clinical correlation is needed as to the patients' mental status, 2)No masses or hemorrhages are seen.
05/16 CT Scan of the Face Impression:1)Fracture through the superior margin of the apex of the mandible extending to the right body, 2)There is a fracture of the nasal bone, 3)The maxilla appears intact, 4) There are several bony fragments and probable teeth noted within the oropharynx adjacent to the endotracheal tube.
05/17 CT Head Impression: 1)No acute intracranial hemorrhage, 2)Multifocal white matter disease. MRI of the brain with and without contrast may be helpful, 3)Tiny radiopaque foreign bodies in the right nasal cavity and nasopharynx.
05/17 CT Angiography Brain Impression: 1)No major arterial injury of the extracranial or intracranial carotid or vertebral arteries, 2)Multiple teeth fragments n the oral cavity, nasopharynx, oropharynx, and hypopharynx with large tooth fragment in the cervical esophagus at the level of the cricopharyngeus muscle. Metallic foreign body in the posterior right upper lobe, 3)Dependent opacities in the upper lobes most likely representing aspiration.
05/17 CT Cervical Spine Impression: No significant fracture is seen. There is some mild irregularity involving the tips of a couple of lower spinous processes; this is probably degenerative, even though minimal avulsion fractures cannot totally be excluded. Endotracheal tube is noted to lie just below the epiglottis and probably should be advanced.
05/17 EEG Clinical interpretation: This EEG shows effective pharmacologic suppression during the recording, presumably from Versed which was listed as an active medication by the EEG technologist during the recording. It also is consistent with widespread cerebral dysfunction.
05/17 MRI head: Diffuse and patchy white matter changes, demyelinating changes.
05/17 MRI C-spine: Moderate canal stenosis C5-6 secondary to disk bulge protrusion and ligamentum flavum hypertrophy; multilevel degenerative changes with out severe central canal stenosis
05/23 EEG Clinical interpretation: This very abnormal EEG is indicative of severe widespread cortical and subcortical dysfunction. No subclinical seizures.

HOME MEDS: Pravastatin, ASA

ALLERGIES: NKDA

PRECAUTIONS: Fall

DIET: Tube feed

SOCIAL HISTORY: The patient is married and lives with his family. There is no reported alcohol, tobacco, or illicit drug use.

FAMILY HISTORY: CAD, DM, Cancer (Pancreatic, uncle)

REVIEW OF SYSTEMS: UNABLE TO ASSESS SECONDARY TO COGNITIVE STATUS.

PHYSICAL EXAM:
Vitals: TEMP: 101, HR:93, BP:124/79 RR:11 O2 SAT:100 % on 30% TC
GEN : No acute distress. Sleeping, did not open eye to voice or painful stimuli
HEENT: Normocephalic, s/p facial injury/surgery. No scleral icterus or conjunctival injection.
NECK: Trachea is midline. On C-collar, Trach in place.
CV: Heart is regular in rate and rhythm. S1 and S2 are within normal limits.
LUNG: Coarse breath sound. No use of accessory muscles of respiration.
ABD: Abdomen is soft, nontender and nondistended. Bowel sounds present. PEG in place.
SKIN: Skin is warm and dry. There are no rashes, abrasions or ulcers seen.
EXT: No peripheral edema noted. No calf tenderness. No cyanosis or clubbing
NEURO: Patient did not open eyes to voice or noxious stimuli, patient did have heart rate response and withdraw of bilateral lower extremities to pain, No spontaneous eye opening or movement was observed during the exam. Patient's pupil are constricted bilaterally, no pupillary reflex direct or consensual. Both eyes are temporally deviated, oculocephalic reflex absent.

ASSESSMENT AND PLAN: 61 y.o M with diffuse TBI due trauma and possible anoxic brain injury due to possible cardiac arrest, currently patient is a rancho 2 per exam.

REHAB:

1. RN: bowel/bladder function, skin integrity, education.
2. Nutrition: nutritional needs.
3. PT: LE strength, ROM, tone/spasticity, mobility, gait, safety, AD's, education, and home mod
4. OT: UE strength, ROM, tone/spasticity, mobility, ADLs, safety, AD's, DME, education, and home mod
5. SLP: speech, swallow, cognition, safety, and education.
6. TR: community reintegration, community resources, safety, and education.
7. Psychosocial Support Services
8. Neuropsychological evaluation.

NEURO: Patient has suffered diffuse TBI, currently rancho 2, patient at risk for storming, control storming, will start amantadine and consider other neurostimulants.

ID: Patient noted to be febrile, will review CXR and labs on admission.

CV: Family history of CAD, possible will check lipid panel, Cont. Monitor BP and HR. Control storming.

PULM: Patient with resp failure, vent dependent status post tracheostomy. Dr. Zadoff onboard.

NUT: Patient is on a regular diet, ST/NUT following. Will check a pre-albumin on admission.

BOWEL: Initiate Bowel Protocol.

BLADDER: Continue Foley catheter at this time.

HEME: Patient have leukocytosis and thrombocytopenia per OSH labs, Will check baseline CBC on admission.

MET: Will check baseline CMP on admission for electrolytes and liver function.

ENDO: Will consider sending endocrine labs including Free T4, TSH, Testosterone or FSH/LH, and Somatomedin C (IGF-1) if suspect any central involvement.

DVT: Dopplers were positive at admission. Will start high dose fragmin.

SKIN: Cont. wound care for post-surgical wound. Initiate turning protocol.

SEIZURE: Low risk at this time.

EXT: Monitor for tone, edema, spasticity and ROM.

SAFETY: Will assess safety needs on a daily basis and restrain as warranted.

Di Cui MD / PGY-2

ATTENDING ADDENDUM

I have seen and examined the patient. Dr. Cui and I have discussed his assessment and plan. There is no family in the room at the time of exam. Thus, I will defer any discussions to Dr. Fadia regarding the patient's plan of care. Today, we will start the patient on neurostimulation with amantadine 100 mg. Dr. Fadia to return on June 6 to assume the patient's care.

ANNA C ELMERS, MD

Shepherd Center Dictation Report

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 05-66-49
ATTENDING PHYSICIAN: GREEN, BRUCE G
AGE: 66 GENDER: MALE
Account#: 4098183

SERVICE: UROLOGY
DICTATOR: GREEN, BRUCE G MD
DOB: 10/27/1949

Operative Report - Created By - GREEN, BRUCE G MD; On - Aug 17, 2011 09:11AM

DATE OF SERVICE:
08/17/2011.

REASON FOR EVALUATION:
Reason for cystoscopy is hematuria.

PREOPERATIVE DIAGNOSIS:
Hematuria.

POSTOPERATIVE DIAGNOSIS:
Inflammatory lesions of the bladder, possible neoplastic issue.

PROCEDURE:
Cystourethroscopy.

PREOPERATIVE INDICATIONS:
This patient was admitted to the hospital over the course of several weeks now he has had occasional episodes of hematuria. The patient's wife states at the initial hematuria started after catheter change. He has recently been on a three way irrigation. He has had renal ultrascund which showed a small stone. The patient is seen today for cystoscopic examination.

FINDINGS:
The patient had several inflammatory lesions throughout the bladder which looked somewhat friable and I suspect in general that this may be due to just catheterization of inflammatory adhesions. However, I cannot rule out the possibility of a neoplastic disorder.

DESCRIPTION OF PROCEDURE:
Following the instillation of lidocaine anesthesia, flexible cystoscopy was performed. The urethra was normal in architecture and caliber. Prostatic urethra revealed mild lateral lobe hyperplasia. Careful examination of the bladder revealed inflammatory lesion throughout the bladder with hyperemic mucosa. I did not see any specific lesions that I could determine at this time.

RECOMMENDATIONS:
My recommendations are as follows:

1. Get a urine for cytology.
2. CT scan with IV contrast to see if this an actual lesion.
3. If bleeding resumes, resume three way irrigation.
4. Possible repeat cystoscopy with biopsy, which might have to be done as a hospital procedure. I have discussed this with the wife in some detail. We will follow the patient with a repeat cystoscopy in a month. However, if he continues to bleed he will need a biopsy.

MLS: 97359
D: Wed Aug 17 09:17:13 2011 34112490
T: Wed Aug 17 10:25:42 2011

cc: Payal Fadia, MD

Aug 24, 2011 05:05PM

Electronically Signed By: GREEN, BRUCE G MD

Shepherd Center Dictation Report

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 05-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998687

SERVICE: REHABILITATION OTHER
DICTATOR: GREEN, BRUCE G MD
DOB: 10/27/1949

Consultation - Created By - GREEN, BRUCE G MD: On - Aug 10, 2011 07:07PM

DATE OF CONSULTATION:
08/09/2011.

REFERRING PHYSICIAN:
Payal Fadia, MD

CONSULTING PHYSICIAN:
Bruce G. Green, MD.

REASON FOR CONSULTATION:
Evaluation of hematuria.

HISTORY OF PRESENT ILLNESS:
This 61-year-old male with an acute traumatic brain injury on the job. Apparently had a Foley catheter in. The patient was on Coumadin therapy and aspirin. Apparently began having some hematuria and clots over the weekend. This has subsequently resolved, and urine at this point is clear. During the course of this evaluation, the patient had a renal ultrasound which revealed a stone in the left lower pole calix of 6-7 mm. There was no evidence of hydronephrosis, no evidence of renal abnormalities.

PHYSICAL EXAMINATION:
On examination, the Foley catheter is nicely in place. There is a little bit of urethral drainage around the catheter, but no other lesions are seen. I did not do a prostate exam on him.

IMPRESSION:
Hematuria, now seemingly resolved.

RECOMMENDATIONS:
Discontinue irrigations. If hematuria reappears, will consider cystoscopic examination in the urology clinic.

MLS: 97359
D: Wed Aug 10 19:12:47 2011 33928924
T: Thu Aug 11 08:02:22 2011

cc: Payal Fadia MD; Bruce G. Green, MD

Aug 15, 2011 01:07PM

Electronically Signed By: GREEN, BRUCE G MD

Shepherd Center Dictation Report

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 06-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998687

SERVICE: REHABILITATION OTHER
DICTATOR: DOCKERY, KEITH M MD
DOB: 10/27/1949

Consultation - Created By - DOCKERY, KEITH M MD: On - Jun 29, 2011 06:44PM

REQUESTING PHYSICIAN:
Payal Fadia, MD.

CONSULTING PHYSICIAN:
Keith Dockery, MD.

REASON FOR CONSULTATION:
Evaluate for nasal, facial, and mandibular fractures.

DATE OF INJURY:
05/16/2011.

HISTORY OF PRESENT ILLNESS:
The history is derived primarily from the chart.

This is a 61-year-old who has altered mental status. The patient is ventilatory dependent and is at a low cognitive level. He is lying recumbently in bed. The patient reportedly suffered a chain injury to the face, causing loss of consciousness; nasal, facial, and mandibular fractures; and possible cardiopulmonary arrest. The patient underwent CPR on the site, but it is not known how long he was down. He arrived at the hospital intubated and was sedated. His initial GCS score was 3i. He underwent open reduction of alveolar fracture, cheiloplasty of the lower lip, and debridement of the tongue with a PEG tube placement. A trach was placed May 16, 2011 with a tongue repair. A follow-up exam is needed to evaluate the fractures to make sure they are healing well. According to the note, the CT scan of the face revealed a fracture through the superior margin of the apex of the mandible extending to the right body. There is a nasal bone fracture and several bony fragments and probable teeth noted within the oropharynx against the endotracheal tube. His CT of the cervical spine did not reveal any fractures.

MEDICATIONS:
Aspirin, Pepcid, Fravachol, Keppra, insulin, amantadine, Vasotec, Lopressor, Ritalin, Colace, Ambien, Coumadin, and p.r.n. Dulcolax.

ALLERGIES:
NONE.

SOCIAL HISTORY:
He is married. There is a possible history of him having a job as a judge. There is a negative history of alcohol, tobacco, or illicit drug use.

FAMILY HISTORY:
Unremarkable.

REVIEW OF SYSTEMS:
Unable to obtain.

PHYSICAL EXAMINATION:
GENERAL: He is lying with his right side down with a number 7.0 tracheotomy tube in place. He is maintained on ventilatory support. He is not responsive to deep stimuli.
HEENT: Oral cavity: Healed alveolar mucosal lacerations sites. The lower jaw is edentulous. The upper jaw reveals multiple missing anterior teeth. Mucosa otherwise intact. Oropharynx clear. Nose: Left nasal bone fracture depressed. Anterior nasal passageways narrowed but intact. Ears: Normal left external canal and tympanic membrane. Right ear not evaluated because of body positioning.
NECK: Supple. Midline larynx trachea. Clean tracheotomy tube.

IMPRESSION:
1. History of nasal, facial, and mandibular fractures.
2. Low cognitive level/traumatic brain injury.
3. Deep venous thromboses, currently on Coumadin.

RECOMMENDATION:
1. CT scan of the face, nose, and mandible.
2. Will follow with you.

MLS: 20992
D: Wed Jun 29 18:49:56 2011 32699371
T: Wed Jun 29 19:36:23 2011

Payal Fadia MD, Andrew D. Zadeff, MD

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 05-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3938687

SERVICE: REHABILITATION OTHER
DICTATOR: ZADOFF, ANDREW MD
DOB: 10/27/1949

H & P - Created By - ZADOFF, ANDREW MD; On - Jun 03, 2011 02:38PM

DATE OF ADMISSION:
06/03/2011

REASON FOR ADMISSION:
1. Respiratory failure.
2. Brain injury.

The patient is located currently in the intensive care unit.

HISTORY OF PRESENT ILLNESS:
The patient is a 61-year-old man who is in excellent health with ongoing health problems, other than high cholesterol and some arthritic changes in his knees. He was struck by a chain while he apparently was setting up a tow. The chain struck him in the face causing immediate loss of consciousness and unresponsive. There waws CPR at the scene. The type of CPR is not clear, although there is one notation that notes a cardiac arrest. The patient has spontaneous respirations by the time the patient was able to be transported to the hospital. Attempts at intubation were made, but the patient had to be intubated in the hospital. The patient apparently had an irregular rhythm by the time of reaching at the hospital, although the type of irregular rhythm is not clear.

His injuries were characterized by the facial injury including nasal fracture, tongue laceration, also had mandibular fractures in the symphysis area, possible fractured teeth and dislocated teeth. CT scan showed CT evidence of white matter disease. MRI was done eventually which showed bilateral scattered demyelinating disease, possibly consistent with hypoxic injury.

According to the family, the patient awoke after his initial resuscitation and was able to follow simple commands such as blinking on command and moving toes on command. He eventually underwent surgery including tongue laceration debridement, but had loss of mental status and has not been able to gain mental status. He did go through a period of time of what appeared to be myoclonic jerks versus seizure activity. However, those have subsided to the point where now again he is poorly responsive and is transferred for continued care.

At time of initial injury, the patient underwent emergency bronchoscopy with findings of foreign body, i.e., teeth, in his right mainstem bronchus. These were removed. There is no notation in the chart that I can find where family is aware of any pneumonias or any other significant infection. A tracheostomy was performed on day of the injury on 05/16/2011. Bronchoscopy done on the same day. He eventually had a PEG tube placed on 06/01/2011 for continued nutrition. I do not find any specific etiology for the worsening mental status, and I do not have all the progress notes and there is no discharge summary. There is no notation as to infections. He was placed on anti-seizure medication. He had a Cordis right subclavian placed approximately two weeks ago and subsequently had a PICC line placed in his right arm.

An echocardiogram was performed, which showed an ejection fraction greater than 65%, a hyperdynamic heart, and grade 1 diastolic dysfunction. The patient has been maintained on mechanical ventilation. At the time of his arrival, his tidal volumes were in the 300-350 range with a respiratory rate of 30-35 on CPAP of +5, and pressure support of 10. Blood count showing progressive anemia. The patient also had elevation of glucose at times and was placed on sliding scale insulin.

TRANSFER MEDICATIONS:
1. He was placed on transfer medicines include Tylenol, albuterol and Atrovent.
2. He was on home 81 mg of aspirin daily. This was continued.
3. Fragmin of 5000 units daily subcutaneously.
4. Glutamine Plus powder.
5. Hydrochlorothiazide 25 mg a day.
6. Sliding scale insulin.
7. Nexium 30 mg daily.
8. Keppra 1000 mg every 12 hours.
9. Phenytoin IV 150 mg q.8 hours.
10. Pravastatin, which he is using at home 40 mg a day.
11. He was placed on a Versed drip at times.
12. Terbinafine 250 mg twice a day.
13. Lamisil, which he was also taking at home prior to his injury

ALLERGIES TO MEDICATIONS:
NONE KNOWN.

PAST SURGICAL HISTORY:
1. He had a right cyst of his shoulder removed remotely.
2. He also had a motor vehicle accident in 1980 and had a knee injury and required surgery at that time. Specific type of surgeries not known, but did not have knee replacements most likely because of his condition.

PAST MEDICAL HISTORY:
History of high cholesterol, recently placed on pravastatin. He had toenail fungus, placed on Lamisil, and was taken 81 mg aspirin for

general health issues. No known history of heart disease. There is no history of high blood pressure, diabetes, known heart attack, heart failure, ulcers, hepatitis, renal disease, and neurologic disorders. No prior history of phlebitis. No history of prior stroke epilepsy or convulsions.

SOCIAL HISTORY:
Nonsmoker and nondrinker. He worked as a truck driver. Lives with family including wife.

FAMILY HISTORY:
Mother with hypertension. Father had emphysema, although had been a cigarette smoker. He has multiple family members with high blood pressure, diabetes, and heart disease.

REVIEW OF SYSTEMS:
Not available, but according to the family, he had complaints of arthritic problems in his knees. There is no history of any chest pain, chest pressure, shortness of breath, nausea, or vomiting.

PHYSICAL EXAMINATION:
GENERAL: Well-developed man, poorly responsive in no acute distress.
HEENT: Shows poor responsive. Pupils approximately 3 mm. Trach site appears to be clean. The patient has missing frontal teeth. Tongue can be seen with appropriate amount of moisture.
NECK: Not examined with the exception no carotid bruits.
CHEST: Shows good aeration bilaterally. No wheezes, rales, or rhonchi.
CARDIAC: Showed regular rate and rhythm. Normal S1, S2. P2 is not accentuated. No gallops, rubs, or murmurs.
ABDOMEN: Soft and nontender with active bowel sounds. No guarding or rebound. No hepatosplenomegaly. No masses. PEG site appears to be clean.
EXTREMITIES: Shows a right upper extremity edema. I did not see any obvious pus around the previous Cordis site appears to be functional. He has diminished pulses to the right leg. I cannot only feel posterior tibialis, do not feel dorsalis pedis, but feet are warm. Left dorsalis pedis is well-palpated. I do not see any edema on the leg.
NEUROLOGIC: He appeared to be unresponsive to Babinski stimulation. No response to pain. Somewhat flaccid in movement. I do not feel any rigidity.

IMPRESSION:
1. Respiratory failure, on mechanical ventilation.
2. Trauma with traumatic brain injury.
3. Facial fractures.
4. Anoxic injury.
5. Anemia.
6. Possible seizure disorder.

MLS: 83481
D: Fri Jun 03 14:44:16 2011 31927126
T: Sat Jun 04 00:40:34 2011

cc: Payal Fadia, MD

Jun 06, 2011 07:20AM

Electronically Signed By: ZADOFF, ANDREW MD

Shepherd Center Dictation Report

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 05-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998687

SERVICE: REHABILITATION OTHER
DICTATOR: GREEN, BRUCE G MD
DOB: 10/27/1949

Outpatient Report - Created By - GREEN, BRUCE G MD; On - Aug 31, 2011 08:53AM

The patient will be scheduled for a cystoscopy with bladder biopsy on Friday. The patient underwent cystoscopy last week and had a questionable lesion. Today we had a discussion with his wife regarding risks and complications associated with this procedure. His wife understood this and she has signed surgical informed consent. We have dictated the history and physical as part of the hospital line.

MLS. 95333
D: Wed Aug 31 08:58:29 2011 34535137
T: Wed Aug 31 11:51:49 2011

cc:

Sep 05, 2011 06:39PM

Electronically Signed By: GREEN, BRUCE G MD

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 06-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998607

SERVICE: REHABILITATION OTHER
DICTATOR: FADIA, PAYAL M MD
DOB: 10/27/1949

Stat Discharge Summary - Created By - FADIA, PAYAL M MD; On - Sep 20, 2011 12:21PM

ADDENDUM DICTATED BY PAYAL FADIA, MD ON SEPTEMBER 20, 2011:
On September 18, 2011 Dr Green ordered a urine culture on the patient The results were not available until today, September 20th In reviewing his urine culture results he has grown 50,000 to 100,000 CFU per mL of MRSA in his urine It is sensitive to linezolid which he has already started on September 19, 2011. These results were phoned in to Dr. Rao, his admitting physician at Touchstone at 713-770-0609. Dr. Rao understood the results and will continue the Zyvox for treatment of the MRSA urinary tract infection.

MLS: 97359
D: Tue Sep 20 12:26:38 2011 36131305
T: Tue Sep 20 12:50:40 2011

cc:

Electronically Signed By: FADIA, PAYAL M MD

Sep 25, 2011 10:41AM

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 05-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998697

SERVICE: REHABILITATION OTHER
DICTATOR: FADIA, PAYAL M MD
DOB: 10/27/1949

Stat Discharge Summary - Created By - FADIA, PAYAL M MD; On - Sep 09, 2011 02:40PM

Date of admission:
June 03, 2011

Date of discharge:
September 19, 2011

Primary Discharge diagnosis:
Cognitive and functional deficits, status post traumatic brain injury.

Secondary discharge diagnoses:
1. Diffuse axonal injury.
2. Superior mandible fracture.
3. Nasal bone fracture.
4. Possible cardiac arrest.
5. Cognitive deficits.
6. Malnutrition, status post percutaneous endoscopic gastrostomy placement.
7. Pulmonary insufficiency, status post tracheostomy.
8. Enterococcus urinary tract infection, status post completion of Unasyn.
9. Hematuria, resolved s/p Murphy drip.
10. Multiple right upper extremity deep venous thromboses, resolved.
11. Sacral decubitus ulcer, stage II.
12. Spasticity.
13. Ringworm infection of scalp, improved.
14. MRSA+ penile discharge, on zyvox started 9/19.

Procedures prior to admission to Shepherd:
1. Tracheostomy, May 16th.
2. Repair of the tongue laceration, May 16th.
3. On May 20th, debridement of the tongue, open reduction of the alveolar fracture, the cheiloplasty on the lower lip.
4. On June 1st, PEG placement.

HISTORY OF PRESENTING ILLNESS:
The patient is a 61-year-old male, status post traumatic brain injury secondary to a work-related injury when he was hit by blunt trauma with a chain attached to the truck that he was working on. Reportedly, the chain snapped and hit him in the face causing him to lose consciousness. It is questionable if there was cardiopulmonary arrest. He was found down by his friends at the work site on June 03, 2011. Per outside hospital records, when the paramedics arrived, the patient was noted to have a pulse. He was intubated at the scene. Initial Glasgow Coma Score was 3T. CT of the facial bone showed fractures of the mandible, nasal bone and several fractured teeth. He required debridement of the tongue and repair of the facial fracture. CT of the brain showed mild diffuse low density signal throughout the deep white matter suggesting mild cerebral edema. Followup MRI of the brain on May 17th showed diffuse and patchy white matter changes. He underwent debridement of his tongue and repair of the facial fracture. He was medically stabilized and required tracheostomy and ventilator placement and was subsequently transferred to Shepherd Center for inpatient rehabilitation on June 03, 2011.

PAST MEDICAL HISTORY:
Hypercholesterolemia.

ALLERGIES:
No known drug allergies.

SOCIAL HISTORY:
The patient is married and lives with his family in South Carolina. There is no reports of alcohol, tobacco or illicit drug use.

FAMILY HISTORY:
1. Coronary artery disease.
2. Diabetes mellitus.
3. Cancer in his uncle, pancreatic.

Hospital course:

1. **Neurologic.** The patient remained a Rancho Los Amigos scale level II throughout his stay. He was in our PREP Program. He consistently withdrew to painful stimulus. His coma recovery scale JFK score was a 7 at the time of discharge. He has had no report of seizure activity. Therefore, his Keppra was weaned down and discontinued. He did undergo a followup brain MRI on June 22nd showing extensive periventricular white matter signal with symmetric hyperintensity in the basal ganglia. A follow-up EEG was done showing diffuse generalized slowing with minimal activity. All of these results were discussed in detail with his wife. The patient was trialed on neurostimulants including amantadine, ritalin and sinemet. There was some improvement noted in general arousal, but no change in ability to follow commands. At the time of discharge, he was weaned off of the neurostimulants without difficulty.
2. **Infectious Disease.** Afebrile morning of discharge. The patient required Unasyn for an Enterococcus urinary tract infection. Unasyn was started on August 25th and he completed a 10-day course. He also has been receiving Lamisil topical and Nizoral shampoo for ringworm of his scalp, which has improved. On August 24th, he was treated with nystatin swabs q.i.d. for oral thrush. Follow-up urinalysis done on September 8th was negative for any evidence of further infection. On 9/19, final culture ID/sensitivities resulted for penile drainage, which was found to be MRSA positive and sensitive to Zyvox. Zyvox was started 9/19 and he will need to complete a 10 day course. Follow up urine culture was ordered by urology 9/18, the results are not available at the time of discharge and will need to be followed up on, if positive we will notify the admitting facility. His MRSA infection, antibiotics and pending urine culture was discussed with the patient's wife at bedside on day of discharge. Nursing was also at bedside. Patient has had a foley catheter in place since bladder biopsy scheduled September 2nd, and in spite of Dr.Green (urology) and myself both recommending discontinuing the foley the day after procedure on September 3rd, the patient's wife has refused to allow the foley be removed, despite discussions with her regarding potential complications such as infections, skin breakdown, and hematuria. On 9/19, foley discontinued with wife's consent, at the order of Dr.Green.
3. **Cardiovascular.** The patient has a family history of coronary artery disease. His blood pressure and heart rate were monitored throughout his stay. Due to low blood pressure, his enalapril was decreased to 5 mg daily on July 13. Pulmonary was on board to manage his cardiovascular status. At discharge, he does remain on enalapril 5 mg daily and metoprolol 100 mg q. 12 hours.
4. **Pulmonary.** The patient does have pulmonary insufficiency. He was admitted with a tracheostomy as well as being vent-dependent. He was successfully weaned off the vent by our pulmonary/critical care consultants on August 3, 2011. He continues to have his tracheostomy in place and is tolerating trach plugging during the daytime but is using a Hygro-filter at bedtime.
5. **Nutrition.** The patient is on cyclic tube feeds through a G-tube which he is tolerating well with no residuals. He is to be maintained on aspiration precautions. His admission pre-albumin was 14.2. Followup on June 17th showed a prealbumin increase to 24.6.
6. **Bladder management.** The patient initially was admitted on a Foley catheter. During the month of August, the patient developed hematuria. The patient was receiving Coumadin for management of DVT. He was also aspirin; both of these medications were discontinued due to increased risk of bleeding. Renal ultrasound on August 9th showed a small left kidney stone. Urology, Dr. Bruce Green, was consulted, he reviewed the renal ultrasound. Dr. Green recommended a Murphy drip which was initiated, and eventually discontinued when his urine cleared. Patient underwent a cystoscopy on August 17th by Dr.Green, which showed inflammation. He then ordered a follow-up CT of abdomen and pelvis on August 17th which showed some nonspecific lesions. Therefore, the patient was transferred to St. Joseph's Hospital for possible biopsy on September 2nd. Following the procedure and discussion with Dr. Green, he reported that it was an unremarkable study and no biopsy was necessary. His bladder lining appeared clean. These results were discussed in detail with the wife by myself and Dr. Green. The patient was transferred back from St. Joseph's hospital the evening of September 2nd with the Foley catheter in place which was put in just prior to his procedure with Dr. Green on September 2nd. Although it was recommended by myself and Dr. Green that the Foley catheter be removed the following day, his wife has refused to agree with this recommendation in spite of discussions regardings potential complications with keeping the foley in. Urinanalysis on September 8 was negative for any evidence of further infection. On September 15th, the patient's foley bag had a small clot in it, but urine was draining clear. On September 16th, patient was found to have hematuria. Dr. Green was called and recommended a Murphy drip be initiated. Telephone order was recieved by charge nurse from Dr. Green. Wife initially refused placement of Murphy drip, but subsequently consented to nursing placing Murphy drip in the presence of her attorney, our charge nurse, nursing supervisor, and our attorney being present as well. Subsequently, his urine has remained clear, and patient was seen by Dr.Green 9/18 for follow-up. Follow up urine culture was ordered, but has not yet resulted and wife notified that if results were positive for infection, Touchstone would be notified to initiate proper antibiotics. Dr. Green recommended discontinuing foley the day of discharge in his note from 9/18. Wife agreed and foley removed without difficulty morning of 9/19 prior to discharge.
7. **Bowel management.** The patient is incontinent and maintained on a bowel program with regular bowel movements. Last BM is on 9/19, the day of discharge. Patient has tolerated tube feeds well with no residuals noted, and no constipation. It was reported that he had 2 small episodes of emesis per nightshift, but no residuals noted. He has good bowel sounds on day of discharge.
8. **Hematology.** The patient had intermittent CBCs done. On 9/19, follow-up CBC completed, with WBC 10.9, H/H 12.0/35.6, Platelets 128. Platelet count noted to have trended down slightly, most likely medication-related. This was discussed with wife on day of discharge with nursing also present. This will need to be repeated at admitting facility and be monitored closely.
9. **Metabolic/Endocrine.** The patient's blood work was monitored closely throughout his stay. His LFTs started to increase. Subsequently, his Dantrium was discontinued as well as Pravachol. After both of these medications were discontinued, his LFTs returned to within normal limits.
10. **DVT management.** On admission, the patient was found to have multiple right upper extremity DVTs. However, followup blood flow study on August 8th in all extremities showed no DVT and it was a negative study. Therefore, as mentioned above, his Coumadin was discontinued per Pulmonary Medicine. He is to remain off all anticoagulation secondary to hematuria.
11. **Skin management.** The patient has a small area on his sacrum that continues to heal. This has been followed by our wound care nurse. He has been getting Aquacel dressings to that and also has been on a low air-loss mattress with a Roho cushion for his wheelchair. He requires continuous frequent turning every 2 hours for management of that.
12. **Ophthalmology.** The patient was seen on August 17th by Dr. Evan Loft of Ophthalmology regarding a possible lesion of

his cornea. Dr. Loft said this is called pinguecula which is considered a normal variant. This was discussed by myself and Ophthalmology with the patient's wife.

13. **Spasticity management.** The patient was monitored for edema, spasticity and range of motion. His Dantrium was started on July 7th for noticeably increasing tone; however, this was discontinued July 28th due to increased LFTs which have subsequently improved. He required continuous monitoring of his tone with sustained stretching and proper splints.

14. **Pain management.** The patient was observed closely and clinically for signs and symptoms of pain. He is on Lortab p.r.n. for pain.

15. **Affect/Behavior.** The patient underwent numerous neurostimulant trials with Ritalin, amantadine and Sinemet. His arousal did improve to where he is much more awake during the daytime. On admission, he was rather lethargic 24 hours a day. At this time due to very little changes in his cognition, we have weaned off his amantadine, sinemet, and ritalin.

16. **Sleep management.** The patient sleep/wake cycles were monitored closely, although on several nights, it has appeared as if the patient has been awake at night. His wife has been adamant about the patient not receiving any sleep medications. Therefore, any sleep medicines were discontinued. Most recently, he was trialed on trazodone which may have contributed to some diaphoresis. This was discontinued and no further changes have been noted.

Discharge disposition:

The patient is being transferred to Touchstone Nexus for specialized brain injury subacute rehabilitation. In discussing his disposition with his wife, she is concerned about urology followup. I have had multiple discusssions with Dr. Bruce Green and he also agrees that the patient is medically stable and clear from his standpoint for transfer at this time. This was discussed with the wife by both myself as well as Dr. Green.

Pt will need follow up bloodwork to monitor his CBC, specifically his platelets, as well as monitoring his electrolytes and LFTs. He will need to remain on zyvox to complete a 10-day course, this was started 9/19. His skin will need to be monitored closely with frequent turning, continue local wound care for sacral stage II decubitus.

Also he will need pulmonary follow-up to continue trach care, with the eventual goal of decannulation, as well as urology follow-up due to his recent history of hematuria. This will also need close monitoring.

All of his discharge recommendations and current treatment plan has been discussed with the wife in detail by myself with nursing present.

Discharge MEDICATIONS:

1. Clotrimazole 1% topical t.i.d. to affected areas.
2. Culturelle 1 tab PEG BID.
3. Enalapril 5 mg daily.
4. Hydrogen peroxide 3% solution for trach care.
5. Insulin Humulin 70/30, 50 units q. 5 p.m.
6. Regular insulin sliding scale q. 6 hours.
7. Ketoconazole 2% shampoo applied every other day until scalp rash is resolved. 8. Prevacid 30 mg daily.
9. Metoprolol 100 mg b.i.d.
10. Triple antibiotic topical to affected area b.i.d.
11. Nystatin powder to affected areas b.i.d.
12. Nystatin oral suspension swish and swab q.i.d.
13. Zyvox 600mg PEG BID x 10 days - started 9/19/11.

Please refer to discharge MAR for PRN medications.

Condition on discharge:

Stable.

MLS: 21086
D: Fri Sep 09 14:45:42 2011 34816138
T: Fri Sep 09 16:31:58 2011

cc:

Sep 19, 2011 10:59AM

Electronically Signed By: FADIA, PAYAL M MD

Shepherd Center Dictation Report

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 06-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998697

SERVICE: REHABILITATION OTHER
DICTATOR: FLEMING, JAKE L MD
DOB: 10/27/1949

Radiology Report - Created By - FLEMING, JAKE L MD: On - Aug 09, 2011 10:01AM

VENOUS DOPPLER ULTRASOUND OF THE UPPER EXTREMITIES

CLINICAL HISTORY:
Phlebitis and thrombophlebitis.

DATE OF SERVICE:
08/08/2011.

FINDINGS:
Grayscale, color Doppler, spectral analysis, and graded compression of deep venous system of bilateral upper extremities is performed. Bilaterally there is compressibility and positive blood flow within the subclavian veins, the axillary veins, the brachial veins, the basilic vein and the cephalic veins. The exam is negative for DVT.

IMPRESSION:
Negative evaluation for DVT in the bilateral upper extremities.

MLS: 96201
D: Tue Aug 09 10:07:02 2011 33868656
T: Tue Aug 09 16:58:49 2011

cc:

Electronically Signed By: FLEMING, JAKE L MD

Aug 19, 2011 12:41PM

Shepherd Center Dictation Report

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 05-66-49
ATTENDING PHYSICIAN: FADIA PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998687

SERVICE: REHABILITATION OTHER
DICTATOR: SINGH, KUSH MD
DOB: 10/27/1949

Radiology Report - Created By - SINGH, KUSH MD; On - Jun 04, 2011 09:41AM

BILATERAL LOWER EXTREMITY DVT ULTRASOUND

DATE OF SERVICE:
06/03/2011.

CASE NUMBER:
22.

COMPARISON:
No priors

CLINICAL HISTORY:
Phlebitis and thrombophlebitis.

TECHNIQUE:
Standard grayscale and color Doppler imaging of the bilateral lower extremity deep venous systems was performed with spectral waveform analysis as well as compression and augmentation views.

FINDINGS:
The bilateral common femoral, superficial femoral, popliteal, gastrocnemius, posterior tibial and peroneal veins are normal in appearance with normal color Doppler and blood flow, normal compressibility as well as normal augmentation on spectral waveform analysis.

IMPRESSION:
No evidence for DVT within the lower extremities bilaterally.

MLS: 95928
D: Sat Jun 04 09:46:58 2011 31944157
T: Sat Jun 04 10:08:33 2011

cc:

Electronically Signed By: SINGH, KUSH MD

Jun 05, 2011 01:39PM

PATIENT NAME: BRADLEY, ALBERT
MEDICAL RECORD #: 06-66-49
ATTENDING PHYSICIAN: FADIA, PAYAL M
AGE: 66 GENDER: MALE
Account#: 3998607

SERVICE: REHABILITATION OTHER
DICTATOR: SINGH, KUSH MD
DOB: 10/27/1949

Radiology Report - Created By - SINGH, KUSH MD; On - Jun 04, 2011 09:39AM

BILATERAL UPPER EXTREMITY DVT ULTRASOUND

DATE OF SERVICE:
06/03/2011.

CASE NUMBER:
23.

COMPARISON:
No priors

CLINICAL HISTORY:
Phlebitis and thrombophlebitis. Bilateral upper extremity swelling.

TECHNIQUE:
Standard grayscale and color Doppler imaging of the bilateral upper extremities was performed with spectral waveform analysis. Compression and augmentation views were also obtained.

FINDINGS:
The right subclavian, axillary, basilic and brachial veins are noncompressible with completely occlusive thrombus present. The right cephalic vein is patent. The left subclavian, axillary, brachial, basilic and cephalic veins are normal in appearance with normal color Doppler and blood flow, normal compressibility and normal augmentation on spectral waveform analysis.

IMPRESSION:
Completely occlusive thrombus within the right subclavian, axillary, basilic and brachial veins, as described above. The right cephalic and left lower extremity deep venous systems are normal in appearance.

MLS: 95928
D: Sat Jun 04 09:44:57 2011 31944125
T: Sat Jun 04 10:07:22 2011

cc:

Jun 05, 2011 01:38PM

Electronically Signed By: SINGH, KUSH MD

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

ORIGINAL

ALDERSGATE ☐ EP ☒ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert

RM # 213

Dr Bradley

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

DRUG SENSITIVITY
1. NONE ( )
2.
3.

Date	
5/30/16	- Dc'd previous (R) sacrum wound care order d/t healed
	V.O Dr Bradley / Grace Ryon RN

Signature of Nurse Receiving Order: Grace Ryon RN Time: 1520 Physician's Signature: [illegible] Date: 5/31/16

1

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

ORIGINAL

ALDERSGATE ☐ EP ☐ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley, Albert

#213

Bradley

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

DRUG SENSITIVITY
1. NONE ( )
2.
3.

Date	
6/1/16 1219	↑FSBS to Q6 hrs x 5 days + log to PEC on Monday Use SSI that is already ordered if coverage needed

Signature of Nurse Receiving Order: [illegible] Time: 1326 Physician's Signature: [illegible], NPC Date: 6/1/16

2

PHYSICIAN'S ORDERS

USE BALL POINT PEN - PRESS FIRMLY - ORDERS ARE BEING COPIED

ORIGINAL

ALDERSGATE ☐ EP ☒ ACC MAIL TO: 3600 SHAMROCK DR. CHARLOTTE, NC 28215

PLEASE HAVE PHYSICIAN SIGN AND RETURN IMMEDIATELY.

PATIENT IDENTIFICATION

Bradley Albert

10/27/49

Dr Bradley

STAMP PATIENT'S NAME IN ALL THREE SPACES BEFORE PLACING IN CHART

DRUG SENSITIVITY
1. NONE ( )
2.
3.

Date	
6/2/16	Continue same dose of Coumadin 4mg p.o q.d Recheck PT/INR on Monday TTO Stacey Ashe NP

Signature of Nurse Receiving Order: S. Thrower Time: 1100 Physician's Signature: [illegible], DNP Date: 10/3/16

3

Last Bradley	First Albert	SSN 249900113	DOB 10/27/49
Physician John Gambino, MD	Midlevel	Facility Asbury	Hospice/ Co. Name

Chief Complaint: F/u HTN
Source from: Patient Nurse Family

History of Present Illness: Mandated Visit
Visit requested by: Patient Nurse Family

Pt cannot provide HPI. Nonverbal. No sls pain. Tol TF
No Δ in resp. Wt stable x 2 months
FS log: all FS generally 250-350

PMH DM GERD HTN PEG PE/DVT TBI

Medications: ☑ Reviewed and in chart Changes? Yes/No
lant 20 Coum Dexil Bethan Kepp Lisino
SCap

Allergies: ☑ Reviewed and in chart Changes? Yes/No
many

Review of Systems:
☑ Family not available to provide ROS
Pt cannot answer secondary to: ☐ dementia, ☑ aphasia, ☐ _____
☐ Nursing/ family was able to provide the following ROS
Systems: Constit., Respir., CV, ENT, Eyes, Endo, Psych, GI, GU, MS, Hem/Lymph, Allergy/Imm, Neuro, Skin
☐ All other ROS are negative

BP 150/100	HR 90	Temp 98.6	RR 20	Weight 209.6	Pulse Ox 95

ADL Independent? [yes=circle; no=line] Bathing Dressing Toileting Ambulation Feeding

Constit: frail, elderly, M/F, WD/WN, No Acute Distress, Cooperative

Respir: clear and equal BS Bilat, No R/R/W, no use of accessory muscles

Cardio: Regular Rate, w/o any Murmur/ Rub/ Gallop

GI: + BS, soft, NT/ ND, no rebound or guarding

Musculo/ Ext: no edema, cyanosis, erythema, kyphosis

Skin:

Assessment and Plan:

① HTN (CIO) SBP goal 130-150 on ACEI. Lytes ok.
No Δ BP log: 139/68‡; 158/90, 127/85, 140/67, 133/81

③ PE large, Dx 5/16 on coumadin Bed bound. INR goal met.
& overt bleeding. Will keep coumadin lifelong.

③ NIDDM Type 2 insulin req w/ CKD3. Adj meds as needed
Avoid low FS Routine foot care; on lantus. A1c goal ≤ 8.5
Will ↑ lantus further.

④ TBI, ABI Cont full ADL care. On Keppra 52 mg/kg.

I spent _____ min. on the floor/unit. Greater than 50% of that time was related to counseling and coordination of care

Disposition: Home ALF LTC Prognosis: Good Fair Poor
Rehab Potential: Good Fair Poor

Pertinent labs/ x-rays
INR 2.6 (8/15/16) 133/4.2/96/32/17/6.76/280 (7/18/16)
A1c 8.5 (7/16) LFT (3/16)

SNF or H	Subseq 99307 99308 309	D/C 99315 99316 <30 min >30 min Tobacco 99406 (3-10)___ min counseled	ALF or GH	Established 99334 99335 Face to face time w/Pt.

8/19/16
John Gambino, MD *Date*

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⑤ Oropharyngeal dysphagia on TF Monitor Monthly Wts. PEG ca

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

3/25/2016 22:42 Type: Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Needs anticipated and met by staff. G-Tube patent and positive for placement. Tol bolus feeding of Jevity 1.5 prior arrival of pump. Presently on conts feeding @55ml/hr. Turn q 2hrs to relief pressure. HOB Increased at all times.BS 113. No acute distress noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

3/25/2016 21:02 Type: Order Note

Note Text: The system has identified a possible drug allergy for the following order: Dexilant Capsule Delayed Release 30 MG

Give 1 capsule via PEG-Tube every 12 hours for per order

Author: Georgeline Ihekaire - RN [e-SIGNED]

3/25/2016 15:48 Type: Admission Summary

Note Text:

Note Text : Resident was brought into facility via gurney via prior facilities transportation. Alert but nonverbal. Skin assessment done on resident, pink area noted to the bottom with unstageable wound per wound nurse who dressed wound. no other open areas noted. Peg tube intact, foley cath patent and draining dark yellow urine. No signs of pain or discomfort noted. Respirations even and unlabored. Resident noted to have some episodes in which he began shaking but calmed down with reassurance. Resident cleaned up and positioned. Bed lowered, call bell with in reach, will continue to monitor 110/72, 98, 98.4, 20, 99%

Author: Aisha Khanani - Licensed Practical Nurse [e-SIGNED]

Date: Sep 21, 2016
Time: 10:49:17 ET
User: Elizabeth Caudle

Aldersgate UMRC- SNF
Progress Notes

Facility #

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text : Resident met OOB in recliner. Placed back in bed after 1hr. Turn q 2hrs to relief pressure. No movement bil UE and LE. Total care with adls x 2 staff, using hoyer lift for transfer. G-Tube patent. Tol feeding of jevity 1.5 at 55ml/hr.Oral care provided. HOB increased at all times. No acute distress noted. Quiet and restful.

Author: Georgeline Ihekaire - RN [e-SIGNED]

3/31/2016 14:39 **Type:** Health Status Note

Note Text:

Note Text : T 98.3, P 76, BP 95/68, BS 169 at 07.30. Alert but none verbal, no signs of pain, no respiratory distress. G.Tube intact and infusing well, flushed with water well, Foley catheter inact and draining clear amber urine, total care given with ADLs and transfers by 2 aides, hoyer lift used for transfers, turned and repositioned q 2 hrs, mouth care done q 2 hrs.

Author: Suwilanji Thindwa - RN [e-SIGNED]

3/30/2016 14:36 **Type:** Medicare Daily Note

Note Text:

Note Text : T 98.8, P 98, R 20, BP 112/72. Alert and none verbal, no signs of respiratory distress, no discomfort. HOB kept elevated, G. Tube intact and infusing jevity 1.5 at 55cc/hr, g.tube flushed with water well. Foley catheter intact and draining clear amber urine, total care given with ADLs, turned and repositioned q 2 hrs, mouth care done q 2 hrs, continent care done q 2hrs and as needed.

Author: Suwilanji Thindwa - RN [e-SIGNED]

3/30/2016 06:41 **Type:** Health Status Note

Note Text: Foley catheter urine output:150cc noted.

Author: Bolanle Gbadamosi - Licensed Practical Nurse [e-SIGNED]

3/30/2016 03:04 **Type:** Health Status Note

Note Text:

Note Text : Resting in bed at this time with no distress or discomfort noted. Turned and repositioned by staff. Incontinent care given. Peg tube in place with no residual noted. Flushes without difficulty. Continous feeding Jevity 1.5 cal in progress infusing at 55ml/hr. Head of bed up to prevent aspiration. Foley catheter intact draining well into bedside drainage bag. Urine color yellow. Clinically stable. Call light reachable.Will continue to monitor.

Author: Bolanle Gbadamosi - Licensed Practical Nurse [e-SIGNED]

3/29/2016 23:03 **Type:** Health Status Note

Note Text: Resident in bed. Remains alert but non verbal. On continuous feeding via PEG tube @ 55cc/hr. Tube patent and flushed without problem. Dressing to sacrum intact and dry. Turned and repositioned Q 2hr to relief pressure. No acute distress noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

3/29/2016 13:56 **Type:** Medicare Daily Note

Note Text:

Note Text : T 98.6, P 75, R 20, BP 112/70, BS 204. Alert and none verbal, no signs of discomfort, no signs of respiratory distress, chest clear with no congestion, total care gven with ADLs, G.Tube intact and infusing, flushed well with water, no residual, HOB elevated, foley catheter intact and draining clear amber urine, wound care on sacral area done, wound RT upper buttock slough, lower side clean and pink. Total care given with ADLs by two aides, turned and repositioned every 2 hrs. His guardian from SC here to visit him.

Author: Suwilanji Thindwa - RN [e-SIGNED]

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

3/29/2016 10:04 Type: Social Worker Note

Note Text: Admission paperwork completed with guardian. Care plan scheduled and discharge plan is for resident to remain at ACC for LTC.

Author: Amy Walker - Social Worker [e-SIGNED]

3/28/2016 20:46 Type: Health Status Note

Note Text:

Note Text : Resident met OOB in recliner. Placed back in bed after changing his mattress to air foam. Turn q 2hrs to relief pressure. Total care with adls. G-Tube patent. Tol feeding of jevity 1.5 at 55ml/hr. HOB increased at all times. No acute distress noted. T98.2P88R18BP137/70

Author: Georgeline Ihekaire - RN [e-SIGNED]

3/28/2016 16:02 Type: Health Status Note

Note Text:

Note Text : Resident resting comfortably, no signs of pain noted. Respirations even and non labored. Resident requires extensive assistance with adls. NPO, Jevity 1.5 infusing well via a pump and tolerating peg tube feeding well. OOB this shift with a hoyer lift plus 2 staff and tolerating OOB activities well. 134/84 82 20 98.2

Author: Joanne Otieno - RN [e-SIGNED]

3/27/2016 13:47 Type: Health Status Note

Note Text:

Note Text : Resident resting quietly in bed. Skin dry and warm to touch. G - tube intact, dsg changed, flushes Jevity 1.5 @ 55cc/ hr continuously. Abdomen soft, bowel sounds x 4 quadrants. Mouth care given x 2. Respiration regular and unlabored, O2 sat 96%. Blood sugar results noted, no s/s of hypo/hyperglycemia. HOB elevated. Wound dsg changed. Foley cath intact, urine is clear, amber. Heel protectors on both feet. Requires total assist with all ADL's. T - 97.3, 22, 132/80, 82.

Author: Abdul Kargbo - LPN [e-SIGNED]

3/27/2016 06:21 Type: Health Status Note

Note Text: Rsident alert when aroused, and non verbal. /Total /care. Two plus assist with ADL care. Turned and repositioned q 2 hrs. Peg tube patent. Provided mouth care. Foley patent and catheter care provided. Resident stable vs 96.8 88 18 128/79 93%ra

Author: Kenyatta Rose - Licensed Practical Nurse [e-SIGNED]

3/26/2016 13:07 Type: Health Status Note

Note Text:

Note Text : Resident in bed. Remains alert but non verbal. On continuous feeding via PEG tube @ 55cc/hr. Tube patent and flushed without problem. Dressing changed to tube site and buttock wound. Staff turned and repositioned Q 2hr. Had medium BM. No s/s of pain or discomfort noted. VS 98.3,92,20,118/78.

Author: Julius Awopetu - LPN [e-SIGNED]

3/26/2016 04:46 Type: Medicare Daily Note

Note Text:

Note Text : Res alert, nonverbal, no s/s of pain or discomfort, resting quietly throughout the shift with no s/s of distress. Res turned and repositioned q2° and all needs met by staff. PegTube patent, flushes with ease, continuous TF, foley patent and draining dark yellow urine. Will continue to monitor.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

She is alert and non verbal, HOB elevated. Breathing well. Incont care provided with one staff assist. Repositioned Q2 hrs for comfort. Tube feeding of jevity 1.5 running at 55 cc/hr continuously, tolerating it and water flushes well. G-tube site dressing and right buttocks dressing done by TX nurse. Oral care provided by staff. No acute distress noted thus far. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/3/2016 22:06 Type: Health Status Note

Note Text:

Note Text : Resident in bed resting quietly. Non verbal. HOB Elevated at all times to prevent aspiration. Needs anticipated and met by staff. Total care with adls . 2 assist. Remains on conts feeding of Jevity 1.5 @ 55ml/hr. Oral care provided. Turn q 2hrs to relief pressure. Foley catheter to bedside gravity with output of 200ml of amber urine. No acute distress noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/3/2016 12:19 Type: Medicare Daily Note

Note Text:

Note Text : 7-3. VS. Bp- 138/83, T- 98.3, P- 71, R- 22.
Resident's condition remain the same, no new changes noted. HOB elevated, tube feeding of jevity 1.5 running at 55 cc/hr continuously. Tolerating it well. Reposition Q 2 hrs for comfort. F/cath in place and draining well. AM care provided with one staff assist. G-tube site noted to have scant amount of drainage, dressing to site changed. Dressing to right sacrum changed. No acute distress noted this shift.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/2/2016 13:13 Type: Medicare Daily Note

Note Text:

Note Text : 7-3. VS. Bp- 125/75, T- 96.2, P- 84, R- 17 and)2 sats 94% R/air. Resident is alert and non verbal. HOB elevated. Remain on continuous tube feeding of jevity 1.5 running at 55 cc/hr. Tolerating it and water flushes well. Repositioned Q 2 hrs for comfort. AM care provided with 2 staff assist with care. Dressing to sacrum done as ordered. No acute distress noted thus far. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/1/2016 23:10 Type: Health Status Note

Note Text:

Note Text : Resident in bed this shift. In no acute distress. No cues to pain/discomfort noted. Opens eyes with stimulation but no tracking noted. Gtube feeding infusing at 55cc/hr. Residue <10 cc. Gtube patent and positive for placement. Foley catheter patient and draining amber urine. Totally dependent on staff for all care. Turned and repositioned Q2hrs. No changes in his status noted. VSS 122/70 98.0 78 20. All safety measures remain in place. Will closely monitor for changes

Author: Priscilla Gasson - LPN [e-SIGNED]

4/1/2016 13:24 Type: Health Status Note

Note Text: T 98.5, P 80, R 20, BP 118/76, 02 sat 96% on room air, Alert but none verbal, no signs of discomfort, no distress noted, HOB kept elevated, g.tube inact and infusing well, flushed well with water. Turned and repositioned q 2hrs

Author: Suwilanji Thindwa - RN [e-SIGNED]

3/31/2016 22:18 Type: Health Status Note

Note Text:

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text: skin abrasion (1.5x1cm)noted on LUQ abdomen from tape. 100% pink tissue. peri wound intact. small serosang drainage noted. cleanse with Anasept, apply xeroform and Mepilex M/W/F. spoke with nurse.

Author: Grace Sookryoo - Wound Nurse [e-SIGNED]

4/6/2016 12:31 Type: Nutrition/Dietary Note

Note Text:

Note Text : RD received approval from resident's case worker to switch tube feed formula from Jevity 1.5 to Glucerna 1.5, in order for improved DM management and to meet increased calorie/protein needs for wound healing. Resident will receive 60 mL/hour to provide 2160 calories, 117 gm protein, 1079 mL free water per day. Order written. Will follow for tolerance to increased rate (60 ml/hr vs. 55 ml/hr) and tolerance to new formula.

Author: Mary Boccardo - Dietician [e-SIGNED]

4/6/2016 10:30 Type: Health Status Note

Note Text:

Note Text : T 97.4, P 72, R 20, BP 120/72. Alert and none verbal, no signs of discomfort, HOB kept elevated, G.tube intact and infusing well, flushed with water, Foley catheter intact and draining clear amber urine. Turned and repositioned, mouth care done q 2hrs, Total care given with ADLs and transfers by 2 aides.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/5/2016 22:32 Type: Health Status Note

Note Text:

Note Text : Resident in bed resting quietly. Non verbal. HOB Elevated at all times to prevent aspiration. Needs anticipated and met by staff. Total care with adls x 2 assist. Remains on conts feeding @ 55ml/hr. Oral care provided. Turn q 2hrs to relief pressure. Foley catheter to bedside gravity with output of 200ml of amber urine. No acute distress noted

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/5/2016 14:31 Type: Health Status Note

Note Text:

Note Text : T 97.5, P 77, R 20, BP 125/78. Alert but none verbal, no signs of discomfort, G.Tube intact and infusing well, flushed with water, HOB kept elevated, Foley catheter intact and draining clear amber urine. BS 172, no signs of hypo/hyperglycemia, wound care sacral done, wound has slough RT buttock. DSS guardian called to get update of general condition. Flu vaccine administered per order, pneumonia vaccine ordered, to be given tomorrow. Total care given with ADLs by 2 aides, turned and repositioned and mouth care care done q 2 hrs.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/4/2016 21:23 Type: Health Status Note

Note Text:

Note Text : Resident alert and non.verbal. Hob up with no signs of aspiration noted. Tolerating TF as ordered. No s/s of diabetic distress. Total care needed. Assist of 1 with ADL's. Nystatin ointment applied as ordered. Incontinent care provided. V/S within normal limits.

Author: Sherondia Morgan - LPN [e-SIGNED]

4/4/2016 11:46 Type: Medicare Daily Note

Note Text:

Note Text : 7-3. VS. Bp-159/80, T- 97.2, P- 117, R- 20, O2 sats 92%.

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/8/2016 13:59 Type: Appointment return note

Note Text: 7-3. Back from Md's appointment at 13:50 pm via medics. F/cath changed as ordered, tolerated well. urine collected for UA, C and S as ordered for hematuria. Lab placed on first floor, for pick by lab rep.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/8/2016 13:38 Type: Health Status Note

Note Text: 7-3. Seen By NP this AM regarding hematuria and new order written to change foley catheter and get UA, C and S. Unable to change and obtain urine at this time because resident is currently at Md's appointment.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/8/2016 09:36 Type: Appointment departure note

Note Text: 7-3. Left for wound DR appointment at 0929 AM via medics in stable condition. O2 sats 94% R/air.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/8/2016 09:35 Type: Health Status Note

Note Text: 7-3. Second step PPD 0.1 ml adm. intradermaly to RFA tolerated well.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/7/2016 20:44 Type: Health Status Note

Note Text:

Note Text : Resident in bed resting quietly with eyes open.Unable to follow direction. Non verbal. HOB Elevated at all times to prevent aspiration. Needs anticipated and met by staff. Total care with adls x 2 assist. Remains on conts feeding of Glucerna 1.5 @ 55ml/hr. Oral care provided. Turn q 2hrs to relief pressure. Foley catheter to bedside gravity with output of 200ml of amber urine.No blood noted thus far.Conts on diabetic mgt. No distress noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/7/2016 06:06 Type: Health Status Note

Note Text: Note left for MD eval d/t noted hematuria.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/6/2016 22:39 Type: Health Status Note

Note Text:

Note Text : Resident in bed resting quietly at this time. Non verbal.Tol shower given by staff this shift. HOB Elevated at all times to prevent aspiration. Needs anticipated and met by staff. Total care with adls x 2 assist. Remains on conts feeding of Glucerna 1.5 @ 60ml/hr. Oral care provided. Turn q 2hrs to relief pressure. Foley catheter to bedside gravity with output of 250ml of amber urine. No acute distress noted

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/6/2016 17:23 Type: Skin/Wound Note

Note Text: spoke with Amanda Green, social worker re ; wound
update and new skin abrasion on LUQ abdomen also.
resident is going to wound care clinic on Friday.

Author: Grace Sookryoo - Wound Nurse [e-SIGNED]

4/6/2016 13:29 Type: Skin/Wound Note

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text: Urine out 350mls, foley catheter intact and draining clear amber urine, turned and repositioned q 2 hrs, G.tube intact and infusing well, flushed with water, HOB kept elevated.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/10/2016 14:38 Type: Medicare Daily Note

Note Text:

Note Text : 7-3. VS. Bp- 113/67, T- 97.2, P- 63, R- 18 and O2 sats 94% R/air. Clinically stable this shift. Alert and non verbal. All scheduled emds given via tube, tolerated well. Remain on conts tube feeding of glucerna 1.5 at 60 cc/hr, tolerating it and water flushes well. Remain on total care and depend on staff basically for all his care this AM. A full bed bath given by 2 staff assist this AM. Tx to g-tube site and bottom done as ordered. Repositioned Q 2 hrs for comfort. Mouth care provided. No acute distress noted thus far. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/10/2016 07:12 Type: Health Status Note

Note Text: Resident clinically stable. Rested well during night shift with eyes closed. Continuous feeding running at 60ml/hr, patent and flushes well. Turned and repositioned q2 hrs. temp 98.2. No distress noted.

Author: Kenyatta Rose - Licensed Practical Nurse [e-SIGNED]

4/9/2016 22:41 Type: Health Status Note

Note Text:

Note Text : Abnormal Urinalysis received. Results- Hemoglobin large, RBC 100,Albumin 100, Leucocytes moderate, WBC 52. Results called in to Heather Yates PA. NNO. Asked to have PEC F/U on Monday. Resident is asymptomatic. Afebrile 97.7. Tolerating feeding well. Totally dependent on staff for ADLs . All meds administered and tolerated. Will closely monitor for changes

Author: Priscilla Gasson - LPN [e-SIGNED]

4/9/2016 10:53 Type: Health Status Note

Note Text:

Note Text : T 97.2 P 93, R 18, BP 122/88, BS 168. Alert but none verbal, unable to make needs known, no signs of discomfort. Total care given with ADLs by 2 aides, turned and repositioned q 2 hrs, mouth care done q 2hrs. G.tube intact and infusing Glucerna 1.5 at 60mls/hr, flushed with water, HOB kept elevated, fole catheter intact and draining clear amber urine. Incontinent of bowel and bladder, continent care given by 2 aides.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/8/2016 21:12 Type: Health Status Note

Note Text:

Note Text : Resident resting quietly in bed at this time. Turn q 2hrs and oral care provided. Foley catheter in place with no blood noted thus far. Total care with adls. G-Tube patent and +ve for placement. Tol feeding of Glucerna 1.5 @ 60ml/hr ,meds and water flushes.No acute distress noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/8/2016 15:10 Type: Appointment return note

Note Text: 7-3. 16F foley cath d/c and 16F foley cath and 10 cc Ns applied as ordered.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/8/2016 14:08 Type: Appointment return note

Note Text: 7-3. Back from md's appointment with no paper work. Resident left with per work.

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text: 3-11. Per pharmacy dosing, gentamicin changed to 140 mg IM Q 8 hrs, UTI x 7 days.
Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/11/2016 16:28 Type: Skin/Wound Note
Note Text: Skin abrasion healed today.
Author: Grace Sookryoo - Wound Nurse [e-SIGNED]

4/11/2016 15:36 Type: Health Status Note
Note Text: Zosyn d/c and new order for gentamicin 1 gm Q 8 hrs x 7 days written.
Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

~~4/11/2016 15:33~~ Type: ~~Health Status Note~~
Note Text: Incomplete Documentation - ~~Zosyn d/c and new order for gentamycin 1 gm Q 8 hrs x 7 days written.~~
Strike Out Date: 4/11/2016 15:36
Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

~~4/11/2016 15:29~~ Type: ~~Health Status Note~~
Note Text: Incomplete Documentation - ~~Zosyn d/c and new order for gentamycin 1 gm Q 8 hrs x 7 days written.~~
Strike Out Date: 4/11/2016 15:33
Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/11/2016 14:53 Type: Order Note
Note Text: The system has identified a possible drug allergy for the following order: Zosyn Solution 3-0.375 GM/50ML (Piperacillin-Tazobactam in Dex)

Use 3.375 gram intravenously every 6 hours for UTI for 7 Days
Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/11/2016 14:34 Type: Health Status Note
Note Text:
Note Text : 7-3. VS. Bp- 150/94, T- 98.5, P- 87, R- 22 and O2 sats 94% R/air. Result of urine Culture and sensitivity reviewed by Np and new order written for zosyn 3.375 mg IV Q 6 hrs x 7 days for UTI. Order faxed to the pharmacy. R.P, Vivian Hardin called, zero answer, message left on voice mail to call ACC.
Two staff assist provided Am care and incont care. He has been turned and repositioned Q 2 hrs for comfort. Mouth care provided x 2 this shift.
Tolerating tube feeding and water flushes well. HOB elevated at all times. No acute distress noted thus far.
Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/11/2016 10:24 Type: Medicare Daily Note
Note Text:
Note Text : 7-3. Resident came to the unit with rash and redness to groin area and ampits. Currently, resident is on nystatin cream to groin area only. Rash and redness to the above areas continues to increase, Resident seen by NP this shift and new order written to d/c nystatin cream and new order for nystatin powder to groin and ampits BID until rash cleared.
Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/10/2016 21:56 Type: Health Status Note

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

04/14/2016 00:55
Resp: 22
04/14/2016 00:55

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/13/2016 20:10 Type: Health Status Note

Note Text:

Note Text : Received resident in bed, alert and not in acute distress. Resp. even and unlabored. skin warm to touch. administered Gentamycin 140 mg IM for UTI. V/S w/ in normal limits-T-97.4. No s/s of hypo/hyperglycemia;BS-136. Peg-tube intact and patent; meds and H2O flushes tolerated well. foley cath. intact, draining w/ clear to yellow urine. q2 turned, dependent w/ ADL's. bed in low position. will continue monitoring.

Author: Roselyn Daway - RN [e-SIGNED]

4/13/2016 02:45 Type: Infection Note

Note Text: Res continues IM ABT for UTI with no adverse reactions, no s/s of pain or discomfort. Foley cath patent and draining amber urine with minimal sedimentation. Will continue to monitor.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/12/2016 21:17 Type: Health Status Note

Note Text:

Note Text : Resident in bed resting quietly with eyes open. ABT/UTI in progress with no s/s of adverse reaction noted. T98.0. Foley cath to bedside gravity with 400ml of clear amber urine. Turn q 2 hrs to relief pressure. Oral care provided. Total care with adls. No acute distress noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/12/2016 13:35 Type: Health Status Note

Note Text:

Note Text : T 96.4, P 82, R 20, BP 124/76. Alert but none verbal, turned and repositioned q 2 hrs, mouth care done and incontinent care done q 2hrs, HOB kept elevated, g.tube intact and infusing feeds well, flushed with water, foley catheter intact and draining clear amber urine. Received a call from resident's case manager Jenipher with information from wound clinic with change of appointment date to Friday 2 weeks from now, HUC informed who updated transportation. Continues on ABT IM gentamycin for UTI with no adverse reaction, no signs of discomfort noted.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/12/2016 06:04 Type: Infection Note

Note Text: Res started on Gentamicin 140mg IM q8°, dosing per Pharmacy. First dose pulled from Med Dispense and given in res right buttocks with no noted adverse reactions and no noted pain or discomfort. Will continue to monitor. Output was 300ml.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/11/2016 22:39 Type: Health Status Note

Note Text:

Note Text : 3-11. VS. Bp- 135/89, T-98.2, P- 92, R- 20. Clinically stable this shift. HOB elevated, resp even and unlabored. All scheduled meds given via tube, tolerated well. Incont care provided with 2 staff assist, repositioned Q 2 hrs for comfort. Mouth care provided x 2. No acute distress noted this shift.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/11/2016 22:26 Type: Health Status Note

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Incorrect Documentation - ~~BP: 128/80~~
Incorrect Documentation - ~~04/15/2016 00:47~~
Incorrect Documentation - ~~Temp: 98.8~~
Incorrect Documentation - ~~04/15/2016 00:47~~
Incorrect Documentation - ~~Pulse: 84~~
Incorrect Documentation - ~~04/15/2016 00:47~~
Incorrect Documentation - ~~Resp: 22~~
Incorrect Documentation - ~~04/15/2016 00:47~~

Strike Out Date: 4/15/2016 04:52

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/14/2016 20:46 Type: Health Status Note

Note Text:

Note Text : Resident in bed resting quietly with eyes open. Do not follow direction. Needs anticipated and met by staff. Conts on IM Gentamycin 140mg for treatment of UTI with no s/s of adverse reaction noted. T98.0. Foley cath to bedside gravity with 400ml of clear amber urine. Turn q 2 hrs to relief pressure. Oral care provided. Total care with adls. No acute distress noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/14/2016 11:37 Type: Pharmacy Consultant Note

Note Text:

Note Text : Medication regimen reviewed; 4/11 d/c Zosyn, start Gentamycin x7d for UTI
Labs: 3/16 Mg 2.2, CMP SCr 0.88, K 4.1, B12 925
Risk Meds: Dexilant (3/16), Keppra (seizures)
Assessment: VS/Wt reviewed
Recommendations: none
Monitor: status

Author: Nikki Kennedy - Pharmacist Consultant [e-SIGNED]

4/14/2016 10:48 Type: Health Status Note

Note Text:

Note Text : T 97.2, continues on ABT Gentamycin IM for UTI with no adverse reaction, total care given with ADLs, turned and repositioned q 2hrs, HOB kept elevated, G.tube intact and infusing feeds well, flushed with water with some resistance due to Glucerna easily clog up , foley catheter intact and draining clear amber urine.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/14/2016 07:07 Type: Infection Note

Note Text:

Note Text : Res continue ABT for UTI with no s/s of adverse reactions and no s/s of pain or discomfort. Will continue to monitor. ABT given to Left thigh. Urinary output 300ml via foley catheter which is patent. Urine is dark yellow with minimal sediment

Current Vitals
BP: 112/70
04/14/2016 00:55
Temp: 96.3
04/14/2016 00:55
Pulse: 86

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

resident clinically stable this shift, remain alert and non verbal, oral care provided x 2. repositioned Q 2 hrs for comfort. Tolerating tube feeding of glucerna 1.5 running at 60 cc/hr. Needed 2 staff to provide care this shift. Breathing well. HOB elevated at all times. No acute distress noted this shift.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/16/2016 06:05 **Type:** Infection Note

Note Text: Resident continues ABT for UTI. No adverse reactions noted. Urinary output 400. Amber in color. Catheter care provided. vs t 98.2 82 20 132/86 94%Rested well without any issues.

Author: Kenyatta Rose - Licensed Practical Nurse [e-SIGNED]

4/15/2016 22:28 **Type:** Infection Note

Note Text:

Note Text : VSS 132/60 97.3 78 20. Resident continues on IM ABT with no adverse reaction. Awake but non verbal. No tracking noted. Meds and water flushes administered and tolerated. Totally dependent on staff for ADLs. Repositioned Q2hrs for comfort. Oral care provided. All safety measures in place. Staff will continue monitoring for changes

Author: Priscilla Gasson - LPN [e-SIGNED]

4/15/2016 10:48 **Type:** Health Status Note

Note Text:

Note Text : 7-3. VS. BP- 122/84, P- 99, R- 20, T- 98.6 and O2 sats 92% R/air. Currently in bed wit HOB elevated, resp even and unlabored. Incont care provided by staff. Mouth care provided. G-tube site dressing changed. Continues on IM ABT for UTI, no adv. reaction noted. Tolerating water flushes and tube feeding of glucerna 1.5 running at 60 cc/hr well. No acute distress noted thus far. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/15/2016 04:52 **Type:** Infection Note

Note Text:

Note Text : Res continue ABT for UTI with no s/s of adverse reactions and no s/s of pain or discomfort. Will continue to monitor. ABT given to right buttocks. Urine is dark yellow with minimal sediment

Current Vitals
BP: 128/80
04/15/2016 00:47
Temp: 98.8
04/15/2016 00:47
Pulse: 84
04/15/2016 00:47
Resp: 22
04/15/2016 00:47

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

~~4/15/2016 04:51~~ **Type:** ~~Infection Note~~

Note Text: Incorrect Documentation -
Incorrect Documentation - ~~**Note Text :** Res continue ABT for UTI with no s/s of adverse reactions and no s/s of pain or discomfort. Will continue to monitor. ABT given to Left thigh. Urinary output 300ml via foley catheter which is patent. Urine is dark yellow with minimal sediment~~
Incorrect Documentation -
Incorrect Documentation - ~~Current Vitals~~

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text : 7-3. 120/64, T- 98.6, P- 94, R- 18 and O2 sats 94% R/air. His condition remain the same. He is nonverbal and alert. 2 staff assist with care, turning and repositioning. Continues on IM ABT for UTI, zero adv. reaction noted. Tolerating g-tube water flushes and tube feeding of glucerna 1.5 well. No acute distress noted thus far. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/18/2016 05:52 Type: Vitals Note

Note Text: temp 98.6°
pulse 94
resp 18
bp 120/64
SPO2 94%

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/18/2016 05:49 Type: Infection Note

Note Text: Res continues IM ABT for UTI with no adverse reactions and no s/s of pain or discomfort. Noted blood clots in urine this AM. Urine was amber in color and total output was 210ml. Will continue to monitor.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/17/2016 11:31 Type: Health Status Note

Note Text:

Note Text : 7-3. VS. Bp- 121/87, T- 96.1, P- 95, R- 20.)2 sats 92% R/air. a
Currently in bed with HOB elevated. Tube feeding of glucerna 1.5 running at 60 cc/hr, tolerating it with water flushes well. 2 staff assist provided care this AM. he has been repositioned Q 2 hrs for comfort. Oral care provided x 2 thus far.
Continues on IM ABT for UTI, f/cath in place and draining yellow urine. No acute distress noted thua far. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/17/2016 06:22 Type: Infection Note

Note Text: Res continues IM ABT for UTI with no adverse reactions and no s/s of pain or discomfort. Will continue to monitor. Urine yellow with minimal sediment and foley patent, draining to gravity bag.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/16/2016 21:54 Type: Health Status Note

Note Text: Res continues IM ABT for UTI with no adverse reactions and no s/s of pain or discomfort. Will continue to monitor. Urine yellow with minimal sediment and foley patent, draining to gravity bag.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/16/2016 15:29 Type: Medicare Daily Note

Note Text: 7-3. No adv. eaction noted from current IM ABT for UTI, tolerating g-tube water flushes well. F/cath draining yellow urine with no sediments. T- 97.5.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/16/2016 14:50 Type: Medicare Daily Note

Note Text:

Note Text : 7-3. Vs. Bp- 127/80, T- 97.5, P- 80, R- 20.

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text : Resident readmitted to the facility to room 213, arrived to the facility via medic from CMC. He is a 66 year old male with medical history of acute renal failure, anoxic brain injury, diabetes mellitus, dyslipidemia, dysphagia, history of MRSA, persistent vegetative state and status post tracheostomy. He is alert to self, no s/s of discomfort noted. Noted with O2 @ 2 liters via NC. Resident NPO, placed on Pivot 1.5 but order received from On call to use Glucerna 1.5 @ 60 ml/hr. till pivot is delivered to the facility. Skin warm and dry, turgor elastic. Noted with pressure area to right and left buttocks. Vital sign, 97.0, 124/88, 95, 20. laying in bed resting at this time, staff to continue to monitor resident at this time.

Author: Stephen Ezeh - Licensed Practical Nurse [e-SIGNED]

4/25/2016 20:55 Type: Order Note

Note Text: The system has identified a possible drug allergy for the following order: Dexilant Capsule Delayed Release 30 MG

Give 1 capsule via PEG-Tube two times a day for per order

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/20/2016 06:30 Type: Incident Note

Note Text:

Note Text : Resident alert and non verbal. Appears to be short of breath. Stopped continuous feed. Respirations uneven and labored Resp. 42. O2 stats 75. Administered oxygen to increase stats. O2 stats went up to 78%. Resident sweating profusely bs 244. temp 99.0 bp 163/89. Lung sounds clear. Bowel sounds present x 4 quads. Supervisor Notified. Received order from on call to sent out to hospital. Sent to cmc main at 0600. Guardian notified.

Author: Kenyatta Rose - Licensed Practical Nurse [e-SIGNED]

4/19/2016 22:33 Type: Health Status Note

Note Text: BP 115/67,T 97.9, P70, R20, BS-209, O2 sats 94% RA. Urinary output 200. No signs of pain or distress noted. Continues on Glucerna tube feeding. Tolerated G tube flushes without difficulty. ABT completed for UTI. No adverse reaction noted.

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/19/2016 15:29 Type: Health Status Note

Note Text:

Note Text : T 96.7, P 114, R 20, BP 138/90, BS 205, RPT pulse 96, note left for MD/NP to address high pulse, no signs of discomfort, no respiratory distress, turned and repositioned q 2 hrs, continent care given and kept clean and dry, total care given with ADLs dressing sacrum changed.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/18/2016 14:35 Type: Nutrition/Dietary Note

Note Text:

Note Text : Resident continues on TF as sole source of nutrition and hydration. Receives Glucerna 1.5 x 60 mL/hour continuous feeds. THis provides 2160 calories, 119 gm protein, 1093 mL fluids per day, and 2173 total fluids with water flushes. Resident is followed by wound care nurse for Unstageable wound to R sacrum. Per nursing reports, the wound is improving in size, an indication of adequate nutrition.
Current weight is 202 lb and stable.
Will continue to follow.

Author: Mary Boccardo - Dietician [e-SIGNED]

4/18/2016 11:02 Type: Medicare Daily Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

4/26/2016 16:43 **Type:** COMMUNICATION - with Family/NOK/POA

Note Text:

Note Text : Received a call from resident DSS guardian (Amanda)who presents concern of resident not having foley catheter in place after the falling off of his condom catheter during transfer to bed by medics .Effort to Explained to her by this writer and another nurse that same will be addressed after review of wound by wound nurse and MD/NP in am was in vain. She insisted that Doctor should be called immediately for re-insertion of foley catheter as to prevent the wound from getting worse.Situation repoted to PEC on call (S.Ashe)who ordered to re-insert the foley per DSS request. Call DSS back and notified of the order and the re-insertion of the foley catheter with good appreciation voiced. ADON called and made aware of the above situation.

Author: Georgeline Ihekaire - RN [e-SIGNED]

4/26/2016 15:59 **Type:** Health Status Note

Note Text: T 96.4, P 96, R 20, BP 146/78, alert but non verbal, no signs of discomfort, no respiratory distress, total care given with ADLs.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/26/2016 06:14 **Type:** Health Status Note

Note Text: PT = 14.5
INR = 1.2

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/26/2016 04:25 **Type:** Health Status Note

Note Text:

Note Text : Res readmitted s/p PE and now on anticoagulant therapy. Will perform PT/INR this AM. No noted respiratory distress and res remains on O2 at 2L via NC. BS are stable and no coverage has been required. Res is turned and repositioned by staff Q2°. Will continue to monitor.

Current Vitals
BP: 126/88
04/26/2016 01:51
Temp: 98
04/26/2016 01:51
Pulse: 92
04/26/2016 01:51
Resp: 20
04/26/2016 01:51
BS: 133
04/26/2016 00:26

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

4/25/2016 21:58 **Type:** Admission Summary

Note Text:

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

BP: 131/83
04/28/2016 03:52
Temp: 98.3
04/28/2016 03:52
Pulse: 99
04/28/2016 03:52
Resp: 23
04/28/2016 03:52

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

Late Entry
4/27/2016 21:58 Type: Health Status Note

Note Text:

Note Text : VS- 120/ 68, 98.0, 90, 20, Resident is in bed watching TV with his son by his bedside, resident is responsive and able to respond to each question, son stated that resident cough and was unable to spilt up sputum, resident was suction twice on this shift, resident was able to tolerate procedure well, oral care was provided after each suction, MD was notified, no respiratory distress noted, resident continue watching TV after suction and was able to respond to questions,SPO2 is 94% on 2L O2 via NC, no sob noted.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

4/27/2016 14:58 Type: Health Status Note

Note Text: T 98.6, P 93, R 20, BP 118/82, 02 sat 94% with 02 at 2l/min. Alert but non verbal, no signs of discomfort, total care given with ADLs by 2 aides, no signs of respiratory distress noted.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/27/2016 14:35 Type: Social Worker Note

Note Text: Admission paperwork from previous admission used. SW did speak with the Guardianship office to confirm DNR status from the hospital. Guardianship office confirmed DNR status and a new Acknowledgement of ACD and DNR request was sent for signature.

Author: Amy Walker - Social Worker [e-SIGNED]

4/27/2016 04:27 Type: Health Status Note

Note Text:

Note Text : Res is s/p PE, continues anticoagulant therapy with no noted bleeding, no noted respiratory distress, remains on O2 at 2L via NC, BS are stable, turned and repositioned by staff Q2°, foley catheter reinserted yesterday per DSS request, output being monitored. Will continue to monitor.

Current Vitals
BP: 132/76
04/27/2016 01:31
Temp: 98
04/27/2016 01:31
Pulse: 80
04/27/2016 01:31
Resp: 22
04/27/2016 01:31

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text:

Note Text : 7-3. VS. Bp- 123/80, T- 97.6, P- 85, R- 20 and O2 sats 97% on 2L oxygen. Clinically stable this shift. Alert and non verbal. All scheduled meds given via tube, tolerated well. Tolerated tube feeding of pivot 1.5 running at 60 cc/hr and water flushes well. repositioned Q 2 hrs for comfort with 2 staff assist. His total care and depends on 2 staff assist for all his cares and ADLS this shift. Personal sitter and daughter in the room with resident at this time. Mouth care provided x 3. HOB elevated >30 degrees at all times. Suctioned PRN x 2 this shift and desired result noted. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/30/2016 22:30 Type: Health Status Note

Note Text:

Note Text : Resident remains non verbal. Eyes open with no tracking noted. Son in to visit. Requested for resent to be suctioned. No tracheal secretions present. Repositioned in bed. Son made aware that suctioning was not needed at this time but I was not able to discuss patient.s status further. Son was irritable and stated he was going to discuss this further with someone above this writer. Reviewed DSS guidelines with him and he responded he knew the rules. Son left at 2005 the same time the sitter left. Patient sleeping quietly at this time. Feeding infusing at 60 ml/hr. Residual 10 cc. Oral care provided X 3 this shift. All safety measures remain in place.

Author: Priscilla Gasson - LPN [e-SIGNED]

4/30/2016 15:23 Type: Medicare Daily Note

Note Text:

Note Text : 7-3. Vs. Bp- 118/84, T- 97.3, - 89, R- 20 and O2 sats 98% on 2L of oxygen. resident's condition remain the same. He is in bed with HOB elevated, alert and non verbal. Breathing well. personal sitter in the room with resident at this time. resident's daughter is also in the room at this time. Wife visited resident this AM. Resident is total care and needed 2 staff assist with care , turning and reposition. Mouth care provided x 3 this shift. Dressing to bottom done as ordered. Tolerating tube feeding of pivot 1.5 running at 60 cc/hr and water flushes well. G-tube sire dressing changed as ordered. 1200 bs per finger stick 145. Foley cath intact and draining yellow urine. 400 cc of urine collected from cath bag this shift. No diabetic nor any acute distress noted this shift.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

4/29/2016 15:36 Type: Health Status Note

Note Text: T 96.4, P 78, R 20, BP 120/69. Alert and non verbal, no signs of discomfort, new Coumadin orders noted after INR result. Continues on total care, have 3 loose stool after dulcolax suppository and Colace.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/28/2016 16:15 Type: Health Status Note

Note Text:

Note Text : T 97, P 72, R 20, BP 142/69, BS 160. Alert but none verbal, no signs of discomfort noted, G.tube intact and infusing Pivot at 60ml/hr well and foley catheter intact draining clear amber urine. His family visited well on 7-3 shift. Total care given with ADLs, turned and repositioned q2 hrs.

Author: Suwilanji Thindwa - RN [e-SIGNED]

4/28/2016 04:42 Type: Health Status Note

Note Text:

Note Text : 3-11 nurse informed that res was suctioned on her shift. This nurse noted that res was crackling on expiration. Nurse suctioned res and noted an improvement in respiratory status. Current SPO2 is 95% on 2L O2 via NC.

Current Vitals

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/9/2016 14:56 Type: Admission Summary

Note Text:

Note Text : 7-3. VS. Bp- 153/98, T- 98.7, P- 85, R- 20 and O2 sats 96% R/air.
Resident re-admitted to the unit at 12:50 PM vai stretcher by medics after a brief stay at CMC hospital. He is alert and non verbal. Resp even and unlabored. Head to toe skin sweep done, He does have an open area to right buttocks and bottom is red and incont dermatitis. He has a peg tube and he came in with a condom catheter. Second step given to RFA intradermally (0.1ml), tolerated well. He is adjusting well. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/3/2016 16:47 Type: COMMUNICATION - with Family/NOK/POA

Note Text:

Note Text : Late entry for 5/2/16: ACC social worker and this writer had conversation via phone call with social workers managing the case of Albert Bradley. Call was placed regarding resident's family members attempting to dictate resident's care to ACC staff members, as well attempting to provide care for resident while visiting. The social workers managing resident's care stated that a stricter visitation schedule would be drafted. Resident discharged to hospital on 5/2/16, but visitation schedule should be implemented upon resident's return to facility.

Author: Brooke Patterson - Project Lead [e-SIGNED]

Late Entry
5/2/2016 18:00 Type: Health Status Note

Note Text:

Note Text : Resident had labored breathing with RR 29, abdominal distended and tight, vomiting, VS: Temp 102.9, RR 29, BP 140/79, pulse 106, O2 97 on 2LNC, received Magnesium citrate, BS was 156, notified the on call Dr. and got an order to send him to the ER, supervisor notified DSS, sent him CMC main.

Author: Likawunt Halche - LPN [e-SIGNED]

5/2/2016 16:01 Type: Health Status Note

Note Text:

Note Text : T 96.4, P 97, R 20, BP 137/85. Resident spiting out semi digested feeds, abdomen distended, bowel sounds positive in both lower quadrants, no BM in two days, rectum- no BM, dulcolax suppository given, resident had very loose BM, NP advised to give Mag Citrate start, medication not available, NP advised to call pharmacy to supply via back up. Pharmacy informed.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/1/2016 18:44 Type: Incident Note

Note Text:

Note Text : Resident alert and non-verbal. Needs anticipated and met by staff. Wife and sitter at bedside. CNA reported while responding to pt loud moaning/groaning noise observe resident wife suctioning him . Sitter away for her break.On assessment resident resting in bed with no indication for suctioning. ,HOB increased at all times. Wife educated by the supervisor to call staff for any care which she comm. understanding but later became upset due to questions asked about pt medical information was not revealed to her per instruction by DSS. She got angry and left the room.DSS called,on her return call made aware of the above situation by this nurse and supervisor.States will take care of it. PT V/S T97.6,P85,R20,BP 123/80,SAT 97 With oxygen at 2L/MIN.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/1/2016 14:19 Type: Medicare Daily Note

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Author: Krystal Humphrey - LPN [e-SIGNED]

5/11/2016 15:08 Type: Health Status Note

Note Text:

Note Text : T 97, P 90, R 24, BP 134/76, 02 sat 94% on room air. Alert but none verbal, Abdomen distended, bowel sound positive in 4 quadrants, seen by NP who advised to hold Gtube feeds and Stat KUB, results in and NP reviewing them, Dietician in and changed feeds to Jevity 1.5, HOB elevated, total care given with ADLs.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/11/2016 14:42 Type: Nutrition/Dietary Note

Note Text:

Note Text : Tube feeding order clarification: Resident was placed on Glucerna 1.5 x 60 mL/hour on readmission as this was the most clinically appropriate formula for him on prior admissions, AEB wound was healing and weight was stable. However, per guardian/SW, resident's family feels Jevity 1.5 is the most appropriate formula, and this is what he was placed on in hospital on most recent admission. Discussed protein content of Jevity vs. Glucerna and that resident will receive less protein and more carbohydrate on Jevity as it is currently ordered.
RD wrote order to d/c Glucerna 1.5 @ 60ml/hour and start Jevity 1.5 @ 70 mL/hour per guardian/SW request. Will continue to follow.

Author: Mary Boccardo - Dietician [e-SIGNED]

5/11/2016 07:18 Type: Health Status Note

Note Text:

Note Text : Resident resting with eyes closed. Respirations even and unlabored. No respiratory distress or sob noted at this time. 02 93%ra. Resident did not have another episode of vomiting during the remainder of the shift. Started feeding back Glucerna 1.5 at 0630 per order. turned and repositioned during shift. HOB elevated. G-tube is patent and flushes well without any issues. bs 120 at 0000 and 126 at 0600. Will continue to monitor.

Author: Kenyatta Rose - Licensed Practical Nurse [e-SIGNED]

5/11/2016 03:48 Type: Health Status Note

Note Text:

Note Text : Resident alert and making grunting and coughing sounds. vs: 94%ra p94 t98.7 150/95 Respirations even and unlabored. Vomiting noted x 4 times. Small amounts of vomiting within 5min. increments at 0145. Vomit appears to be undigested feeding with a tan color. Called PEC. Received order from Heather Yates PA: Hold feeding Glucerna 1.5 x 4 hrs; Administer Phenergan Suppository 25mg NOW. HOB remains elevated. and resident turned and repositioned. Will continue to monitor.

Author: Kenyatta Rose - Licensed Practical Nurse [e-SIGNED]

5/10/2016 22:18 Type: Health Status Note

Note Text:

Note Text : 3-11. Vs. Bp- 152/82, R- 20, P- 92, T- 98.9(oral) and O2 sats 96% R/air.
Received resident in bed sleeping with abdomen distended, resp even and unlabored AEB even rise and fall of thorax region. Duoneb tx administered as ordered, tolerated well. So far resident has had 2 excessive loose stools. Resident has x 1 episode of vomiting. care provided by staff. Resident is total care and depends on staff basically for all his care.
Result of CXR came in , result called in to PEC on call and zero orders given by Heather Yates. PEC on call made aware of x1 episode of vomiting. No orders given. Result of xray placed in PEC book for eval in AM. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

5/10/2016 15:57 Type: Health Status Note

Note Text:

Note Text : T 98.9, P 86, R 20, BP 147/77, 02 sat 97% on room air. Alert and none verbal, during morning round and first med pass round, resident resting quietly with no respiratory distress, his abdomen soft and not distended. Around 11.30, his daughter visiting, she called the nurse to check on resident who she reported that he is spiting out food and looks like he is having resp distress. Thin writer went to check on resident, noted with Abdominal distension, SOB and wheezing with spit on his shirt, NP notified about resident's condition, resident suctioned, New telephone orders received to give half bottle of mag citrate now and give glycerin suppository after an hour which was given and resident had watery BM, Stat CXR which was called in, duoneb nebulizer TID x7 days, first dose of duoneb given around 2 pm. Resident calm with no SOB after nebulizer treatment. Total care given with ADLs by 2 aides.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/10/2016 12:45 Type: Health Status Note

Note Text:

Note Text : Staff reported that resident's family member was in visiting resident this morning without a supervised companion. Supervised visitation is the condition that must be in place in order for family to visit. Gaston County DSS to provide companion. After family member left facility, resident started vomiting again. NP made aware and staff nurse following up on new orders. This writer and ACC social worker to follow up with case managers for DSS-Gaston County regarding lack of supervised visitation that occurred this morning.

Author: Brooke Patterson - Project Lead [e-SIGNED]

5/10/2016 08:49 Type: Social Worker Note

Note Text:

Note Text : Resident readmitted from the hospital - admission paperwork from previous admission used. SW spoke with rep from Gaston Co. DSS and confirmed that family visitation hours remain between 8am-8pm. SW to follow up with Gaston Co. DSS re: providing a sitter in the room for supervision during family visitation hours.

Author: Amy Walker - Social Worker [e-SIGNED]

5/10/2016 08:45 Type: Social Worker Note

Note Text:

Note Text : Resident readmitted from the hospital - admission paperwork from previous admission used. SW did speak with rep from Gaston Co. DSS and confirmed that family visitation is still allowed from the hours of 8am to 8pm. SW to follow up with Gaston Co. DSS regarding providing a sitter in the room during family visitation hours.

Author: Amy Walker - Social Worker [e-SIGNED]

5/9/2016 22:44 Type: Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Resting quietly in bed with eyes open.Flaccid bil UE and LE. Needs anticipated and met by staff. G-Tube patent and positive for placement.Tol feeding of Glucerna 1.5 @ 60ml/hr. Had large BM this shift. Incontinent care as needed by staff. Turn and repositioned q 2hrs to relief pressure. No SOB noted sat 97%. Oral care provided.No acute distress noted. V/S T97.2,P68,R20,BP 122/71.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/9/2016 17:09 Type: Order Note

Note Text: The system has identified a possible drug allergy for the following order: Dexilant Capsule Delayed Release 30 MG

Give 1 capsule via G-Tube two times a day for per order

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text : Medication regimen reviewed; d/c Scopolamine, Metformin, start Bethanechol 25mg QID for urinary retention, Coumadin 6.5mg QD
Labs: 5/11/16 INR 2.2, 3/16 Mg 2.2, CMP SCr 0.88, K 4.1, B12 925
Risk Meds: Dexilant (3/16), Zantac, Keppra (seizures)
Assessment: VS/Wt reviewed
Recommendations: MD-dup tx
Monitor: status

Author: Nikki Kennedy - Pharmacist Consultant [e-SIGNED]

5/16/2016 06:32 Type: Health Status Note

Note Text:

Note Text : Performed PT/INR on res, results are:
PT - 65.7
INR - 5.5
Called on call and received order to DC Lovenox and place Coumadin on hold until Wednesday. Recheck PT/INR Wednesday morning and call oncall to determine if Coumadin will be restarted at 8mg or if dosage will change.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

5/16/2016 04:09 Type: Health Status Note

Note Text: Res sleeping throughout the shift with no noted distress and no s/s of pain or discomfort. Res continues Jevity 1.5 at 25ml/hr with no residual thus far. Will continue to monitor for GI upset or abdominal distention.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

5/15/2016 22:50 Type: Health Status Note

Note Text:

Note Text : Resident is alert but non verbal. Eyes wide open but no tracking noted. In no acute distress. No cues to pain/discomfort noted. Breath sounds diminished but clear all fields. Tube feeding restarted earlier today and resident is tolerating it well. Residual checked 6 hours after feeding was restarted and <5 cc obtained. No coughing or dyspnea noted. HOB elevated. Gtube patent and in place. Water flushes and all scheduled meds administered and tolerated. Continues on anti coagulation therapy. Frequent oral care provided. NPO status maintained. Sitter present until 2000. One family member visited this PM and left same time as sitter. All safety measures are in place. VSS 151/88 83 20 98.7

Author: Priscilla Gasson - LPN [e-SIGNED]

5/15/2016 14:18 Type: Health Status Note

Note Text:

Note Text : Resident alert and non verbal. No s/s of acute distress noted. Cont.peripheral IV D5 1/2 NS x 75ml/hr. No s/s of N/V note on this shift. Peripheral site check. No redness, swelling noted. IV flush well. Voice no c/o pain and show no s/s of discomfort noted. Peg tube flush well. Total care with ADL. wound drsg to sacrum change. No odor or s/s of infection noted. Foley cath intact with yellow urine in drainage bag. Peg tube residual check. No resident noted. feeding start this afternoon. VI fluid stop also. Will cont. to monitor closely.

Author: Jusulyn Bemah - Licensed Practical Nurse [e-SIGNED]

5/14/2016 22:14 Type: Health Status Note

Note Text: Resident guardian DSS (Stevenson Stephanie)called and updated on resident condition and neworders. She states if resident condition did not improve after the restart of feeding, he should be sent to Hospital.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/14/2016 21:14 Type: Health Status Note

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text:
Note Text : Resident in bed resting quietly with eyes open. IV D51/2NS setup at 1530 via peripheral line right AC @ the rate of 75ml/hr,to run x 24hrs. . Tube feeding on hold.Same to start after d/c of I.V infusion. Spouse in to visit and left at 2000. Sitter at bedside. Dulcolax sup and miralax given as ordered. Result pending. Resident turn q 2hrs to relief pressure. Oral care provided. No SOB noted. Tol neb RX. sat 97%. +2 person assist with adls/transfer. BS WNL. No acute distress noted. V/S T98.2,R18,P88,BP120/75.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/14/2016 16:32 Type: Health Status Note

Note Text: IV of D5 1/2NS started with #22 catheter into right anticubital vein. No redness or swelling noted. fluids infusing well.

Author: Kristin Woodyard - RN [e-SIGNED]

5/14/2016 15:42 Type: Health Status Note

Note Text:
Note Text : Resident started on Jevity 1.5 this morning with about 10ml residual, after 6hours residual was >100ml. On call notified, new orders to d/c prior tube feed orders, start peripheral IV D5 1/2 NS x 75ml/hr x 24h, check residual after 6hrs, if >75ml hold TF and notify pec, one dose of miralax and one ducolax supp to be given. Monitor for fever and vomiting.

Author: Aisha Khanani - Licensed Practical Nurse [e-SIGNED]

5/14/2016 06:49 Type: Health Status Note

Note Text:
Note Text : Resident tube feeding on hold to be restarted this am @0800. Abdomen rounded and firm. Had large watery stool this am. Turn and repositioned q 2hrs to relief pressure. Bil UE and LE flaccid.+ 2 person assist with adls/using hoyer lift for transfer. No respiratory distress noted.V/S T98.0,P70,R18,20 SAT 97%.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/12/2016 13:19 Type: Health Status Note

Note Text:
Note Text : T 98, P 90, R 22, BP 148/87, abdomen distended, 100mls residual, bowel sounds present in all 4 quadrants, seen by Dr Pierce who gave an order to continue holding Gtube feeds until further evaluation, insert foley catheter due no voiding x8 hrs, keep the foley catheter for 1 week. foley catheter inserted and 500mls urine drained.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/12/2016 07:44 Type: Health Status Note

Note Text:
Note Text : Res condition was stable through the night. G-Tube feeding Jevity 1.5 was on hold through the night as ordered. G-Tube was in place and patent, flushed per protocol. Res is alert and responsive. He did not void through the 8 hour shift. MD was who was in the building earlier in the shift was made aware. No other issues noted at this time. Res in in bed with eyes closed.

Author: Priscillia Okoro - RN [e-SIGNED]

5/11/2016 21:31 Type: Health Status Note

Note Text:
Note Text : mbr rx n/o to hold tube feed till 0800. mbr tube was flushed per Md orders. this nurse check for fecal impaction. mbr had soft stool and Colace suppository was given per Md order. rsdt had huge BM and was assisted by 2 from staff. RN supervisor placed fecal tube for release of Gas. rsdt continues diabetic monitoring.

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text : Nutrition note: Spoke with nurse supervisor re: tube feeding regimen running @ 25ml/hr. Informed nurse contacted MD today and increased tube feeding to Jevity 1.5cal @ 45ml/hour + current flushes. Weight on 5/15 194.6#. Resident with recent weight loss. Tube feeding regimen held d/t increase residuals (recent vomiting) and received IV fluids on 5/14 of D5 1/2 NS @ 75ml/hour and tube feeding held and re-initiated on 5/15 at rate of 25ml/hour. Attempted to contact guardian Amanda Green x2 at phone # 704-862-7588 but answering machine indicated "mailbox full" and unable to leave message. Continue to monitor

Author: Karen Davis - Registered Dietician [e-SIGNED]

5/18/2016 14:38 **Type:** Health Status Note

Note Text:

Note Text : VS- 122/79, 22, 96.4, 77,02 sat 94% on room air, Alert and none verbal, no signs of discomfort, no respiratory distress, abdomen soft and none tender, foley catheter intact and draining clear amber urine, no foul odour noted at this time. G. Tube intact and infusing as ordered, no residual, flushed we with water as ordered, resident is total care given with ADLs by 2 aides, turned and repositioned q 2 hrs, no sign of sob or distress noted at this time, no diabetic distress noted.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

5/17/2016 21:54 **Type:** Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Resting quietly in bed with eyes open.Flaccid bil UE and LE. Needs anticipated and met by staff. G-Tube patent and positive for placement.Tol feeding of Glucerna 1.5 @ 25/hr. No residual. Incontinent care as needed by staff. Turn and repositioned q 2hrs to relief pressure. No SOB noted sat 97%. Oral care provided.No acute distress noted. V/S T98,P84,R20,BP 133/85.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/17/2016 14:46 **Type:** Health Status Note

Note Text:

Note Text : T 96.5, P 86, R 20, BP 148/84, 02 sat 97% on room air. Alert but none verbal, signs of mild discomfort noted, mild abdominal distension due to gas, simethcone given with mild effect, HOB kept elevated above 30 degrees, no vomiting noted, turned and repositioned q 2hrs, wound care done on the sacrum, wound healing and smaller. Total care given with ADLs by 2 aides.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/16/2016 22:59 **Type:** Health Status Note

Note Text: Resident was mooning and received Tylenol 650mg at 1530, pain med was effective

Author: Likawunt Halche - LPN [e-SIGNED]

5/16/2016 15:39 **Type:** Medicare Daily Note

Note Text:

Note Text : T 96.4, P 85, R 22, BP 158/96, 02 sat 94% on room air. Alert and none verbal, no signs of discomfort, no respiratory distress, abdomen soft and none tender, bowel sounds positive in 4 quadrants, foley catheter intact and draining clear amber urine. G. Tube intact and infusing Jevity 1.5 at 25ml/hr, no residual, flushed we with water. Total care given with ADLs by 2 aides, turned and repositioned q 2 hrs.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/16/2016 13:48 **Type:** Pharmacy Consultant Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/20/2016 11:55 **Type:** Nutrition/Dietary Note

Note Text:

Note Text : Nutrition note: Spoke with NP re: tube feeding regimen and informed resident tolerating Jevity 1.5 cal @ 45ml/hour. Orders written to increase tube feeding to 75ml/hour continuous. Attempted to contact resident's guardian Amanda Green-left message on answering machine re: increase in tube feeding rate.

Author: Karen Davis - Registered Dietician [e-SIGNED]

5/20/2016 11:35 **Type:** Health Status Note

Note Text: 7-3. New order written to d/c zantac to 150 mg daily and to increased tube feeding to 75 cc/hr.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/19/2016 22:16 **Type:** Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Resting quietly in bed with eyes open. Needs anticipated and met by staff. G-Tube patent and positive for placement.Tol feeding of Glucerna 1.5 @ 45mls/hr. No residual. Incontinent care as needed by staff.Adm.dulcolax supp.with noted large watery stool. Turn and repositioned q 2hrs to relief pressure. No SOB noted sat 97%. Oral care provided.No acute distress noted. V/S T97,P95,R20,BP 146/88.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/19/2016 15:14 **Type:** Medicare Daily Note

Note Text:

Note Text : VS- 141/73, 22, 87, 97.4, sat 95% on room air, Alert and none verbal, resp is even and unlabored, skin warm to touch, no sob no coughing noted at this time, no signs of discomfort, no respiratory distress, abdomen soft and none tender, foley catheter intact and draining clear amber urine, no foul odor noted at this time. G. Tube intact and infusing as ordered, g tube feeding continue on jevity 1.5 at 45/hr as ordered, no residual, flushed we with water as ordered, resident is total care given with ADLs by 2 aides, turned and repositioned q 2 hrs, resident is up in the common area t this time, no distress noted at this time, no diabetic distress noted.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

5/18/2016 22:28 **Type:** Health Status Note

Note Text:

Note Text : Res is clinically stable. No new changes noted within the shift. Res was started on 1.5 Jevity as was ordered from the previous shift. HOD was elevated, no sign of aspiration noted. Feeding is well tolerated. Vital signs at 1536 were 117/80, 97.5,77,22 and BS at 1700 was 112. Res is in bed at the time of this entry with eyes closed. Will continue to be monitored.

Author: Priscillia Okoro - RN [e-SIGNED]

5/18/2016 16:05 **Type:** Nutrition/Dietary Note

Note Text: Nutrition note: Spoke with Amanda Green via phone re: tube feeding increased to Jevity 1.5 @ 45ml/hour + flushes and weight on (5/15) 194.6#.

Author: Karen Davis - Registered Dietician [e-SIGNED]

5/18/2016 14:44 **Type:** Nutrition/Dietary Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text : Discussed in Stand up meeting. Albert Bradley room 213 fall 5/23 at 2200. Called by the CNA to resident room @ 2200 who was observed lying facedown on the floor with his face on G-tube feeding pole legs. CNA reported resident fell in the process of coughing heavily rolled OOB towards the left side of his bed prior her intervention to break the fall. On assessment, noted laceration on his right eyebrow and blood right side of his mouth with no open area observed. Pressure dressing applied over the laceration and oral care provided. Resident also assessed by the supervisor who said resident should not be moved and she called 911. Returned from ER with sutures to R eyebrow. Intervention: Resident has a custom hospital bed at home and plan to see if could be brought to facility for him to use. Bed placed in lowest position.

Author: Maylar Wing - RN [e-SIGNED]

5/24/2016 10:39 **Type:** Health Status Note

Note Text:

Note Text : T 98.9, P 98, R 20, , 02 sat 98% on room air. Alert but non verbal, signs of discomfort noted, no respiratory distress, chest clear with no congestion, S/P fall, suture line RT eyebrow dry and intact, RT side of lip mild swelling, abd soft and non tender, bowel sounds positive in 4 quadrants, HOB kept elevated. Tylenol 650mg VT given for discomfort, turned and repositioned q 2hrs. Bed in the lowest position, 2 aides assisting with care during ADL care.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/24/2016 04:15 **Type:** Incident Note

Note Text:

Note Text : Res returned from CMC Main at 0345 with no new orders. Laceration to right brow line was sutured and has six stitches present although it is hard to fully visualize the stitches d/t the hair of the eyebrow and the collection of dry blood. When attempting to clean away the dried blood, the laceration started to bleed again so nurse stopped.

Initial BP was 150/104, Nurse noted that res had nothing for pain at the hospital, according to the discharge summary. PRN Tylenol given. Rechecked BP which was 139/89.

Bed in lowest position and fall precautions maintained. Will continue to monitor.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

5/24/2016 00:16 **Type:** Incident Note

Note Text:

Note Text : 911. Resident gotten off the floor by medics and transported to CMC Main @ 22:25.DSS GuardianCalled by the CNA to resident room @ 2200 who was observed lying facedown on the floor with his face on G-tube feeding pole legs. On assessment, noted laceration on his right eyebrow and blood right side of his mouth with no open area observed. Pressure dressing applied over the laceration and oral care provided.CNA reported resident fell in the process of coughing heavily rolled OOB towards the left side of his bed prior her intervention to break the fall. Resident also assessed by the supervisor who said resident should not be moved and she called(S.Stevenson) called and made aware by supervisor and this nurse prior exit to Hospital. NP M.Davis also notified. V/S T98.6,P90,R20,BP155/90,SAT 95%RA.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/23/2016 16:56 **Type:** Plan of Care Note

Note Text: Pressure ulcer note, Stage III R sacrum 1.3x1.6x0.1cm, continue tx.

Author: Maylar Wing - RN [e-SIGNED]

5/23/2016 15:03 **Type:** Health Status Note

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text: 7-3. Coumadin increased to 3.5 mg and next PT/INR due in one week (05/30/16). No bruising nor any active bleeding noted.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/23/2016 12:59 Type: Health Status Note

Note Text:

Note Text : 7-3. Vs. Bp 139/86, P- 78, R- 20, T- 98.6 and O2 sats 97% R/air.
Resident currently in bed , HOB elevated, even rise and fall of thorax region. Eyes open. Room is calmed and quiet, with less stimulation. No coughing nor any resp distress noted. Remain alert and no verbal. Depend on staff basically for all his care and ADLS and staff continues to anticipate his needed. Tolerating tube feeding of jevity 1.5 @ 75 cc/hr and water flushes well. G-tube site cleanse and dry dressing applied. Repositioned Q 2 hrs for comfort. Abd soft and non distended thus far.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/22/2016 13:48 Type: Health Status Note

Note Text:

Note Text : T 99, P 82, R 20, BP 117/82, 02 sat 98% on room air. Alert but non verbal, no signs of discomfort, no respiratory distress, chest clear with no congestion, abd soft and non tender, bowel sounds positive in 4 quadrants, HOB kept elevated. Sacral wound clean, healing and smaller, dressing done. Family in to visit, private sitter in the room while family visiting.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/21/2016 15:09 Type: Health Status Note

Note Text:

Note Text : T 97.5, P 100, R 18, BP 148/74, 02 sat 98% on room air. Alert but non verbal, no signs of discomfort, no respiratory distress, chest clear with no congestion, abd soft and non tender, bowel sounds positive in 4 quadrants, HOB kept elevated. Sacral wound clean, healing and smaller, dressing done. resident up in a W/C for a few hours per order.

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/20/2016 21:29 Type: Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Resting quietly in bed with eyes open. Needs anticipated and met by staff. G-Tube patent and positive for placement.Tol feeding of Glucerna 1.5 @ 75mls/hr. 5mls residual. Incontinent care as needed by staff. Total care with adls.Turn and repositioned q 2hrs to relief pressure and comfort.Siiter at bedside. visited by wife and daughter. No SOB noted sat 98%. Oral care provided.No acute distress noted. V/S T98.4,P80,R20,BP 141/90.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/20/2016 14:45 Type: Health Status Note

Note Text:

Note Text : 7-3. Vs. Bp- 128/85, T- 98.7, P- 99, R- 20, O2 sats 98% R/air. Received resident in bed , HOB elevated, resp even and unlabored. Breathing well. 2 staff assist provided Am care and transfers in and out of bed. Depends on staff basically for all his care. Repositioned Q 2 hrs for comfort.
At 14:15 pm resident OOB sat on w/c but was unable to tolerated it, he kept shaking and coughing, he was assisted back to bed with help of 4 staff assist. Tolerating G-tube and water flushes well. G-tube site cleans and new dressing applied.
Currently in bed , safety in place. S/P cath removal and he is voiding well per brief. Brief changed x 2 this shift. Will continue to monitor.

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

5/25/2016 23:48 Type: Health Status Note

Note Text:

Note Text : 3-11. Resident in bed sleeping, HOB elevated, resp even and unlabored. Incnt care provided with 2 staff assist, repositioned Q 2 hrs for comfort. S/P fall, no late injuries noted, Laceration with stitches to right eye brows intact, no bleeding noted. Safety maintained all through this shift. He is voiding well, per brief. Tolerating tube feeding and water flushes well. Vs. Bp- 128/72, P- 92, R- 20, T- 98.4 and O2 sats 96% R/air.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/25/2016 14:00 Type: Health Status Note

Note Text:

Note Text : Note Text: T 98.9, P 98, R 20, , 02 sat 98% on room air. Alert but non verbal, signs of discomfort noted, no respiratory distress, chest clear with no congestion, S/P fall, suture line RT eyebrow dry and intact, RT side of lip mild swelling, abd soft and non tender, bowel sounds positive in 4 quadrants, HOB kept elevated. Turned and repositioned q 2hrs. Bariatric Bed in the lowest position, 2 aides assisting with care during ADL care. Tolerating G tube feeds well. Total care given with ADLs

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/25/2016 13:38 Type: Nutrition/Dietary Note

Note Text:

Note Text : Nutrition note: Spoke with nurse and indicated resident currently tolerating tube feeding regimen @ 75ml/hour. Weight (5/22) 195.6#. No significant weight change over past week. Noted recent laceration on right brow line. Continue with current tube feeding regimen.

Author: Karen Davis - Registered Dietician [e-SIGNED]

5/24/2016 21:49 Type: Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Up in w/c early this shift with sitter by the side. Bed switch to bariatric with air mattress for safety. Post fall with laceration right eyebrow. Sutures intact and well approximated.Neuro-check conts and WNL. Turn q2hrs to relief pressure. Wife and daughter in to visit.Tol feeding of Jevity 1.5 @ 75ml/hr.+ 2 Total care with adls,using hoyer lift for transfer. Given PRN tyelol for occasional moaning with good effect. Resting quietly in bed at this time. V/S T98.0,R20,P80,BP135/72,SAT 97%

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/24/2016 13:03 Type: Health Status Note

Note Text:

Note Text : Head to toe assessment completed s/p post fall, skin warm and dry to touch, a laceration with about 5 sutures to his right eyebrow and mild swelling at the injury site. Mild swelling to right upper lip , a laceration noted to the inner aspects of the upper lip no active bleeding this time. Residents grimaces with touch to the lips , Tylenol given for pain. Skin discoloration noted to right elbow and sacrum.

Author: Joanne Otieno - RN [e-SIGNED]

5/24/2016 11:08 Type: Health Status Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text : Significant change MDS completed d/t new dx of persistent vegetative state. Admitted 4/25, to hospital 5/2 d/t vomiting, return 5/9 with dx of aspiration pneumonia. Resident was admitted with a stage III on his R sacrum and has an hx of healed pressure ulcers. Resident has a foley catheter. He has a dx of hx of anoxic brain injury with persistent vegetative stage d/t a work accident 5 years ago, pneumonia, large pulmonary embolism, sepsis, chronic bedbound state, DMII, seizure disorder, chronic dysphagia with PEG tube, and is alert but unable to respond to stimulation, may track people with his eyes but no sense of purpose, does not respond when spoken to, and requires total assist with all ADLs including mobility, transfers, feeding via the PEG tube, and has a foley catheter receiving care from staff, and totally incontinent of bowel. All needs are anticipated by staff. He has an low air loss mattress and receives his nutrition via the PEG tube. He does not receive any psychotropic meds and does not have restraints. He continues to receive Coumadin d/t dx of PE and metformin, lispro, and lantus for DMII, and levetriacetam for seizures.

Author: Maylar Wing - RN [e-SIGNED]

5/26/2016 15:10 **Type:** Health Status Note

Note Text:

Note Text : T 97.7, P 88, R 20, BP 118/74, 02 sat 98% on room air. Alert but non verbal, signs of discomfort noted, no respiratory distress, chest clear with no congestion, S/P fall, suture line RT eyebrow dry and intact, RT side of lip mild swelling, abd soft and non tender, bowel sounds positive in 4 quadrants, HOB kept elevated. Turned and repositioned q 2hrs. Bariatric Bed in the lowest position with air loss mattress, 2 aides assisting with care during ADL care and transfer. Tolerating G tube feeds well. Total care given with ADLs, transferred to W/C by 2 aides using a hoyer lift.

Author: Suwilanji Thindwa - RN [e-SIGNED]

~~5/26/2016 15:04~~ **Type:** ~~Medicare Daily Note~~

Note Text: Incorrect Documentation -
Incorrect Documentation - ~~**Note Text** : T 97.7, P 88, R 20, BP 118/74, 02 sat 98% on room air. Alert but non verbal, signs of discomfort noted, no respiratory distress, chest clear with no congestion, S/P fall, suture line RT eyebrow dry and intact, RT side of lip mild swelling, abd soft and non tender, bowel sounds positive in 4 quadrants, HOB kept elevated. Turned and repositioned q 2hrs. Bariatric Bed in the lowest position with air loss mattress, 2 aides assisting with care during ADL care and transfer. Tolerating G tube feeds well. Total care given with ADLs, transferred to W/C by 2 aides using a hoyer lift.~~

Strike Out Date: 5/26/2016 15:10

Author: Suwilanji Thindwa - RN [e-SIGNED]

5/26/2016 05:13 **Type:** Health Status Note

Note Text:

Note Text : Res resting quietly throughout the shift, laceration to his right brow line continues with 6 stitches intact, no s/s of infection or bleeding, wound is well approximated with minimal swelling. Res had a very large BM this shift. Fall precautions maintained. Will continue to monitor.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

5/26/2016 02:13 **Type:** Health Status Note

Note Text:

Note Text : LATE ENTRY FOR 5/25/2016 11-7:

Res resting quietly throughout the shift, laceration to his right brow line continues with 6 stitches intact, wound is well approximated and no noted bleeding. Res continues with mild swelling to right brow and flinches when area is touched to determine if there is warmth. Area is cool to touch with no s/s of infection noted.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

6/7/2016 11:55 Type: Nutrition/Dietary Note

Note Text:

Note Text : Nutrition note: Weight (6/5) 204.6#. No significant weight change over past 1 week. Lantus increased on 6/6 to 6 units q HS. Informed by nursing re: area on right sacrum has healed. Unaware of any intolerance with tube feeding regimen @ present. Diet: NPO. Continue with current feeding regimen.

Author: Karen Davis - Registered Dietician [e-SIGNED]

6/6/2016 15:01 Type: Health Status Note

Note Text: 7-3 Seen BY np and new orders written. lantus increased to 6 units. See physician order sheet for more details.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

6/3/2016 22:54 Type: Health Status Note

Note Text:

Note Text : DSS called and asked about resident, resident wife and daughter were in the room wiping resident face with used paper towel and handing resident's hand and lying on resident and resting a book (bible) on resident's chest, supervisor and ADON was notified, this nurse explain to resident's wife and daughter that no touching during Per DSS, wife was not compliance, wife stated no and shook her head and stated ' tell DSS to fax the order in", DSS ok for security to see wife and daughter were escorted out of the building, resident was assess no abnormal breathing was noted at this time, no ringworm was noted at this time, no new area was noted on resident skin, no distress noted at this time.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

6/2/2016 21:37 Type: Health Status Note

Note Text:

Note Text : 3-11. Vs. Bp- 148/93, T- 98.4, P- 91, R- 20.
Resident clinically stable this shift, remain alert and non verbal. All scheduled meds given via tube, tolerated well. Also tolerating tube feeding of jevity 1.5 at 75cc/hr and water flushes well. Incont care provided by staff. Brief changed x 3 thus far. Repositioned Q2 hrs and PRN for comfort, helpful. No seizure activity noted thus far. HOB elevated at all times. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

6/2/2016 13:59 Type: Health Status Note

Note Text: Alert but non verbal no signs of discomfort or respiratory distress noted, HOB kept elevated, tolerating G.tube feeds well, total care given with ADLs by 2 aides.

Author: Suwilanji Thindwa - RN [e-SIGNED]

6/1/2016 19:32 Type: Health Status Note

Note Text:

Note Text : 3-11. Vs. Bp- 130/80, T- 97.6, P- 67, R- 20 and O2 sats 97% R/air.
Received resident sitting on the w/c in the lounge area along with other residents. He has been calmed and pleasant and clinically stable. tolerating tube feeding and water flushes well. 1830 bs per finger stick 171, no diabetic nor any seizures noted thus far. resident assisted back to bed with 2 staff assist. care provided with 2 staff assist. repositioned Q 2 hrs for comfort. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

6/1/2016 18:29 Type: Health Status Note

Note Text: 3-11. Seen by Np and FSBS increased to Q 6 hrs x 5 days and to log result in mds book on Monday (06/06/16) for eval.

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/31/2016 22:56 **Type:** Health Status Note

Note Text:

Note Text : Res is clinically stable. No apparent changes noted within the shift. G-Tube in place and patent. No sign of aspiration noted. HOB elevated to avoid possible aspiration. Res was visited by wife earlier in the shift. It was reported by the sitter that during the period of visitation, wife was taping residents chest hard ,squeezing his abdomen so hard and putting much weight on the resident while the tube feeding was on. Resident was assessed by staff, there was no sign of bruises noted and no evident sign of pain or discomfort. Supervisor was made aware. Res is in bed at the time of this entry with eyes closed. Will continue to be monitored.

Author: Priscillia Okoro - RN [e-SIGNED]

5/31/2016 13:24 **Type:** Nutrition/Dietary Note

Note Text:

Note Text : Nutrition note: Resident with significant weight gain over past 1 week with re-weight(5/30) 204.6#; (5/29) 203.2#; (5/22) 195.6#. Informed by nurse re: weight gain and informed resident currently tolerating tube feeding regimen. Tube feeding regimen as Jevity 1.5cal @ 75 ml/hour + 180 ml water flush q 4 hours. Diet: NPO. Spoke with Amanda Green via phone and informed her re: above. Continue with current feeding regimen.

Author: Karen Davis - Registered Dietician [e-SIGNED]

5/29/2016 22:42 **Type:** Health Status Note

Note Text:

Note Text : Resident alert but non verbal, No s/s of discomfort noted, no respiratory distress, chest clear with no congestion, HOB kept elevated. Turned and repositioned q 2hrs.Sitter at bedside. Bariatric Bed in the lowest position with air loss mattress, 2 aides assisting with care during ADL care and transfer.Ordered ducolax supp. adm. result pending. No acute distress noted. Will cont to monitor.

Author: Georgeline Ihekaire - RN [e-SIGNED]

5/28/2016 14:32 **Type:** Health Status Note

Note Text:

Note Text : 7-3. 7-3 supervisor instructed this writer to call DSS regarding resident's wife in visiting and touching and secretly taking pictures of resident. Per DSS, wife should be warned and if such behavior persist, wife should be escorted out of the facility. 7-3 and supervisor and 3-11 nurse made aware of this.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/28/2016 12:05 **Type:** Health Status Note

Note Text:

Note Text : 7-3. Vs/ Bp- 154/93, T- 96.6, P- 98, R- 20 and 02 sats 97% R/air.
Clinically stable thus far. In bed with HOB elevated, resp even and unlabored. AM care, provided with 2 staff assist. Remain on conts tube feeding of jevity 1.5 running at 75 cc/hr, tolerating it well with water flushes. No seizure activity noted. No late injuries noted from previous fall. Stitches to laceration on right eye brow intact and no bleeding nor any s/sx of infection noted. Repositioned Q 2 hrs for comfort. Wife and personal sitter in the room with resident at this time. No c/o nor any distress noted. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

5/27/2016 12:09 **Type:** Health Status Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text : Resident assessed head to toe after communication received from DSS regarding Mr. Bradley's wife's concerns. Resident is resting comfortably in bed. Skin is intact, warm, and dry. Turgor is normal. No signs of any skin infections. Respirations are even and normal. Lung sounds clear. Bowel sounds present in all quadrants, tolerating tube feedings well. Heels are offloaded from the bed. HOB elevated. No lower extremity swelling noted. Sitter present at bedside.

Author: Brooke Patterson - Project Lead [e-SIGNED]

6/9/2016 20:30 **Type:** Health Status Note

Note Text:

Note Text : Medics came in the facility and stated they had a call that resident was in need of medical attention . Upon assess medics spoke with Stephanie of DSS and left the building after determining that resident was at his baseline and was not in any distress . Medics left a number for administrator to call in future if an unauthorized person calls because according the medics each time there was a call they will have to respond . Resident is stable and tolerating feeds at this time with no sign of distress .

Author: Evelyn Asiedu-Otibu - RN [e-SIGNED]

6/9/2016 19:31 **Type:** Health Status Note

Note Text:

Note Text : Stepanie from DSS called at approximately 1915 and stated souse and daughter of resident had called reporting resident was in respiratory distress and BS was over 300. Assessment done resident looked calm and comfortable in bed ,head of bed was elevated ,eyes open ,respiration 20 even and unlabored , VS BP 137/87 ,PULSE 86 ,O2SAT 97% RA , Temp 98.6 , BS 204. Sitter reported that spouse attempts to block her from observing resident whiles she is visiting and noted clear fluid coming out of resident's mouth[not sure if it was water]Resident is on NPO . Stepanie called back with feedback . Will continue to monitor and keep Stphanie updated . Will continue to monitor .

Author: Evelyn Asiedu-Otibu - RN [e-SIGNED]

6/8/2016 23:21 **Type:** Health Status Note

Note Text:

Note Text : Resident alert but non verbal, resp is even and unlabored, no s/s of discomfort noted, no respiratory distress, chest clear with no congestion, HOB kept elevated, resident was up in chair in common area for for hours, bed in lowest position with air loss mattress, require 2 aides assist with care during ADL care and transfer, no sign of pain or distress noted

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

6/8/2016 12:37 **Type:** Skin/Wound Note

Note Text: R eyebrow 4 sutures in place. all drying out. removed sutures and laceration healed. No infection sign noted. Nurse ware.

Author: Grace Sookryoo - Wound Nurse [e-SIGNED]

6/7/2016 23:47 **Type:** Health Status Note

Note Text:

Note Text : Res is clinically stable, resp is even and unlabored, O2 sat 96% on room air, No apparent changes noted within the shift. G-Tube in place and flushed as ordered, HOB elevated to avoid possible aspiration, resident was visited by wife earlier in the shift, wife was writing on paper and showing it to resident to read, wife was looking at pt head closely, wife was making attempt to touch resident but was reminded that she is not suppose to touch resident, of visitation, no sign of distress noted at this time.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Recommendations: none
Monitor: status, dup GI regimen, further taper

Author: Nikki Kennedy - Pharmacist Consultant [e-SIGNED]

6/20/2016 14:47 Type: Health Status Note

Note Text: 7-3. Zero change in Coumadin made this shift. resident is to continue on current dose of Coumadin and next PT/INR due in one week (06/27/16)

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

6/17/2016 14:48 Type: Health Status Note

Note Text: 7-3. Seen by NP this shift and new order to continue FSBA Q 6 hrs, lantus increased to 8 units, lisinopril 10 mg po QD and PEC to F/U in 2 weeks for BP and FSBS.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

6/17/2016 14:46 Type: Miscellaneous Information

Note Text: 7-3. DDS representative came in the shift with a new shaving machine, since resident already have one in the room, the new machine placed in the nurses cart.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

6/15/2016 12:31 Type: Nutrition/Dietary Note

Note Text:

Note Text : Nutrition note: Weight (6/12) 207.2#. Resident with 2.6# weight gain since (6/1). Request decreasing tube feeding rate to Jevity 1.5cal @ 70ml/hour + increasing flushes to 200ml water flush q 4 hours for ~2520cal/day (26.8cal/kg), 106g protein/day (1.1g protein/kg) and 2460ml water/day (26ml water/kg). Attempted to contact Amanda Green (704-862-7588) re: changes with tube feeding regimen and weight gain but left message on voice mail. Noted Lantus increased (6/6) with BS running >200 @ times.

Author: Karen Davis - Registered Dietician [e-SIGNED]

Late Entry
6/14/2016 10:08 Type: Health Status Note

Note Text:

Note Text : This nurse saw a man a resident's room standing by his bedside and approach the man, he told the supervisor that he is Mr Bradley"s son inlaw, the supervisor explain to him That it was not visiting hours, he apology and left the facility according to the supervisor.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

6/11/2016 21:50 Type: Health Status Note

Note Text:

Note Text : Resident is resting in bed. Respirations remain even and unlabored. Bowel sounds noted to all ABD quadrants with tube feedings well tolerated. Heels are offloaded from the bed. HOB elevated. Turned and repositioned multiple times during shift. No s/s of pain or discomfort noted.

Author: Julius Awopetu - LPN [e-SIGNED]

6/10/2016 18:22 Type: Health Status Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Author: Likawunt Halche - LPN [e-SIGNED]

7/15/2016 21:13 **Type:** Health Status Note

Note Text:

Note Text : At 1740,medics with security officer arrived to the floor stating was called by resident daughter at home to come and transport resident to hospital. Action was intervened by supervisor and ADON.Resident in stable condition with no distress observed.V/S T97.9,R20,P89,BP150/88. Resident DSS guardian (Stepanie Stevenson)called and updated on family action by the supervisor.

Author: Georgeline Ihekaire - RN [e-SIGNED]

7/14/2016 15:49 **Type:** Pharmacy Consultant Note

Note Text:

Note Text : Medication regimen reviewed; 7/11 INR 2.9, chg Coum 5mg QD x 5.5mg MWF
Labs: 7/5/16 BMP SCr 0.83, K 4.6, A1C 8.5, 6/20/16 INR 2.3, 5/11/16 INR 2.2, 3/16 Mg 2.2, CMP SCr 0.88, K 4.1, B12 925
Risk Meds: Dexilant (3/16), Zantac (taper 5/20/16), Keppra (seizures), Coumadin (PE)
Assessment: VS/Wt reviewed
Recommendations: MD-dup tx
Monitor: status

Author: Nikki Kennedy - Pharmacist Consultant [e-SIGNED]

7/13/2016 05:31 **Type:** Health Status Note

Note Text:

Note Text : Resident alert with eyes opened, tube feeding of Jevity 1.5 infusing well, Peg tube in place, patent and no residue on withdrawal. BS at midnight 214 and 2units given to the R. arm and BS @ 6am 321 and 6units of insulin lispro given. Resident has a huge BM, and he was cleaned and made comfortable in bed. Oral care was also given.

Author: Uzoma Ukwu - RN [e-SIGNED]

7/12/2016 11:29 **Type:** Nutrition/Dietary Note

Note Text:

Note Text : Nutrition note: Attempted to contact Amanda Green (704-862-7588) re: weight gain of 3# over past week with weight on 7/10 210.4# and 1+ edema to BLE with 40 mg Lasix x 5 days ordered on 7/11. Will request decreasing flushes to 180ml water flush q 4 hours and continue with Jevity 1.5 Cal/hour for ~2485 cal (26 cal/kg), 106g protein (1.1g protein/kg) and 2340 ml free H20/day (24.5 ml free H20/kg).

Author: Karen Davis - Registered Dietician [e-SIGNED]

7/11/2016 18:59 **Type:** Nutrition/Dietary Note

Note Text: Nutrition note: Informed nurse re: weight gain of 3# over past week with weight 7/10 210.4#. Informed resident with 1+ edema to BLE. 40mg Lasix x 5 days ordered. Resident currently tolerating tube feeding regimen. Continue to monitor.

Author: Karen Davis - Registered Dietician [e-SIGNED]

7/11/2016 16:32 **Type:** Health Status Note

Note Text: 1+ pitting pedal edema noted to BLE, no respiratory distress at this time. Np notified with orders to give Lasix 40mg VT daily x 5days and check BMP in a week. BLE elevated to a pillow. Msg left for the guardian (A. Green) awaiting call back.

Author: Joanne Otieno - RN [e-SIGNED]

7/11/2016 15:59 **Type:** Order Note

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text: The system has identified a possible drug allergy for the following order: Lasix Tablet 40 MG

Give 1 tablet via G-Tube in the morning for per order for 4 Days

Author: Joanne Otieno - RN [e-SIGNED]

7/11/2016 15:54 **Type:** Order Note

Note Text: The system has identified a possible drug allergy for the following order: Lasix Tablet 40 MG (Furosemide)

Give 1 tablet via G-Tube STAT for per order

Author: Joanne Otieno - RN [e-SIGNED]

7/1/2016 14:54 **Type:** Health Status Note

Note Text:

Note Text : 7-3. VS. Bp- 145/89, T- 98.9, P- 91, R- 20 and Bs per finger stick @ 1200 was 170. Seen by Np this shift and new order for BMP A1C due next lab draw. resident clinically stable this shift. Continues to need ext assist from 2 staff with care. repositioned Q 2 hrs for comfort. Tolerating tube feeding of jevity 1.5 at 70 cc/hr well. Incont care provided by staff. Brief changed x 4 this shift.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

6/30/2016 21:31 **Type:** Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Visited by son,spouse and daughter @1830. No information regarding family to start visiting obtained. Son noted praying very loud in the room. Call placed to DSS to speak with Stephanie (guardian). Supervisor aware of the family visit and she notified the DON and security. Security officer arrived shortly and let them out of the building . Social worker (Samantha)in return call states could not get hold of Stephanie and s was notified of the situation. Said will address the matter tomorrow. Sitter at bedside at the time of visit. . Resident resting quietly in bed at this time.

Author: Georgeline Ihekaire - RN [e-SIGNED]

6/26/2016 22:14 **Type:** Health Status Note

Note Text:

Note Text : Resident alert and non-verbal. Needs anticipated and met by staff. No s/s of pain nor any discomfort observed. Turn q2hrs to relief pressure. Sitter at bedside for companion. Oral care provided. Tubefeeding conts as ordered. Resting quietly in bed at this time.

Author: Georgeline Ihekaire - RN [e-SIGNED]

6/21/2016 17:34 **Type:** Nutrition/Dietary Note

Note Text: Nutrition note: Weight on (6/19)207.8#. Resident with 0.6# weight gain over past week. See previous RD documentation on 6/15 and tube feeding regimen adjusted accordingly.

Author: Karen Davis - Registered Dietician [e-SIGNED]

6/21/2016 15:33 **Type:** Pharmacy Consultant Note

Note Text:

Note Text : Medication regimen reviewed; Coumadin chg 5mg MWF and 5.5mg other days, inc Lantus 8u qhs, start Lisinopril 10mg QD, reduce Ranitidine 150mg QD
Labs: 6/20/16 INR 2.3, 5/11/16 INR 2.2, 3/16 Mg 2.2, CMP SCr 0.88, K 4.1, B12 925
Risk Meds: Dexilant (3/16), Zantac (taper 5/20/16), Keppra (seizures)
Assessment: VS/Wt reviewed

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

7/25/2016 05:59 **Type:** Health Status Note

Note Text: PT/INR RESULTS

PT = 28.2

INR = 2.4

FLAGGED IN RES CHART FOR MD REVIEW

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

7/24/2016 13:00 **Type:** Health Status Note

Note Text:

Note Text : Clinically stable thus far. Alert and non responsive. Tensed and fidgets at times. Incont care provided by staff. Repositioned Q 2 hrs for comfort. G-tube patent. Oral care provided by staff. Tolerating tube feeding of jevity 1.5 ar 70 cc/hr and G-tube water flushes well. No acute distress noted thus far. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/23/2016 14:43 **Type:** Health Status Note

Note Text:

Note Text : 7-3. S/P new s/p cath. replacement. its intact and flushes well. Tube feeding of jevity 1.5 at 70 cc/hr flowing well. G- tube cleansed as ordered. Resident currently within his normal limits. HOb elevated at all times. Repositioned Q 2 hrs for comfort. No acute distress noted this shift. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/22/2016 20:48 **Type:** Health Status Note

Note Text: Back from CMC at 17:20 pm via medics with a new G-tube placement. Its intact and flushes well. tube feeding of jevity 1.5 started, tolerating it well. 1800 bs per finger stick- 111. No diabetic episodes noted.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/22/2016 05:06 **Type:** Health Status Note

Note Text:

Note Text : Res has been NPO and TF stopped at 0030 d/t appointment today at 1300 to replace pegtube. Order received stating that res is only to receive a half dose of his insulin coverage this AM. Foley in place to peg stoma, flushes with ease and capped off to prevent drainage. Will continue to monitor.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

~~7/22/2016 02:46~~ **Type:** ~~Health Status Note~~

Note Text: Incorrect Documentation -
Incorrect Documentation - ~~**Note Text** : Res has been NPO and TF stopped since 0030 in preparation for replacement of his peg tube tomorrow at 1300. Insulin will be held in the AM when checking BS if coverage is indicated. No noted distress at this time. Foley is currently in place to peg tube stoma site, flushing with ease and plugged off at this point to prevent leakage. Will continue to monitor.~~

Strike Out Date: 7/22/2016 05:06

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

7/19/2016 19:36 **Type:** Health Status Note

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text: Information received via fax and f/u call from GI office with information about instructions to prep resident for G.Tube replacement on Friday 7/22/16. Instructions placed in front of residents information in the count sheet book.

Author: Suwilanji Thindwa - RN [e-SIGNED]

7/19/2016 16:47 **Type:** Health Status Note

Note Text:

Note Text : Resident's wife visited but was asked to leave due to DSS has said not to allow her to visit until further notice, she left but within a few minutes, Medic and fire came in the building saying the wife called them to transport resident to the hospital. Resident stable, no need to go to the hospital, medic and fire department notified and they left, supervisor aware and discussed with 911 team.

Author: Suwilanji Thindwa - RN [e-SIGNED]

7/18/2016 22:07 **Type:** Health Status Note

Note Text: 3-11. Result of BMP done this Am came in and NA reading was 133, one point below normal range. Result called to PEC on call and per Meridith, NPC, lab should be placed in PEC book for eval in AM.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/18/2016 22:03 **Type:** Health Status Note

Note Text:

Note Text : 3-11. Vs. Bp- 143/80, T- 98.7, P- 78, R- 20. Resident clinically stable this shift and he is currently WNL. Foley draining well. HOB elevated at all times. Oral care provided. Tolerating tube feeding of jevity 1.5 at 70 cc/hr and water flushes well. Repositioned Q 2 hrs for comfort, helpful. No acute distress noted his shift. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/18/2016 14:42 **Type:** Health Status Note

Note Text: 7-3. New order for G I consult for G-tube replacement as soon as possible. Huc on second floor made aware.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/18/2016 14:40 **Type:** Health Status Note

Note Text: 3-11. Clinically stable this shift. G-tube patent. No bleeding noted on G-tube site.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/18/2016 09:50 **Type:** Nutrition/Dietary Note

Note Text: Nutrition note: Weight (7/17) 210.2#. Resident with 0.2# weight loss over past week. Noted nursing documentation re: resident to get new G-tube on 7/18. Continue to monitor.

Author: Karen Davis - Registered Dietician [e-SIGNED]

7/17/2016 01:19 **Type:** Health Status Note

Note Text: Resident lying comfortable in bed, respiration even and unlabored. HOB elevated as tolerated, GT feeding still intact and patent, infusing adequately, no leaking noted, no residual noted. GT dressing intact at this time.

Author: Ijeoma Mary Ebo - LPN [e-SIGNED]

7/16/2016 22:29 **Type:** Health Status Note

Note Text:

Note Text : CNA reported that resident G-Tube came out during patient care at 18:25, NP ordered to insert Foley F16 catheter until Monday and Monday to send the resident to get new G-tube, notified the RN, RN inserted Foley catheter, catheter flushed and patent, continuous Jevity 1.5 cal is running at 70ml/hr, resident VS: Temp 98.8, pulse 86, BP 134/67, RR 20, O2 96 on RA, res is sleeping, will continue to monitor for any change

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Note Text : 7-3. Resident seen by NP this Am and new orders for Duoneb Q 6 hrs x 5 days for wheezing, lantus increased to 20 units and PEC tp F/U in 2 weeks for his DM. Resident's case worker from Gastonia called and wanted to know resident is doing, she was briefed of resident's condition and she acknowledged understanding. Albuterol neb tx and Tylenol given as ordered PRN and desired result noted. O2 sats 97% R/air and P- 87.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/5/2016 17:19 Type: Health Status Note

Note Text: Permission received from DSS to update family on the abrasion noted to resident's chin from shaving. Family updated via nursing supervisor.

Author: Brooke Patterson - Project Lead [e-SIGNED]

8/5/2016 14:19 Type: Incident Note

Note Text:

Note Text : Off-going CNA communicated to on-coming nurse and CNA that resident sustained a small knick to the chin while shaving him this AM. The area was cleansed and left open to area (area was closed up on assessment). DSS notified. No S/S of pain noted to area.

Author: Brooke Patterson - Project Lead [e-SIGNED]

8/5/2016 13:57 Type: Health Status Note

Note Text:

Note Text : Resident's son present on the unit today during non-approved visitation hours. Resident's son was initially in the room with his father, but then proceeded to sit out in the common area. Social worker and ADON communicated to son that he would have to return during supervised hours of visitation and that he could wait out in the common area until then. He stated he would wait downstairs.

Author: Brooke Patterson - Project Lead [e-SIGNED]

8/3/2016 14:38 Type: Health Status Note

Note Text:

Note Text : 7-3. Vs. Bp- 120/79, T- 98.8, P- 80, R- 20, O2 sats 96%.
Currently within his normal limits. HOB elevated. Breathing well. All scheduled meds given via tube, tolerated well. Also tolerating tube of jevity 1.5 at 70 cc/hr and water flushes well. Incont care provided by staff. Repositioned Q 2 hrs for comfort. Bottom kept clean and dry all through this shift. No coughing nor any resp distress noted this shift. Afebrile with axillary temp 98.8. Tylenol 650 mg given at 0743 for general body discomfort, helpful.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/1/2016 15:10 Type: Health Status Note

Note Text:

Note Text : 7-3. Received resident in bed with HOB elevated. Resident noted to be congested. Albuterol neb administered as ordered PRN at 12:23 pm and desired result noted. Resident is currently on scopolamine patch Q 72 hrs for secretions , helpful. VS. Bp 123/80, P- 90, R- 20, T- 101.1 and O2 sats- 95% room/air. Tylenol 650 mg given via tube as ordered PRN at 14:23 pm. Dr. Gambino's Np in the unit doing rounds and she was made aware of resident's congestion and increased temp. She did take a look at resident and no new order written. Temp re-checked at 14:57 pm and temp dropped to 99.2. Resident's social worker from south Carolina was visiting with resident and she is aware of resident's congestions and the treatments resident is currently on and she acknowledged understanding.
Resident had a large soft BM. he is tolerating tube feeding of jevity 1.5 at 70 cc/hr with water flushes well. Will continue to closely monitor resident and will update for any changes.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

8/1/2016 12:42 **Type:** Health Status Note

Note Text: 7-3. Resident's social worker from s. Carolina visited and she was very happy of the care being provided to resident.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/1/2016 12:15 **Type:** Health Status Note

Note Text: 7-3. Resident is to continue on current doses of Coumadin and next PT/INR due in 2 weeks (08/15/16).

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/31/2016 22:20 **Type:** Health Status Note

Note Text:

Note Text : Resident residual was 80 mls and held tube feed and notified NP, NP ordered Zantac 75 MG BID, NP ordered to recheck residual HS on this shift. Resident received Zantac at 2000, Gevity 1.5Cal at 70ml/hour is running, rechecked residual and residual was 45 mls, notified NP. Resident was mooning and received Tylenol 650 MG. VS: Temp 98.8, pulse 86, RR 18, BP 120/79, O2 saturations 95% on RA.

Give Jevity 1.5Cal @ 70ml/hour continuous

Author: Likawunt Halche - LPN [e-SIGNED]

7/29/2016 13:13 **Type:** Health Status Note

Note Text: 7-3. Continues on albuterol neb, no resp distress noted. O2 sats 94% R/air and R- 20, P- 86.T- 97.8.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/29/2016 12:04 **Type:** Health Status Note

Note Text: 7-3. Resident noted to have increased secretions and coughing. New order written to d/c Levsin and resident placed on scopolamine patch one behind ear Q 72 hrs.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

7/28/2016 05:08 **Type:** Health Status Note

Note Text: Res continues scheduled Nebs for cough and congestion which persists. Sats are WNL with no noted respiratory distress. Will continue to monitor.

Author: Felicia Dorgham - Licensed Practical Nurse [e-SIGNED]

7/27/2016 22:52 **Type:** Health Status Note

Note Text:

Note Text : New order to increase Lantus to 13 units q day, new order for Levsin sl q4hrs, order to hold levsin sl until clarifies by PEC, resident is NPO, PEC to F/U BS in 2weeks, new order to give albuterol neb treatment q6hrs x 3days. O2 sat 95% on room air, no sign of pain or distress noted at this time, HOB is up, G - tube is in place, no sign of diabetic distress noted at this time.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

7/26/2016 19:50 **Type:** Nutrition/Dietary Note

Note Text:

Note Text : Nutrition note: Tube feeding running as Jevity 1.5 Cal @ 70ml/hour during RD's visit this morning. (7/24)207.2#. Resident with 3# weight loss over past week. Noted labs on 7/18. (7/22) New G-tube placement in hospital. Continue with current tube feeding regimen.

Author: Karen Davis - Registered Dietician [e-SIGNED]

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

9/10/2016 14:35 Type: Health Status Note

Note Text:

Note Text : 7-3. Resident clinically stable this shift. Alert and responsive. HOB elevated at al times. Tube feeding off at 1200 as ordered. Tolerating tube water flushes well. Simethicone 80 mg given VT for gas, helpful. Incont care provided with 2 staff assist. Repositioned Q 2 hrs for comfort. Personal sitter with him in the room at all times. No complaints nor any acute distress noted. Zero coughing noted. Scopolamine patch applied to left ear as ordered and its currently intact at this time of entry. Safety in place. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/9/2016 19:00 Type: Health Status Note

Note Text:

Note Text : Resident in bed resting quietly with HOB increased at all times. Called by the sitter who said resident coughing and needs to be suctioned. On assessment no s/s of respiratory nor acute distress noted. LungS sound clear. Per previous shift pt scopolamine patch was intact to left ear,noted not in place with the daughter sitting at bedside.. Daughter stated scopolamine patch inhibits coughing out of secretions. Onetime order received to re-apply the patch. Turn q2hrs to relief pressure.Oral care provided. V/S T97.6,P85,R20,BP134/68,SAT 98%RA.

Author: Georgeline Ihekaire - RN [e-SIGNED]

9/5/2016 21:02 Type: Health Status Note

Note Text:

Note Text : Resident resting quietly in bed with no noted distress. Head of bed up no respiratory distress noted. Tolerating TF as ordered. No s/s of aspiration noted. Total care needed with ADLs. No s/s of diabetic distress noted. BS at 1700 256. V/S 130/75-80-20-98.7

Author: Sherondia Morgan - LPN [e-SIGNED]

8/29/2016 14:44 Type: Health Status Note

Note Text: 7-3. Resident is to continue on current dose of Coumadin and next PT/INR due in 2 weeks (09/12/16). No bruising nor any active bleeding noted.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/26/2016 16:09 Type: Health Status Note

Note Text:

Note Text : Q1, MDS completed. Dx of persistent vegetative state. Admitted 4/25, to hospital 5/2 d/t vomiting, return 5/9 with dx of aspiration pneumonia. No opened areas, has an hx of healed pressure ulcers. He has a dx of hx of anoxic brain injury with persistent vegetative stage d/t a work accident 5 years ago, pneumonia, large pulmonary embolism, sepsis, chronic bedbound state, DMII, seizure disorder, chronic dysphagia with PEG tube, and is alert but unable to respond to stimulation, may track people with his eyes but no sense of purpose, does not respond when spoken to, and requires total assist with all ADLs including mobility, transfers, feeding via the PEG tube, and totally incontinent of bowel. All needs are anticipated by staff. He has an low air loss mattress and receives his nutrition via the PEG tube. He does not receive any psychotropic meds and does not have restraints. He continues to receive Coumadin d/t dx of PE and metformin, lispro, and lantus for DMII, and levetriacetam for seizures. Per pharmacist consultant:
Risk Meds: Dexilant (3/16), Keppra (seizures), Coumadin (PE)

Author: Maylar Wing - RN [e-SIGNED]

8/22/2016 10:20 Type: Health Status Note

Note Text: 7-3. Resident is to continue on current dose of Coumadin and next PT/INR due in one week (08/29/16)

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

8/22/2016 09:30 **Type:** Pharmacy Consultant Note

Note Text:

Note Text : Medication regimen reviewed; 8/15 INR 2.6 cont Coum 5mg QD x 5.5mg MWF, 8/17 d/c Ranitidine, cont Dexilant, 8/8 inc Lantus 20u QD, 7/29 chg Levsin to Scop patch q72h
Labs: 7/18 BMP SCr 0.76, K 4.2, Gluc 280, 7/5/16 BMP SCr 0.83, K 4.6, A1C 8.5, 6/20/16 INR 2.3, 5/11/16 INR 2.2, 3/16 Mg 2.2, CMP SCr 0.88, K 4.1, B12 925
Risk Meds: Dexilant (3/16), Keppra (seizures), Coumadin (PE)
Assessment: VS/Wt reviewed
Recommendations: none
Monitor: status, BG, INR

Author: Nikki Kennedy - Pharmacist Consultant [e-SIGNED]

8/18/2016 21:21 **Type:** Health Status Note

Note Text:

Note Text : Medics arrived at 1645,stating was called by resident family member to transport resident to hospital for medical reason (Unspecied). Resident in stable condition with no distress.Sitter at bedside. Medics left the facility after speaking with the supervisor. Quiet and restful.

Author: Georgeline Ihekaire - RN [e-SIGNED]

8/15/2016 12:04 **Type:** Infection Note

Note Text: New order given for 5 mg of Coumadin today and to continue on previous Coumadin there after. Next PT/INR due in one week (08/22/16)

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/14/2016 15:28 **Type:** Health Status Note

Note Text:

Note Text : Clinically stable this shift. HOB elevated. Currently within his baseline. Tolerating tube feeding and water flushes well. Drsg to G-tube site done as ordered. He does have scratch marks on his chin from shaving blade. His electric shaver was not working well, so he was shaved by his personal sitter this AM and he had a small cut on his chin. His chin cleanse with alcohol and open to air. No resp distress noted this shift. O2 sats 98% R/air, R-20.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/13/2016 14:04 **Type:** Health Status Note

Note Text: 7-3. Resident tok the last dose of Duoneb TX this shift. HOB elevated at all times. No resp distress nor any wheezing noted. O2 sats 98% R/air, P- 91. R- 20, T- 97.8. Bp- 138/76

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/12/2016 14:31 **Type:** Health Status Note

Note Text:

Note Text : 7-3. Continues on Duoneb tx as ordered and he is tolerated it well. HOB elevated at all times. No resp distress noted thus far. OOB with 2 staff assisted, sitting on the lounge area. Tube feeding of jevity 1.5 remain in progress and its running at 70 cc/hr. T- 97.6, R- 18, P- 91, Sat.98%. Bp- 140/88.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

8/8/2016 13:27 **Type:** Health Status Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text : 3-11. Resident clinically stable this shift. Alert and non verbal. Currently within his normal limits. HOB elevated at all times. All scheduled meds given via tube as ordered, tolerated well. Tube feeding of jevity 1.5 on at 1600 as ordered and its running at 85 cc/hr , tolerating it and water flushes well. Needed 2 staff assist with care. He had a personal sitter with him for the most part of this shift. Son visited him this shift and requested to get copies of all medical records, since resident been in ACC. he was referred to 7-3 supervisor and he acknowledged understanding. No complaints nor any acute distress noted this shift. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/23/2016 16:26 **Type:** Health Status Note

Note Text:

Note Text : Resident's son here to visit and brought the paper for guardianship, he asked questions about G.Tube feeds and water flushes the resident is getting which was explained to him, he asked to have a copy of the chart and send a copy to the facility MR Bradley will move to, he was referred to the social worker. He said he will come back on Monday to talk to the social worker. He appreciated the information he received

Author: Suwilanji Thindwa - RN [e-SIGNED]

9/21/2016 14:51 **Type:** Health Status Note

Note Text: Kathy was here from DSS of Gaston and was notified of new order for prostat, and spoke with the supervisor concerning resident family and electric shaver.

Author: Onome Grant - Licensed Practical Nurse [e-SIGNED]

9/20/2016 15:55 **Type:** Health Status Note

Note Text: Called DSS and updated Stephanie about resident's general condition and new orders.

Author: Suwilanji Thindwa - RN [e-SIGNED]

9/20/2016 15:12 **Type:** Nutrition/Dietary Note

Note Text:

Note Text : Nutritional needs have increased r/t several recent skin impairments: pressure wound to L buttock, skin tear to R elbow, and excoriation to penis/scrotum area. Recommend increasing rate of enteral feeding to 85ml/hr x 20 hrs (4p-12p). This will provide 2,550 kcal, 108g protein, and 1292ml free fluid. Will also recommend decreasing flush to 200ml q 6 hrs r/t edema. Total flushes, combined with free fluid, will provide Resident with a total of 2,092ml. No new labs available at this time. Will continue to monitor and reassess as needed.

Author: Nissan Kassis - Registered Dietician [e-SIGNED]

9/19/2016 14:39 **Type:** Health Status Note

Note Text:

Note Text : 7-3. Seen by Np this shift and new order for Lasix 10 mg QD x 7 days for edema, his lantus increased to 27 units SQ Q D and PEC to F/U DM in 2 weeks. resident clinically stable this shift. Remain within his normal limits. remain on total care and rely on staff basically for all his care and ADLs. Drsg to left buttocks and right elbow done. repositioned Q 2 hrs for comfort. No acute distress noted this shift.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/19/2016 14:00 **Type:** Skin/Wound Note

Note Text:

Note Text : Nurse requested to check skin excoriation between penis and scrum area. skin excoriation noted with pink tissue between penis and scrotum area, no infection sign. Also noted R elbow skin abrasion noted(2x1.5cm) with pink tissue with serous drainage noted underneath dressing, cleanse with Anasept, apply Hydrocolloid dressing. no infection sign noted. nurse aware.

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Author: Grace Sookryoo - Wound Nurse [e-SIGNED]

9/17/2016 14:04 Type: Health Status Note

Note Text:

Note Text : 7-3. Resident clinically stable this shift. Alert and non verbal. maons and grimaced at times, Tylenol 650 mg given VT x 1 , helpful. Bioclusive dressing to ST on right elbow intact, no s/sx of infection noted. Repositioned Q 2 hrs for comfort. Hob elevated at all times. No resp distress noted. Scopolamine patch to back of right ear still intact. Dressing to legt buttocks done as ordered. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/16/2016 21:39 Type: Health Status Note

Note Text:

Note Text : CNA reported that resident has small skin tear on right elbow at 17:35, while assessing resident I noted that resident has small skin tear about 0.5 inch in length, cleaned skin tear with NS, applied bio-occlusive dressing, no pain or discomfort noted, VS: Temp 97.4, RR 20, BP 124/64, pulse 76, oxygen saturations 96 on RA, no pain or discomfort noted, notified RN , notified Doctor, made aware Guardian (social worker), will continue to monitor for any changes

Author: Likawunt Halche - LPN [e-SIGNED]

9/15/2016 12:18 Type: Pharmacy Consultant Note

Note Text:

Note Text : Labs: 9/12/16 INR 3.0, 8/16 CBC H/H 12/41, plt 104, 7/18 BMP SCr 0.76, K 4.2, Gluc 280, 7/5/16 BMP SCr 0.83, K 4.6, A1C 8.5
Risk Meds: Dexilant (3/16), Keppra (seizures), Coumadin (PE)
Assessment: VS/Wt reviewed
Recommendations: none
Monitor: status, BG, INR

Author: Nikki Kennedy - Pharmacist Consultant [e-SIGNED]

9/12/2016 13:22 Type: Health Status Note

Note Text: 7-3. Resident is to continue on currently dose of coumadin and next PT/INR due in 2 weeks (09/26/16)

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/11/2016 15:01 Type: Health Status Note

Note Text:

Note Text : 7-3. VS. Bp- 123/75, T- 98.1, P- 76, R- 18. Clinically stable this shift, Alert and non responsive, breathing well. HOB elevated. Scopolamine patch to left ear intact. No coughing nor any secretions noted this shift. Needed 2 staff assist with care this shift. Brief changed x 3 this shift. personal sitter in room with him all through this shift. No acute distress noted. Safety in place. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

Late Entry
9/11/2016 11:23 Type: Health Status Note

Note Text:

Note Text : Late entry for 09-11-16.

Resident Name: Albert Bradley (00004805) Location: 2nd 213-S - Bed 1 Admission Date: 3/25/2016

Medical Record #: 00004805 Gender: M Date of Birth: 10/27/1949

Physician: Gambino, John Pharmacy: Southern Pharmacy

Allergies: Ceftin, Flomax, Prilosec

Diagnoses: UNSPECIFIED INTRACRANIAL INJURY WITH LOSS OF CONSCIOUSNESS OF UNSPECIFIED DURATION, SEQUELA, UNSPECIFIED OPEN WOUND OF LOWER BACK AND PELVIS WITHOUT PENETRATION INTO RETROPERITONEUM, SEQUELA, GASTROSTOMY STATUS, SICK SINUS SYNDROME, ESSENTIAL (PRIMARY) HYPERTENSION, TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS, ACUTE RESPIRATORY FAILURE WITH HYPOXIA, LOBAR PNEUMONIA, UNSPECIFIED ORGANISM, OTHER PULMONARY EMBOLISM WITHOUT ACUTE COR PULMONALE, SEPSIS DUE TO STREPTOCOCCUS PNEUMONIAE, PERSISTENT VEGETATIVE STATE, ABDOMINAL DISTENSION (GASEOUS), EPILEPSY, UNSPECIFIED, NOT INTRACTABLE, WITHOUT STATUS EPILEPTICUS, DYSPHAGIA, UNSPECIFIED

9/20/2016 15:55 Type: Health Status Note

Note Text: Called DSS and updated Stephanie about resident's general condition and new orders.

Author: Suwilanji Thindwa - RN [e-SIGNED]

9/20/2016 15:12 Type: Nutrition/Dietary Note

Note Text:

Note Text : Nutritional needs have increased r/t several recent skin impairments: pressure wound to L buttock, skin tear to R elbow, and excoriation to penis/scrotum area. Recommend increasing rate of enteral feeding to 85ml/hr x 20 hrs (4p-12p). This will provide 2,550 kcal, 108g protein, and 1292ml free fluid. Will also recommend decreasing flush to 200ml q 6 hrs r/t edema. Total flushes, combined with free fluid, will provide Resident with a total of 2,092ml. No new labs available at this time. Will continue to monitor and reassess as needed.

Author: Nissan Kassis - Registered Dietician [e-SIGNED]

9/19/2016 14:39 Type: Health Status Note

Note Text:

Note Text : 7-3. Seen by Np this shift and new order for Lasix 10 mg QD x 7 days for edema, his lantus increased to 27 units SQ Q D and PEC to F/U DM in 2 weeks. resident clinically stable this shift. Remain within his normal limits. remain on total care and rely on staff basically for all his care and ADLs. Drsg to left buttocks and right elbow done. repositioned Q 2 hrs for comfort. No acute distress noted this shift.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/19/2016 14:00 Type: Skin/Wound Note

Note Text:

Note Text : Nurse requested to check skin excoriation between penis and scrum area. skin excoriation noted with pink tissue between penis and scrotum area, no infection sign. Also noted R elbow skin abrasion noted(2x1.5cm) with pink tissue with serous drainage noted underneath dressing, cleanse with Anasept, apply Hydrocolloid dressing. no infection sign noted. nurse aware.

Author: Grace Sookryoo - Wound Nurse [e-SIGNED]

9/17/2016 14:04 Type: Health Status Note

Note Text:

Resident Name: Albert Bradley (00004805) **Location:** 2nd 213-S - Bed 1 **Admission Date:** 3/25/2016

Note Text : 7-3. Resident clinically stable this shift. Alert and non verbal. maons and grimaced at times, Tylenol 650 mg given VT x 1 , helpful. Bioclusive dressing to ST on right elbow intact, no s/sx of infection noted. Repositioned Q 2 hrs for comfort. Hob elevated at all times. No resp distress noted. Scopolamine patch to back of right ear still intact. Dressing to legt buttocks done as ordered. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/16/2016 21:39 **Type:** Health Status Note

Note Text:

Note Text : CNA reported that resident has small skin tear on right elbow at 17:35, while assessing resident I noted that resident has small skin tear about 0.5 inch in length, cleaned skin tear with NS, applied bio-occlusive dressing, no pain or discomfort noted, VS: Temp 97.4, RR 20, BP 124/64, pulse 76, oxygen saturations 96 on RA, no pain or discomfort noted, notified RN , notified Doctor, made aware Guardian (social worker), will continue to monitor for any changes

Author: Likawunt Halche - LPN [e-SIGNED]

9/15/2016 12:18 **Type:** Pharmacy Consultant Note

Note Text:

Note Text : Labs: 9/12/16 INR 3.0, 8/16 CBC H/H 12/41, plt 104, 7/18 BMP SCr 0.76, K 4.2, Gluc 280, 7/5/16 BMP SCr 0.83, K 4.6, A1C 8.5
Risk Meds: Dexilant (3/16), Keppra (seizures), Coumadin (PE)
Assessment: VS/Wt reviewed
Recommendations: none
Monitor: status, BG, INR

Author: Nikki Kennedy - Pharmacist Consultant [e-SIGNED]

9/12/2016 13:22 **Type:** Health Status Note

Note Text: 7-3. Resident is to continue on currently dose of coumadin and next PT/INR due in 2 weeks (09/26/16)

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

9/11/2016 15:01 **Type:** Health Status Note

Note Text:

Note Text : 7-3. VS. Bp- 123/75, T- 98.1, P- 76, R- 18. Clinically stable this shift, Alert and non responsive, breathing well. HOB elevated. Scopolamine patch to left ear intact. No coughing nor any secretions noted this shift. Needed 2 staff assist with care this shift. Brief changed x 3 this shift. personal sitter in room with him all through this shift. No acute distress noted. Safety in place. Will continue to monitor.

Author: Ivo Ntimeh - Licensed Practical Nurse [e-SIGNED]

Late Entry
9/11/2016 11:23 **Type:** Health Status Note

Note Text:

Note Text : Late entry for 09-11-16.
Security at the gate called to inform this supervisor that the resident's spouse is at the gate with police trying to visit resident, DSS notified, spoke to case manager Stephanie who said the spouse is not allowed to visit until further notice, spouse notified via security. Before spouse left, security said, she told him that she will call 911 to check on her husband because she feels like ACC is not doing a good job taking care of him. Later on, this writer received a call from 911 emergency inquiring how MR Bradley was doing, the emergency personnel said the spouse called asking if 911 personnel can check on MR Bradley. Resident calm and resting quietly with no distress, emergency personnel informed. Management also informed via email.

Author: Suwilanji Thindwa - RN [e-SIGNED]

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February 10, 2017

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Your member numbers are:

Member ID: 3761160001

Group Number: 7258MDRX

880 2017024639 CID PEB-MEOB
037130734708//6056//7258//
Cyc22674//000880//0831//
SCPEBAMEDDSTD
ALBERT BRADLEY
864 HAWLEY AVE
BELMONT, NC 28012-3316

Your Monthly Prescription Drug Summary

For January, 2017

This summary is your "Explanation of Benefits" (EOB) for your Medicare prescription drug coverage (Part D). Please review this summary and keep it for your records. (This is *not* a bill.)

Here are the sections in this summary:

SECTION 1. Your prescriptions during the past month
SECTION 2. Which "drug payment stage" are you in?
SECTION 3. Your "out-of-pocket costs" and "total drug costs" (amounts and definitions)
SECTION 4. Updates to the plan's Drug List that will affect drugs you take
SECTION 5. If you see mistakes on this summary or have questions, what should you do?
SECTION 6. Important things to know about your drug coverage and your rights

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JOBID 02017024639 - 000880 - 0001 of 0004 - NNNNNN - 03517

Express Scripts Medicare (PDP) is a prescription drug plan with a Medicare contract. Enrollment in Express Scripts Medicare depends on contract renewal.

SECTION 1. Your prescriptions during the past month

- Chart 1 shows your prescriptions for covered Part D drugs for the past month.
- **Please look over this information about your prescriptions to be sure it is correct.** If you have any questions or think there is a mistake, Section 5 tells what you should do.
- Your group drug coverage is always equal to or greater than basic Part D coverage by itself. However, on a specific drug your plan copay or coinsurance amount may be greater than it would be if you had basic Part D coverage by itself. If the basic Part D coverage would be greater than your group coverage, the amount shown in the "other payments" column in your EOB may be negative. In this case the negative amount is the way Medicare wants us to account for this difference. It is not an error and it does not mean you made an over payment.

CHART 1. Your prescriptions for covered Part D drugs January, 2017	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
FUROSEMIDE 20 MG TABLET 01/03/2017, SOUTHERN PHARMACY SERVICES Rx# 000020953989, quantity filled 3.00, 3 day supply	$0.00	$0.87	$0.16 (paid by "Additional Employer coverage")
DEXILANT DR 30 MG CAPSULE 01/03/2017, SOUTHERN PHARMACY SERVICES Rx# 000020950500, quantity filled 28.00, 14 day supply	$0.00	$28.42	$217.28 (paid by "Additional Employer coverage")
NOVOLIN N 100 UNITS/ML VIAL 01/04/2017, SOUTHERN PHARMACY SERVICES Rx# 000020945247, quantity filled 60.00, 28 day supply	$664.54	$63.00	$158.52 (paid by "Additional Employer coverage")
HUMULIN R 100 UNITS/ML VIAL 01/06/2017, SOUTHERN PHARMACY SERVICES Rx# 000020965671, quantity filled 10.00, 10 day supply	$0.00	$38.00	$111.06 (paid by "Additional Employer coverage")
LISINOPRIL 10 MG TABLET 01/09/2017, SOUTHERN PHARMACY SERVICES Rx# 000020969761, quantity filled 30.00, 30 day supply	$6.37	$8.70	-$2.37 (paid by "Additional Employer coverage")

(continued)



CHART 1. Your prescriptions for covered Part D drugs January, 2017	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
NOVOLIN R 100 UNITS/ML VIAL 01/09/2017, SOUTHERN PHARMACY SERVICES Rx# 000020977773, quantity filled 10.00, 25 day supply	$114.11	$63.00	-$24.96 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 01/10/2017, SOUTHERN PHARMACY SERVICES Rx# 000020910866, quantity filled 30.00, 30 day supply	$10.48	$8.70	-$5.21 (paid by "Additional Employer coverage")
WARFARIN SODIUM 2 MG TABLET 01/10/2017, SOUTHERN PHARMACY SERVICES Rx# 000020972171, quantity filled 12.00, 28 day supply	$7.18	$8.12	-$5.73 (paid by "Additional Employer coverage")
LEVOFLOXACIN 500 MG TABLET 01/11/2017, SOUTHERN PHARMACY SERVICES Rx# 000020974628, quantity filled 13.00, 13 day supply	$13.84	$9.00	-$4.38 (paid by "Additional Employer coverage")
ATROPINE 1% EYE DROPS 01/11/2017, SOUTHERN PHARMACY SERVICES Rx# 000020975322, quantity filled 5.00, 25 day supply	$36.28	$9.00	$3.10 (paid by "Additional Employer coverage")

(continued)

JOBID 0201702463 9 - 000880 - 0002 of 0004 - NNNNNN - 03518

CHART 1. Your prescriptions for covered Part D drugs January, 2017	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Totals for the month of January, 2017 **Your "out-of-pocket costs" amount is $236.81.** (This is the amount you paid this month ($236.81) plus the amount of "other payments" made this month that count toward your "out-of-pocket costs" ($0.00). See definitions in Section 3.) **Your "total drug costs" amount is $1,537.08.** (This is the total for this month of all payments made for your drugs by the plan ($852.80) and you ($236.81) plus "other payments" ($447.47).)	$852.80 (total for the month)	$236.81 (total for the month)	$447.47 (total for the month)

Year-to-date totals ***1/1/2017* through *1/31/2017***	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Your year-to-date amount for "out-of-pocket costs" is $236.81. **Your year-to-date amount for "total drug costs" is $1,537.08.** For more about "out-of-pocket costs" and "total drug costs," see Section 3. **Your year-to-date amount for your Plan's annual member out-of pocket maximum is** $236.81	$852.80 (year-to-date total)	$236.81 (year-to-date total)	$447.47 (year-to-date total)



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January 07, 2017

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864 HAWLEY AVE
BELMONT, NC 28012-3316

Your Monthly Prescription Drug Summary

For December, 2016

This summary is your "Explanation of Benefits" (EOB) for your Medicare prescription drug coverage (Part D). Please review this summary and keep it for your records. (This is *not* a bill.)

Here are the sections in this summary:

SECTION 1. Your prescriptions during the past month
SECTION 2. Which "drug payment stage" are you in?
SECTION 3. Your "out-of-pocket costs" and "total drug costs" (amounts and definitions)
SECTION 4. Updates to the plan's Drug List that will affect drugs you take
SECTION 5. If you see mistakes on this summary or have questions, what should you do?
SECTION 6. Important things to know about your drug coverage and your rights

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JOBID 02017007114 - 003500 - 0001 of 0005 - NNNNNN - 15157

Express Scripts Medicare (PDP) is a prescription drug plan with a Medicare contract. Enrollment in Express Scripts Medicare depends on contract renewal.

SECTION 1. Your prescriptions during the past month

- Chart 1 shows your prescriptions for covered Part D drugs for the past month.
- **Please look over this information about your prescriptions to be sure it is correct.** If you have any questions or think there is a mistake, Section 5 tells what you should do.
- Your group drug coverage is always equal to or greater than basic Part D coverage by itself. However, on a specific drug your plan copay or coinsurance amount may be greater than it would be if you had basic Part D coverage by itself. If the basic Part D coverage would be greater than your group coverage, the amount shown in the "other payments" column in your EOB may be negative. In this case the negative amount is the way Medicare wants us to account for this difference. It is not an error and it does not mean you made an over payment.

CHART 1. Your prescriptions for covered Part D drugs December, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
LEVETIRACETAM 500 MG TABLET 12/05/2016, SOUTHERN PHARMACY SERVICES Rx# 000020878415, quantity filled 60.00, 30 day supply	$54.80	$2.95	$0.00
DEXILANT DR 30 MG CAPSULE 12/06/2016, SOUTHERN PHARMACY SERVICES Rx# 000020883574, quantity filled 28.00, 14 day supply	$233.42	$12.28	$0.00
HUMULIN R 100 UNITS/ML VIAL 12/06/2016, SOUTHERN PHARMACY SERVICES Rx# 000020885405, quantity filled 10.00, 10 day supply	$141.61	$7.45	$0.00
WARFARIN SODIUM 6 MG TABLET 12/12/2016, SOUTHERN PHARMACY SERVICES Rx# 000020898890, quantity filled 30.00, 30 day supply	$14.86	$2.95	$0.00
WARFARIN SODIUM 1 MG TABLET 12/12/2016, SOUTHERN PHARMACY SERVICES Rx# 000020898893, quantity filled 15.00, 30 day supply	$7.84	$2.95	$0.00

(continued)



CHART 1.
Your prescriptions for covered Part D drugs
December, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
LISINOPRIL 10 MG TABLET 12/12/2016, SOUTHERN PHARMACY SERVICES Rx# 000020897702, quantity filled 30.00, 30 day supply	$9.78	$2.95	$0.00
NOVOLIN N 100 UNITS/ML VIAL 12/13/2016, SOUTHERN PHARMACY SERVICES Rx# 000020900359, quantity filled 50.00, 22 day supply	$701.19	$36.90	$0.00
WARFARIN SODIUM 5 MG TABLET 12/16/2016, SOUTHERN PHARMACY SERVICES Rx# 000020910866, quantity filled 30.00, 30 day supply	$11.08	$2.95	$0.00
HUMULIN R 100 UNITS/ML VIAL 12/16/2016, SOUTHERN PHARMACY SERVICES Rx# 000020910281, quantity filled 10.00, 10 day supply	$141.61	$7.45	$0.00
WARFARIN SODIUM 3 MG TABLET 12/16/2016, SOUTHERN PHARMACY SERVICES Rx# 000020910918, quantity filled 8.00, 28 day supply	$6.33	$2.80	$0.00
WARFARIN SODIUM 2 MG TABLET 12/16/2016, SOUTHERN PHARMACY SERVICES Rx# 000020910921, quantity filled 12.00, 28 day supply	$6.78	$2.80	$0.00
KETOCONAZOLE 2% SHAMPOO 12/17/2016, SOUTHERN PHARMACY SERVICES Rx# 000020913928, quantity filled 120.00, 30 day supply	$16.08	$2.95	$0.00
NYSTATIN 100,000 UNITS/GM OINT 12/17/2016, SOUTHERN PHARMACY SERVICES Rx# 000020913929, quantity filled 30.00, 7 day supply	$14.34	$2.95	$0.00

(continued)

CHART 1.
Your prescriptions for covered Part D drugs
December, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
DEXILANT DR 30 MG CAPSULE 12/21/2016, SOUTHERN PHARMACY SERVICES Rx# 000020922289, quantity filled 28.00, 14 day supply	$233.42	$12.28	$0.00
LEVETIRACETAM 500 MG TABLET 12/29/2016, SOUTHERN PHARMACY SERVICES Rx# 000020940006, quantity filled 60.00, 30 day supply	$54.80	$2.95	$0.00
HUMULIN R 100 UNITS/ML VIAL 12/29/2016, SOUTHERN PHARMACY SERVICES Rx# 000020940235, quantity filled 10.00, 10 day supply	$141.61	$7.45	$0.00
NYAMYC 100,000 UNITS/GM POWDER 12/30/2016, SOUTHERN PHARMACY SERVICES Rx# 000020942213, quantity filled 15.00, 7 day supply	$31.84	$2.95	$0.00
IPRAT-ALBUT 0.5-3(2.5) MG/3 ML 12/30/2016, SOUTHERN PHARMACY SERVICES Rx# 000020833666, quantity filled 90.00, 30 day supply	$24.18	$2.95	$0.00



(continued)

CHART 1.
Your prescriptions for covered Part D drugs
December, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Totals for the month of December, 2016 **Your "out-of-pocket costs" amount is $0.00.** (This is the amount you paid this month ($0.00) plus the amount of "other payments" made this month that count toward your "out-of-pocket costs" ($0.00). See definitions in Section 3.) **Your "total drug costs" amount is $1,964.48.** (This is the total for this month of all payments made for your drugs by the plan ($1,845.57) and you ($118.91) plus "other payments" ($0.00).)	$1,845.57 (total for the month)	$118.91 (total for the month)	$0.00 (total for the month)

Year-to-date totals *1/1/2016* through *12/31/2016*	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Your year-to-date amount for "out-of-pocket costs" is $4,850.00. **Your year-to-date amount for "total drug costs" is $17,990.55.** For more about "out-of-pocket costs" and "total drug costs," see Section 3. **Your year-to-date amount for your Plan's annual member out-of pocket maximum is** $2,462.83	$10,040.52 (year-to-date total)	$2,462.83 (year-to-date total) (Of this amount, $2,127.70 counts toward your "out-of pocket costs.")	$5,487.20 (year-to-date total) (Of this amount, $2,722.30 counts toward your "out-of pocket costs." See definitions in Section 3.)

JOBID 02017007114 - 003500 - 0003 of 0003 - NNNNNNN - 161105

SECTION 2. Which "drug payment stage" are you in?

As shown below, your Part D prescription drug coverage has "drug payment stages." How much you pay for a covered Part D prescription depends on which payment stage you are in when you fill it. During the calendar year, whether you move from one payment stage to the next depends on how much is spent for your drugs.

STAGE 1
Yearly Deductible

(Because there is no deductible for the plan, this payment stage does not apply to you.)

STAGE 2
Initial Coverage

- You begin in this payment stage when you fill your first prescription of the year. During this stage, the plan pays its share of the cost of your drugs and you (or others on your behalf) pay your share of the cost.
- You generally stay in this stage until the amount of your year-to-date "total drug costs" reaches **$3,310.00**. Then you move to payment stage 3, Coverage Gap.

STAGE 3
Coverage Gap

- During this payment stage, the plan will provide additional coverage that will result in the same cost-sharing amount as in the Initial Coverage stage.
- You generally stay in this stage until the amount of your year-to-date "out-of-pocket costs" reaches **$4,850.00**. Then you move to payment stage 4, Catastrophic Coverage.

You are in this stage:

STAGE 4
Catastrophic Coverage

- During this payment stage, the plan pays most of the cost for your covered drugs.
- For each prescription, you pay 5% with a $7.40 minimum and $38.00 maximum for up to a 31-day supply for brand-name drugs, 5% with a $2.95 minimum and $9.00 maximum for up to a 31-day supply for generics at retail and 5% with a $7.40 minimum and $95.00 maximum for brand-name drugs, 5% with a $2.95 minimum and $22.00 maximum for generics at mail.

What happens next?

You generally stay in this payment stage, Catastrophic Coverage, for the rest of the calendar year (through December 31, 2016).



SECTION 2. Which "drug payment stage" are you in?

As shown below, your Part D prescription drug coverage has "drug payment stages." How much you pay for a covered Part D prescription depends on which payment stage you are in when you fill it. During the calendar year, whether you move from one payment stage to the next depends on how much is spent for your drugs.

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(Because there is no deductible for the plan, this payment stage does not apply to you.)

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Initial Coverage

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- You generally stay in this stage until the amount of your year-to-date "total drug costs" reaches **$3,310.00**. Then you move to payment stage 3, Coverage Gap.

You are in this stage:

STAGE 3
Coverage Gap

- During this payment stage, the plan will provide additional coverage that will result in the same cost-sharing amount as in the Initial Coverage stage.
- You generally stay in this stage **until the amount of your year-to-date "out-of-pocket costs" reaches $4,850.00**. As of 07/31/2016 your year-to-date "out-of-pocket costs" was $2,299.36 (see Section 3).

What happens next?

Once you (or others on your behalf) have paid **an additional $2,550.64 in "out-of-pocket costs",** you move to the next payment stage (stage 4, Catastrophic Coverage).

STAGE 4
Catastrophic Coverage

- During this payment stage, the plan pays most of the cost for your covered drugs.
- You generally stay in this stage for the rest of the calendar year (through December 31, 2016).

JOBID 02016100452 - 001000 - 0004 of 0005 - NNNNNN - 04202

SECTION 3. Your "out-of-pocket costs" and "total drug costs" (amounts and definitions)

We're including this Section to help you keep track of your "out-of-pocket costs" and "total drug costs" because these costs determine which drug payment stage you are in. As explained in Section 2, the payment stage you are in determines how much you pay for your prescriptions.

Your "out-of-pocket costs"

$714.75 month of July, 2016

$2,299.36 year-to-date (since January, 2016)

DEFINITION:

"Out-of-pocket costs" includes:

- What you pay when you fill or refill a prescription for a covered Part D drug. (This includes payments for your drugs, if any, that are made by family or friends.)
- Payments made for your drugs by any of the following programs or organizations: "Extra Help" from Medicare; Medicare's Coverage Gap Discount Program; Indian Health Service; AIDS drug assistance programs; most charities; and most State Pharmaceutical Assistance Programs (SPAPs).

It does not include:

- Payments made for: a) plan premiums, b) drugs not covered by our plan, c) non-Part D drugs (such as drugs you receive during a hospital stay), d) drugs covered by our plan's Supplemental Drug Coverage, e) drugs obtained at a non-network pharmacy that does not meet our out-of-network pharmacy access policy.
- Payments made for your drugs by any of the following programs or organizations: employer or union health plans; some government-funded programs, including TRICARE and the Veteran's Administration; Worker's Compensation; and some other programs.

Your "total drug costs"

$1,120.27 month of July, 2016

$5,911.80 year-to-date (since January, 2016)

DEFINITION:

"Total drug costs" is the total of all payments made for your covered Part D drugs. It includes:

- What the plan pays.
- What you pay.
- What others (programs or organizations) pay for your drugs.

NOTE: Our plan offers Supplemental Drug Coverage for some drugs not generally covered by Medicare. If you have filled any prescriptions for these drugs this month, they are listed in a separate chart (Chart 2) in Section 1. The amounts paid for these drugs do not count toward your out-of-pocket costs or total drug costs.

Learn More: Medicare has made the rules about which types of payments count and do not count toward "out-of-pocket costs" and "total drug costs." The definitions on this page give you only the main rules. For details, including more about "covered Part D drugs," see the *Evidence of Coverage*, our benefits booklet (for more about the *Evidence of Coverage*, see Section 6).



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August 10, 2016

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Your member numbers are:

Member ID: 3761160001

Group Number: 7258MDRX

1000 2016100452 CID PEB-MEOB
030025006551//6056//7258//
Cyc8059//001000//2321//
SCPEBAMEDDSTD
ALBERT BRADLEY
864 HAWLEY AVE
BELMONT, NC 28012-3316

Your Monthly Prescription Drug Summary

For July, 2016

This summary is your "Explanation of Benefits" (EOB) for your Medicare prescription drug coverage (Part D). Please review this summary and keep it for your records. (This is *not* a bill.)

Here are the sections in this summary:

SECTION 1. Your prescriptions during the past month
SECTION 2. Which "drug payment stage" are you in?
SECTION 3. Your "out-of-pocket costs" and "total drug costs" (amounts and definitions)
SECTION 4. Updates to the plan's Drug List that will affect drugs you take
SECTION 5. If you see mistakes on this summary or have questions, what should you do?
SECTION 6. Important things to know about your drug coverage and your rights

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Express Scripts Medicare® (PDP) for **South Carolina Public Employee Benefit Authority** is operated by **Express Scripts Medicare**

Express Scripts Medicare Member Services

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JOBID 020161100452 - 001000 - 0001 of 0005 - NNNNNN - 04199

Express Scripts Medicare (PDP) is a prescription drug plan with a Medicare contract. Enrollment in Express Scripts Medicare depends on contract renewal.

SECTION 1. Your prescriptions during the past month

- Chart 1 shows your prescriptions for covered Part D drugs for the past month. (Prescriptions for drugs covered by our plan's Supplemental Drug Coverage are shown separately in Chart 2.)
- **Please look over this information about your prescriptions to be sure it is correct.** If you have any questions or think there is a mistake, Section 5 tells what you should do.
- Your group drug coverage is always equal to or greater than basic Part D coverage by itself. However, on a specific drug your plan copay or coinsurance amount may be greater than it would be if you had basic Part D coverage by itself. If the basic Part D coverage would be greater than your group coverage, the amount shown in the "other payments" column in your EOB may be negative. In this case the negative amount is the way Medicare wants us to account for this difference. It is not an error and it does not mean you made an over payment.

CHART 1. Your prescriptions for covered Part D drugs July, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
WARFARIN SODIUM 1 MG TABLET 07/01/2016, SOUTHERN PHARMACY SERVICE Rx# 000020420675, quantity filled 7.00, 14 day supply	$1.85	$4.06	-$1.51 (paid by "Additional Employer coverage")
DEXILANT DR 30 MG CAPSULE 07/05/2016, SOUTHERN PHARMACY SERVICE Rx# 000020427132, quantity filled 28.00, 14 day supply	$13.83	$28.42	$121.31 (paid by "Medicare Coverage Gap Discount Program") $82.14 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 07/09/2016, SOUTHERN PHARMACY SERVICE Rx# 000020443200, quantity filled 14.00, 14 day supply	$2.40	$4.06	-$0.75 (paid by "Additional Employer coverage")
HUMALOG 100 UNITS/ML KWIKPEN 07/13/2016, SOUTHERN PHARMACY SERVICE Rx# 000020455922, quantity filled 3.00, 8 day supply	$5.84	$38.00	$48.74 (paid by "Medicare Coverage Gap Discount Program") $6.66 (paid by "Additional Employer coverage")

(continued)



CHART 1.
Your prescriptions for covered Part D drugs
July, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
NYAMYC 100,000 UNITS/GM POWDER 07/13/2016, SOUTHERN PHARMACY SERVICE Rx# 000020455950, quantity filled 15.00, 5 day supply	$3.71	$8.83	-$3.71 (paid by "Additional Employer coverage")
FUROSEMIDE 40 MG TABLET 07/13/2016, SOUTHERN PHARMACY SERVICE Rx# 000020454085, quantity filled 6.00, 6 day supply	$0.91	$1.74	-$0.49 (paid by "Additional Employer coverage")
LEVETIRACETAM 500 MG TABLET 07/14/2016, SOUTHERN PHARMACY SERVICE Rx# 000020461347, quantity filled 60.00, 30 day supply	$7.78	$8.70	$2.04 (paid by "Additional Employer coverage")
BETHANECHOL 25 MG TABLET Bladder pill 07/17/2016, SOUTHERN PHARMACY SERVICE Rx# 000020465421, quantity filled 120.00, 30 day supply watering eyes	$28.82 breathing trouble	$8.70 breathing worsened	$31.11 (paid by "Additional Employer coverage")
LISINOPRIL 10 MG TABLET Hypertension 07/17/2016, SOUTHERN PHARMACY SERVICE increase inflammation Rx# 000020375158, quantity filled 30.00, 30 day supply	$4.54	$8.70	-$2.42 (paid by "Additional Employer coverage")
RANITIDINE 150 MG TABLET 07/20/2016, SOUTHERN PHARMACY SERVICE Rx# 000020259318, quantity filled 30.00, 30 day supply	$3.81	$8.70	-$3.45 (paid by "Additional Employer coverage")
LANTUS 100 UNITS/ML VIAL 07/21/2016, SOUTHERN PHARMACY SERVICE Rx# 000020375157, quantity filled 10.00, 30 day supply	$16.86	$38.00	$132.33 (paid by "Medicare Coverage Gap Discount Program") $84.07 (paid by "Additional Employer coverage")

(continued)

CHART 1. Your prescriptions for covered Part D drugs July, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
DEXILANT DR 30 MG CAPSULE 07/25/2016, SOUTHERN PHARMACY SERVICE Rx# 000020489118, quantity filled 28.00, 14 day supply	$13.83	$28.42	$121.31 (paid by "Medicare Coverage Gap Discount Program") $82.14 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 07/27/2016, SOUTHERN PHARMACY SERVICE Rx# 000020500519, quantity filled 14.00, 14 day supply	$2.40	$4.06	-$0.75 (paid by "Additional Employer coverage")
ALBUTEROL SUL 1.25 MG/3 ML SOL 07/27/2016, SOUTHERN PHARMACY SERVICE Rx# 000020500425, quantity filled 75.00, 5 day supply	$8.81	$9.00	$3.17 (paid by "Additional Employer coverage")
WARFARIN SODIUM 1 MG TABLET 07/28/2016, SOUTHERN PHARMACY SERVICE Rx# 000020500957, quantity filled 7.00, 14 day supply	$1.85	$4.06	-$1.51 (paid by "Additional Employer coverage")
ALBUTEROL SUL 1.25 MG/3 ML SOL 07/28/2016, SOUTHERN PHARMACY SERVICE Rx# 000020500972, quantity filled 75.00, 3 day supply	$8.63	$9.00	$2.91 (paid by "Additional Employer coverage")
TRANSDERM-SCOP 1.5 MG/3 DAY 07/29/2016, SOUTHERN PHARMACY SERVICE Rx# 000020505337, quantity filled 4.00, 12 day supply	$5.25	$40.62	$37.99 (paid by "Medicare Coverage Gap Discount Program") -$5.25 (paid by "Additional Employer coverage")



(continued)

CHART 1.
Your prescriptions for covered Part D drugs
July, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Totals for the month of July, 2016 **Your "out-of-pocket costs" amount is $714.75.** (This is the amount you paid this month ($253.07) plus the amount of "other payments" made this month that count toward your "out-of-pocket costs" ($461.68). See definitions in Section 3.) **Your "total drug costs" amount is $1,120.27.** (This is the total for this month of all payments made for your drugs by the plan ($131.12) and you ($253.07) plus "other payments" ($736.08).)	$131.12 (total for the month)	$253.07 (total for the month)	$736.08 (total for the month) (Of this amount, $461.68 counts toward your "out-of pocket costs". See definitions in Section 3.)

Year-to-date totals *1/1/2016* through *7/31/2016*	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Your year-to-date amount for "out-of-pocket costs" is $2,299.36. **Your year-to-date amount for "total drug costs" is $5,911.80.** For more about "out-of-pocket costs" and "total drug costs," see Section 3. **Your year-to-date amount for your Plan's annual member out-of pocket maximum is** $1,247.04	$2,531.31 (year-to-date total)	$1,247.04 (year-to-date total)	$2,133.45 (year-to-date total) (Of this amount, $1,052.32 counts toward your "out-of pocket costs." See definitions in Section 3.)

(continued)

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CHART 2.

Your prescriptions for drugs covered by our plan's Supplemental Drug Coverage
July, 2016

- This chart shows your prescriptions for drugs that are not generally covered by Medicare.
- These drugs are covered for you under our plan's Supplemental Drug Coverage.

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
HYOSCYAMINE 0.125 MG TAB SL 07/27/2016, SOUTHERN PHARMACY SERVICE Rx# 000020498684, quantity filled 30.00, 5 day supply	$0.00	$8.73	$0.00
Totals for the month of July, 2016	$0.00	$8.73	$0.00

These payments do not count toward your "out-of-pocket costs" or your "total drug costs" because they are for drugs that are not generally covered by Medicare. (See definitions in Section 3.)



Express Scripts
PO Box 14235
Lexington, KY 40512-4235

September 09, 2016

EXPRESS SCRIPTS®
Medicare (PDP)

Your member numbers are:

Member ID: 3761160001

Group Number: 7258MDRX

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Cyc8061//002924//4108//
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BELMONT, NC 28012-3316

Your Monthly Prescription Drug Summary

For August, 2016

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Express Scripts Medicare (PDP) is a prescription drug plan with a Medicare contract. Enrollment in Express Scripts Medicare depends on contract renewal.

SECTION 1. Your prescriptions during the past month

- Chart 1 shows your prescriptions for covered Part D drugs for the past month.
- **Please look over this information about your prescriptions to be sure it is correct.** If you have any questions or think there is a mistake, Section 5 tells what you should do.
- Your group drug coverage is always equal to or greater than basic Part D coverage by itself. However, on a specific drug your plan copay or coinsurance amount may be greater than it would be if you had basic Part D coverage by itself. If the basic Part D coverage would be greater than your group coverage, the amount shown in the "other payments" column in your EOB may be negative. In this case the negative amount is the way Medicare wants us to account for this difference. It is not an error and it does not mean you made an over payment.

CHART 1. Your prescriptions for covered Part D drugs August, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
HUMALOG 100 UNITS/ML KWIKPEN 07/13/2016, SOUTHERN PHARMACY SERVICES Rx# 000020455922, quantity filled -3.00, 8 day supply	$0.00	$-38.00	-$48.74 (paid by "Medicare Coverage Gap Discount Program") -$12.50 (paid by "Additional Employer coverage")
HUMALOG 100 UNITS/ML KWIKPEN 07/13/2016, SOUTHERN PHARMACY SERVICES Rx# 000020455922, quantity filled 3.00, 8 day supply	$6.21	$38.00	$52.40 (paid by "Medicare Coverage Gap Discount Program") $9.95 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 07/27/2016, SOUTHERN PHARMACY SERVICES Rx# 000020500519, quantity filled -14.00, 14 day supply	$0.00	$-4.06	-$1.65 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 07/27/2016, SOUTHERN PHARMACY SERVICES Rx# 000020500519, quantity filled 15.00, 14 day supply	$2.48	$4.06	-$0.64 (paid by "Additional Employer coverage")

(continued)

CHART 1.
Your prescriptions for covered Part D drugs
August, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
HUMALOG 100 UNITS/ML KWIKPEN 08/02/2016, SOUTHERN PHARMACY SERVICES Rx# 000020513790, quantity filled 3.00, 8 day supply	$6.21	$38.00	$52.40 (paid by "Medicare Coverage Gap Discount Program") $9.95 (paid by "Additional Employer coverage")
DEXILANT DR 30 MG CAPSULE 08/07/2016, SOUTHERN PHARMACY SERVICES Rx# 000020529516, quantity filled 28.00, 14 day supply	$13.83	$28.42	$121.31 (paid by "Medicare Coverage Gap Discount Program") $82.14 (paid by "Additional Employer coverage")
LEVETIRACETAM 500 MG TABLET 08/07/2016, SOUTHERN PHARMACY SERVICES Rx# 000020529377, quantity filled 60.00, 30 day supply	$9.00	$8.70	$3.73 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 08/07/2016, SOUTHERN PHARMACY SERVICES Rx# 000020529376, quantity filled 14.00, 14 day supply	$2.44	$4.06	-$0.70 (paid by "Additional Employer coverage")
IPRAT-ALBUT 0.5-3(2.5) MG/3 ML 08/08/2016, SOUTHERN PHARMACY SERVICES Rx# 000020532247, quantity filled 60.00, 5 day supply	$3.33	$7.93	-$3.33 (paid by "Additional Employer coverage")
TRANSDERM-SCOP 1.5 MG/3 DAY 08/08/2016, SOUTHERN PHARMACY SERVICES Rx# 000020530864, quantity filled 4.00, 12 day supply	$5.25	$40.62	$37.99 (paid by "Medicare Coverage Gap Discount Program") -$5.25 (paid by "Additional Employer coverage")

(continued)

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CHART 1. Your prescriptions for covered Part D drugs August, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
LANTUS 100 UNITS/ML VIAL 08/10/2016, SOUTHERN PHARMACY SERVICES Rx# 000020532253, quantity filled 10.00, 28 day supply	$16.62	$38.00	$132.33 (paid by "Medicare Coverage Gap Discount Program") $83.87 (paid by "Additional Employer coverage")
HUMALOG 100 UNITS/ML KWIKPEN 08/12/2016, SOUTHERN PHARMACY SERVICE Rx# 000020548839, quantity filled 3.00, 8 day supply	$6.21	$38.00	$52.40 (paid by "Medicare Coverage Gap Discount Program") $9.95 (paid by "Additional Employer coverage")
WARFARIN SODIUM 1 MG TABLET 08/15/2016, SOUTHERN PHARMACY SERVICE Rx# 000020552014, quantity filled 6.00, 30 day supply	$3.26	$7.77	-$3.26 (paid by "Additional Employer coverage")
LISINOPRIL 10 MG TABLET 08/15/2016, SOUTHERN PHARMACY SERVICE Rx# 000020375158, quantity filled 30.00, 30 day supply	$4.60	$8.70	-$2.34 (paid by "Additional Employer coverage")
BETHANECHOL 25 MG TABLET 08/19/2016, SOUTHERN PHARMACY SERVICE Rx# 000020565792, quantity filled 120.00, 30 day supply	$29.98	$8.70	$32.70 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 08/20/2016, SOUTHERN PHARMACY SERVICE Rx# 000020552010, quantity filled 29.00, 29 day supply	$5.05	$8.41	-$1.44 (paid by "Additional Employer coverage")



(continued)

CHART 1. Your prescriptions for covered Part D drugs August, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
DEXILANT DR 30 MG CAPSULE 08/22/2016, SOUTHERN PHARMACY SERVICE Rx# 000020573745, quantity filled 28.00, 14 day supply	$13.83	$28.42	$121.31 (paid by "Medicare Coverage Gap Discount Program") $82.14 (paid by "Additional Employer coverage")
HUMALOG 100 UNITS/ML KWIKPEN 08/28/2016, SOUTHERN PHARMACY SERVICES Rx# 000020588242, quantity filled 3.00, 8 day supply	$6.21	$38.00	$52.40 (paid by "Medicare Coverage Gap Discount Program") $9.95 (paid by "Additional Employer coverage")
TRANSDERM-SCOP 1.5 MG/3 DAY 08/31/2016, SOUTHERN PHARMACY SERVICES Rx# 000020598910, quantity filled 4.00, 12 day supply	$5.25	$40.62	$37.99 (paid by "Medicare Coverage Gap Discount Program") -$5.25 (paid by "Additional Employer coverage")
Totals for the month of August, 2016 **Your "out-of-pocket costs" amount is $956.14.** (This is the amount you paid this month ($344.35) plus the amount of "other payments" made this month that count toward your "out-of-pocket costs" ($611.79). See definitions in Section 3.) **Your "total drug costs" amount is $1,383.92.** (This is the total for this month of all payments made for your drugs by the plan ($139.76) and you ($344.35) plus "other payments" ($899.81).)	$139.76 (total for the month)	$344.35 (total for the month)	$899.81 (total for the month) (Of this amount, $611.79 counts toward your "out-of pocket costs". See definitions in Section 3.)

(continued)

JOBID 020161141O4 - 002924 - 0003 of 0005 - NNNNNN - 12978

Year-to-date totals *1/1/2016* through *8/31/2016*	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Your year-to-date amount for "out-of-pocket costs" is $3,255.50. **Your year-to-date amount for "total drug costs" is $7,295.72.** For more about "out-of-pocket costs" and "total drug costs," see Section 3. **Your year-to-date amount for your Plan's annual member out-of pocket maximum is** $1,591.39	$2,662.83 (year-to-date total)	$1,591.39 (year-to-date total)	$3,041.50 (year-to-date total) (Of this amount, $1,664.11 counts toward your "out-of pocket costs." See definitions in Section 3.)



SECTION 2. Which "drug payment stage" are you in?

As shown below, your Part D prescription drug coverage has "drug payment stages." How much you pay for a covered Part D prescription depends on which payment stage you are in when you fill it. During the calendar year, whether you move from one payment stage to the next depends on how much is spent for your drugs.

STAGE 1
Yearly Deductible

(Because there is no deductible for the plan, this payment stage does not apply to you.)

STAGE 2
Initial Coverage

- You begin in this payment stage when you fill your first prescription of the year. During this stage, the plan pays its share of the cost of your drugs and you (or others on your behalf) pay your share of the cost.
- You generally stay in this stage until the amount of your year-to-date "total drug costs" reaches **$3,310.00**. Then you move to payment stage 3, Coverage Gap.

You are in this stage:

STAGE 3
Coverage Gap

- During this payment stage, the plan will provide additional coverage that will result in the same cost-sharing amount as in the Initial Coverage stage.
- You generally stay in this stage **until the amount of your year-to-date "out-of-pocket costs" reaches $4,850.00**. As of 08/31/2016 your year-to-date "out-of-pocket costs" was $3,255.50 (see Section 3).

What happens next?

Once you (or others on your behalf) have paid **an additional $1,594.50 in "out-of-pocket costs"**, you move to the next payment stage (stage 4, Catastrophic Coverage).

STAGE 4
Catastrophic Coverage

- During this payment stage, the plan pays most of the cost for your covered drugs.
- You generally stay in this stage for the rest of the calendar year (through December 31, 2016).

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SECTION 3. Your "out-of-pocket costs" and "total drug costs" (amounts and definitions)

We're including this Section to help you keep track of your "out-of-pocket costs" and "total drug costs" because these costs determine which drug payment stage you are in. As explained in Section 2, the payment stage you are in determines how much you pay for your prescriptions.

Your "out-of-pocket costs"

$956.14 month of August, 2016

$3,255.50 year-to-date (since January, 2016)

DEFINITION:

"Out-of-pocket costs" includes:

- What you pay when you fill or refill a prescription for a covered Part D drug. (This includes payments for your drugs, if any, that are made by family or friends.)
- Payments made for your drugs by any of the following programs or organizations: "Extra Help" from Medicare; Medicare's Coverage Gap Discount Program; Indian Health Service; AIDS drug assistance programs; most charities; and most State Pharmaceutical Assistance Programs (SPAPs).

It does not include:

- Payments made for: a) plan premiums, b) drugs not covered by our plan, c) non-Part D drugs (such as drugs you receive during a hospital stay), d) drugs obtained at a non-network pharmacy that does not meet our out-of-network pharmacy access policy.
- Payments made for your drugs by any of the following programs or organizations: employer or union health plans; some government-funded programs, including TRICARE and the Veteran's Administration; Worker's Compensation; and some other programs.

Your "total drug costs"

$1,383.92 month of August, 2016

$7,295.72 year-to-date (since January, 2016)

DEFINITION:

"Total drug costs" is the total of all payments made for your covered Part D drugs. It includes:

- What the plan pays.
- What you pay.
- What others (programs or organizations) pay for your drugs.

Learn More: Medicare has made the rules about which types of payments count and do not count toward "out-of-pocket costs" and "total drug costs." The definitions on this page give you only the main rules. For details, including more about "covered Part D drugs," see the *Evidence of Coverage*, our benefits booklet (for more about the *Evidence of Coverage*, see Section 6).



Express Scripts
PO Box 14235
Lexington, KY 40512-4235

July 07, 2016

EXPRESS SCRIPTS®
Medicare (PDP)

Your member numbers are:

Member ID: 3761160001

Group Number: 7258MDRX

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Cyc8057//001880//1190//
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CHART 1. Your prescriptions for covered Part D drugs June, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
WARFARIN SODIUM 1 MG TABLET 05/02/2016, SOUTHERN PHARMACY SERVICES Rx# 000020296565, quantity filled 2.00, 1 day supply	$0.25	$0.29	$0.06 (paid by "Additional Employer coverage")
PROMETHAZINE 25 MG SUPPOSITORY 05/11/2016, SOUTHERN PHARMACY SERVICES Rx# 000020295836, quantity filled 1.00, 1 day supply	$3.62	$8.63	-$3.62 (paid by "Additional Employer coverage")
DEXTROSE 5%-0.45% NACL IV SOLN 05/14/2016, SOUTHERN PHARMACY SERVICES Rx# 000020298839, quantity filled 1000.00, 1 day supply	$0.22	$1.22	$1.00 (paid by "Medicare Coverage Gap Discount Program") -$0.22 (paid by "Additional Employer coverage")
WARFARIN SODIUM 2.5 MG TABLET 06/01/2016, SOUTHERN PHARMACY SERVICES Rx# 000020267785, quantity filled 11.00, 11 day supply	$1.75	$3.19	-$0.78 (paid by "Additional Employer coverage")
RANITIDINE 150 MG TABLET 06/02/2016, SOUTHERN PHARMACY SERVICES Rx# 000020259318, quantity filled 23.00, 23 day supply	$2.81	$6.67	-$2.78 (paid by "Additional Employer coverage")

(continued)



CHART 1. Your prescriptions for covered Part D drugs June, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
WARFARIN SODIUM 2 MG TABLET 06/06/2016, SOUTHERN PHARMACY SERVICES Rx# 000020314920, quantity filled 30.00, 30 day supply	$4.62	$8.70	-$2.31 (paid by "Additional Employer coverage")
WARFARIN SODIUM 2.5 MG TABLET 06/06/2016, SOUTHERN PHARMACY SERVICES Rx# 000020314918, quantity filled 30.00, 30 day supply	$4.92	$8.70	-$1.91 (paid by "Additional Employer coverage")
DEXILANT DR 30 MG CAPSULE 06/07/2016, SOUTHERN PHARMACY SERVICES Rx# 000020325085, quantity filled 28.00, 14 day supply	$13.83	$28.42	$121.31 (paid by "Medicare Coverage Gap Discount Program") $82.14 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 06/13/2016, SOUTHERN PHARMACY SERVICES Rx# 000020347405, quantity filled 14.00, 14 day supply	$2.37	$4.06	-$0.79 (paid by "Additional Employer coverage")
WARFARIN SODIUM 1 MG TABLET 06/13/2016, SOUTHERN PHARMACY SERVICES Rx# 000020347413, quantity filled 7.00, 14 day supply	$1.84	$4.06	-$1.53 (paid by "Additional Employer coverage")
LEVETIRACETAM 500 MG TABLET 06/13/2016, SOUTHERN PHARMACY SERVICES Rx# 000020346096, quantity filled 60.00, 30 day supply	$6.83	$8.70	$0.74 (paid by "Additional Employer coverage")
BETHANECHOL 25 MG TABLET 06/13/2016, SOUTHERN PHARMACY SERVICES Rx# 000020346098, quantity filled 120.00, 30 day supply	$27.93	$8.70	$29.86 (paid by "Additional Employer coverage")

(continued)

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CHART 1. Your prescriptions for covered Part D drugs June, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
NYAMYC 100,000 UNITS/GM POWDER 06/14/2016, SOUTHERN PHARMACY SERVICES Rx# 000020353475, quantity filled 15.00, 5 day supply	$4.44	$9.00	-$2.88 (paid by "Additional Employer coverage")
LANTUS 100 UNITS/ML VIAL 06/15/2016, SOUTHERN PHARMACY SERVICES Rx# 000020358970, quantity filled 10.00, 30 day supply	$16.86	$38.00	$132.33 (paid by "Medicare Coverage Gap Discount Program") $84.07 (paid by "Additional Employer coverage")
LISINOPRIL 10 MG TABLET 06/18/2016, SOUTHERN PHARMACY SERVICES Rx# 000020375158, quantity filled 30.00, 30 day supply	$4.49	$8.70	-$2.49 (paid by "Additional Employer coverage")
DEXILANT DR 30 MG CAPSULE 06/21/2016, SOUTHERN PHARMACY SERVICES Rx# 000020381778, quantity filled 28.00, 14 day supply	$13.83	$28.42	$121.31 (paid by "Medicare Coverage Gap Discount Program") $82.14 (paid by "Additional Employer coverage")
RANITIDINE 150 MG TABLET 06/25/2016, SOUTHERN PHARMACY SERVICES Rx# 000020259318, quantity filled 25.00, 25 day supply	$3.17	$7.25	-$2.87 (paid by "Additional Employer coverage")
WARFARIN SODIUM 5 MG TABLET 06/25/2016, SOUTHERN PHARMACY SERVICES Rx# 000020397545, quantity filled 14.00, 14 day supply	$2.40	$4.06	-$0.75 (paid by "Additional Employer coverage")



(continued)

CHART 1.
Your prescriptions for covered Part D drugs
June, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Totals for the month of June, 2016 **Your "out-of-pocket costs" amount is $562.72.** (This is the amount you paid this month ($186.77) plus the amount of "other payments" made this month that count toward your "out-of-pocket costs" ($375.95). See definitions in Section 3.) **Your "total drug costs" amount is $934.98.** (This is the total for this month of all payments made for your drugs by the plan ($116.18) and you ($186.77) plus "other payments" ($632.03).)	$116.18 (total for the month)	$186.77 (total for the month)	$632.03 (total for the month) (Of this amount, $375.95 counts toward your "out-of pocket costs". See definitions in Section 3.)

Year-to-date totals *1/1/2016 through 6/30/2016*	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Your year-to-date amount for "out-of-pocket costs" is $1,584.61. **Your year-to-date amount for "total drug costs" is $4,791.53.** For more about "out-of-pocket costs" and "total drug costs," see Section 3. **Your year-to-date amount for your Plan's annual member out-of pocket maximum is** $993.97	$2,400.19 (year-to-date total)	$993.97 (year-to-date total)	$1,397.37 (year-to-date total) (Of this amount, $590.64 counts toward your "out-of pocket costs." See definitions in Section 3.)

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SECTION 2. Which "drug payment stage" are you in?

As shown below, your Part D prescription drug coverage has "drug payment stages." How much you pay for a covered Part D prescription depends on which payment stage you are in when you fill it. During the calendar year, whether you move from one payment stage to the next depends on how much is spent for your drugs.

STAGE 1
Yearly Deductible

(Because there is no deductible for the plan, this payment stage does not apply to you.)

STAGE 2
Initial Coverage

- You begin in this payment stage when you fill your first prescription of the year. During this stage, the plan pays its share of the cost of your drugs and you (or others on your behalf) pay your share of the cost.
- You generally stay in this stage until the amount of your year-to-date "total drug costs" reaches **$3,310.00**. Then you move to payment stage 3, Coverage Gap.

You are in this stage:

STAGE 3
Coverage Gap

- During this payment stage, the plan will provide additional coverage that will result in the same cost-sharing amount as in the Initial Coverage stage.
- You generally stay in this stage **until the amount of your year-to-date "out-of-pocket costs" reaches $4,850.00**. As of 06/30/2016 your year-to-date "out-of-pocket costs" was $1,584.61 (see Section 3).

What happens next?

Once you (or others on your behalf) have paid **an additional $3,265.39 in "out-of-pocket costs"**, you move to the next payment stage (stage 4, Catastrophic Coverage).

STAGE 4
Catastrophic Coverage

- During this payment stage, the plan pays most of the cost for your covered drugs.
- You generally stay in this stage for the rest of the calendar year (through December 31, 2016).



Express Scripts
PO Box 14235
Lexington, KY 40512-4235

May 05, 2016

EXPRESS SCRIPTS®
Medicare (PDP)

Your member numbers are:

Member ID: 3761160001

Group Number: 7258MDRX

547 2016059118 CID PEB-MEOB
034907512463//6056//7258//
Cyc8051//000547//8518//
SCPEBAMEDDSTD
ALBERT BRADLEY
864 HAWLEY AVE
BELMONT, NC 28012-3316

Your Monthly Prescription Drug Summary

For April, 2016

This summary is your "Explanation of Benefits" (EOB) for your Medicare prescription drug coverage (Part D). Please review this summary and keep it for your records. (This is *not* a bill.)

Here are the sections in this summary:

SECTION 1. Your prescriptions during the past month
SECTION 2. Which "drug payment stage" are you in?
SECTION 3. Your "out-of-pocket costs" and "total drug costs" (amounts and definitions)
SECTION 4. Updates to the plan's Drug List that will affect drugs you take
SECTION 5. If you see mistakes on this summary or have questions, what should you do?
SECTION 6. Important things to know about your drug coverage and your rights

Need large print or another format?

To get this material in other formats, or ask for language translation services, call Express Scripts Medicare Member Services (the number is on this page).

For languages other than English:

Español 1-855-612-3128 (Spanish)

Express Scripts Medicare® (PDP) for **South Carolina Public Employee Benefit Authority** is operated by **Express Scripts Medicare**

Express Scripts Medicare Member Services

If you have questions or need help, call us 24 hours a day, 7 days a week. Calls to these numbers are free.

1-855-612-3128

TTY users call: 1-800-716-3231

On the Web at: www.express-scripts.com

JOBID 020160591118 - 000547 - 0001 of 0006 - NNNNNN - 03277

Express Scripts Medicare (PDP) is a prescription drug plan with a Medicare contract. Enrollment in Express Scripts Medicare depends on contract renewal.

SECTION 1. Your prescriptions during the past month

- Chart 1 shows your prescriptions for covered Part D drugs for the past month.
- **Please look over this information about your prescriptions to be sure it is correct.** If you have any questions or think there is a mistake, Section 5 tells what you should do.
- Your group drug coverage is always equal to or greater than basic Part D coverage by itself. However, on a specific drug your plan copay or coinsurance amount may be greater than it would be if you had basic Part D coverage by itself. If the basic Part D coverage would be greater than your group coverage, the amount shown in the "other payments" column in your EOB may be negative. In this case the negative amount is the way Medicare wants us to account for this difference. It is not an error and it does not mean you made an over payment.

CHART 1. Your prescriptions for covered Part D drugs April, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
LEVETIRACETAM 500 MG TABLET 04/08/2016, SOUTHERN PHARMACY SERVICES Rx# 000007470279, quantity filled 28.00, 14 day supply	$7.22	$4.06	-$1.66 (paid by "Additional Employer coverage")
DEXILANT DR 30 MG CAPSULE 04/08/2016, SOUTHERN PHARMACY SERVICES Rx# 000007470276, quantity filled 28.00, 14 day supply	$167.88	$28.42	$27.54 (paid by "Additional Employer coverage")
NYSTATIN 100,000 UNITS/GM OINT 04/11/2016, SOUTHERN PHARMACY SERVICES Rx# 000007470175, quantity filled 30.00, 7 day supply	$12.19	$9.00	-$4.94 (paid by "Additional Employer coverage")
GENTAMICIN 80 MG/2 ML VIAL 04/11/2016, SOUTHERN PHARMACY SERVICES Rx# 000007477651, quantity filled 84.00, 7 day supply	$36.10	$9.00	$3.04 (paid by "Additional Employer coverage")
NYAMYC 100,000 UNITS/GM POWDER 04/11/2016, SOUTHERN PHARMACY SERVICES Rx# 000007477150, quantity filled 15.00, 14 day supply	$9.56	$9.00	-$5.81 (paid by "Additional Employer coverage")

(continued)

CHART 1.
Your prescriptions for covered Part D drugs
April, 2016

	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
HUMALOG 100 UNITS/ML KWIKPEN 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483776, quantity filled 3.00, 8 day supply	$74.43	$38.00	-$13.19 (paid by "Additional Employer coverage")
WARFARIN SODIUM 3 MG TABLET 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483894, quantity filled 14.00, 14 day supply	$5.64	$4.06	-$2.18 (paid by "Additional Employer coverage")
LEVETIRACETAM 500 MG TABLET 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483778, quantity filled 28.00, 14 day supply	$7.22	$4.06	-$1.66 (paid by "Additional Employer coverage")
WARFARIN SODIUM 1 MG TABLET 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007485244, quantity filled 1.00, 1 day supply	$0.31	$0.29	-$0.19 (paid by "Additional Employer coverage")
WARFARIN SODIUM 2.5 MG TABLET 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483597, quantity filled 30.00, 30 day supply	$8.74	$8.70	-$5.78 (paid by "Additional Employer coverage")
RANITIDINE 150 MG TABLET 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483785, quantity filled 30.00, 15 day supply	$4.29	$4.35	-$2.92 (paid by "Additional Employer coverage")
KETOCONAZOLE 2% SHAMPOO 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483777, quantity filled 120.00, 30 day supply	$11.83	$9.00	-$5.06 (paid by "Additional Employer coverage")
WARFARIN SODIUM 3 MG TABLET 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483598, quantity filled 30.00, 30 day supply	$12.08	$8.70	-$4.67 (paid by "Additional Employer coverage")

(continued)

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CHART 1. Your prescriptions for covered Part D drugs April, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
WARFARIN SODIUM 2.5 MG TABLET 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483893, quantity filled 14.00, 14 day supply	$4.08	$4.06	-$2.70 (paid by "Additional Employer coverage")
NYAMYC 100,000 UNITS/GM POWDER 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483780, quantity filled 15.00, 7 day supply	$8.41	$9.00	-$6.20 (paid by "Additional Employer coverage")
NYSTATIN 100,000 UNITS/GM OINT 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483779, quantity filled 30.00, 14 day supply	$13.34	$9.00	-$4.55 (paid by "Additional Employer coverage")
DEXILANT DR 30 MG CAPSULE 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483770, quantity filled 28.00, 14 day supply	$184.28	$28.42	$33.00 (paid by "Additional Employer coverage")
LANTUS SOLOSTAR 100 UNITS/ML 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483775, quantity filled 3.00, 28 day supply	$64.17	$38.00	-$16.61 (paid by "Additional Employer coverage")
ALBUTEROL SUL 1.25 MG/3 ML SOL 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483781, quantity filled 90.00, 14 day supply	$18.50	$9.00	-$2.83 (paid by "Additional Employer coverage")
ENOXAPARIN 100 MG/ML SYRINGE 04/26/2016, SOUTHERN PHARMACY SERVICES Rx# 000007483774, quantity filled 17.00, 9 day supply	$350.84	$9.00	$107.95 (paid by "Additional Employer coverage")
NOVOFINE 32G NEEDLES 04/27/2016, SOUTHERN PHARMACY SERVICES Rx# 000007484098, quantity filled 100.00, 30 day supply	$39.54	$9.00	$4.18 (paid by "Additional Employer coverage")



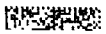
(continued)

CHART 1. Your prescriptions for covered Part D drugs April, 2016	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
ATROPINE 1% EYE DROPS 04/28/2016, SOUTHERN PHARMACY SERVICES Rx# 000007485081, quantity filled 5.00, 8 day supply	$25.30	$9.00	-$0.57 (paid by "Additional Employer coverage")
METFORMIN HCL 500 MG TABLET 04/28/2016, SOUTHERN PHARMACY SERVICES Rx# 000007485076, quantity filled 35.00, 14 day supply	$4.40	$4.06	-$2.59 (paid by "Additional Employer coverage")
WARFARIN SODIUM 6 MG TABLET 04/29/2016, SOUTHERN PHARMACY SERVICES Rx# 000007485459, quantity filled 30.00, 30 day supply	$11.43	$8.70	-$4.89 (paid by "Additional Employer coverage")
Totals for the month of April, 2016 **Your "out-of-pocket costs" amount is $273.88.** (This is the amount you paid this month ($273.88) plus the amount of "other payments" made this month that count toward your "out-of-pocket costs" ($0.00). See definitions in Section 3.) **Your "total drug costs" amount is $1,442.37.** (This is the total for this month of all payments made for your drugs by the plan ($1,081.78) and you ($273.88) plus "other payments" ($86.71).)	$1,081.78 (total for the month)	$273.88 (total for the month)	$86.71 (total for the month)

(continued)

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Year-to-date totals *1/1/2016 through 4/30/2016*	Plan paid	You paid	Other payments (made by programs or organizations; see Section 3)
Your year-to-date amount for "out-of-pocket costs" is $507.62. **Your year-to-date amount for "total drug costs" is $2,317.47.** For more about "out-of-pocket costs" and "total drug costs," see Section 3. **Your year-to-date amount for your Plan's annual member out-of pocket maximum is** $507.62	$1,468.11 (year-to-date total)	$507.62 (year-to-date total)	$341.74 (year-to-date total)



SECTION 4. Updates to the plan's Drug List that will affect drugs you take

At this time, there are no upcoming changes to our Drug List that will affect the coverage or cost of **drugs you take**. (By "drugs you take," we mean any plan-covered drugs for which you filled prescriptions in 2016 as a member of our plan.)

SECTION 5. If you see mistakes on this summary or have questions, what should you do?

If you have questions, call us

If something is confusing or doesn't look right on this monthly prescription drug summary, please call us at Express Scripts Medicare Member Services (phone numbers are on the cover of this summary). You can also find answers to many questions at our website: www.express-scripts.com

What about possible fraud?

Most health care professionals and organizations that provide Medicare services are honest. Unfortunately, there may be some who are dishonest.

If this monthly summary shows drugs you're not taking, or anything else that looks suspicious to you, please contact us.

- Call us at Express Scripts Medicare Member Services (phone numbers are on the cover of this summary).
- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call these numbers for free, 24 hours a day, 7 days a week.

SECTION 6. Important things to know about your drug coverage and your rights

Your "Evidence of Coverage" has the details about your drug coverage and costs

The *Evidence of Coverage* is our plan's benefits booklet. It explains your drug coverage and the rules you need to follow when you are using your drug coverage.

We have sent you a copy of the *Evidence of Coverage*. If you need another copy, please call us (phone numbers are on the cover of this summary).

Remember, to get your drug coverage under our plan you must use pharmacies in our network, except in certain circumstances. Also, quantity limitations and restrictions may apply.

What if you have problems related to coverage or payments for your drugs?

Your *Evidence of Coverage* has step-by-step instructions that explain what to do if you have problems related to your drug coverage and costs. Here are the chapters to look for:

- Chapter 5. Asking the plan to pay its share of a bill you have received for covered services or drugs.
- Chapter 7. What to do if you have a problem or complaint (coverage decisions, appeals, complaints).

Here are things to keep in mind:

- When we decide whether a drug is covered and how much you pay, it's called a "coverage decision." If you disagree with our coverage decision, you can appeal our decision (see Chapter 7 of the *Evidence of Coverage*).
- Medicare has set the rules for how coverage decisions and appeals

(continued)

SECTION 3. Your "out-of-pocket costs" and "total drug costs" (amounts and definitions)

We're including this Section to help you keep track of your "out-of-pocket costs" and "total drug costs" because these costs determine which drug payment stage you are in. As explained in Section 2, the payment stage you are in determines how much you pay for your prescriptions.

Your "out-of-pocket costs"

$562.72 month of June, 2016

$1,584.61 year-to-date (since January, 2016)

DEFINITION:

"Out-of-pocket costs" includes:

- What you pay when you fill or refill a prescription for a covered Part D drug. (This includes payments for your drugs, if any, that are made by family or friends.)
- Payments made for your drugs by any of the following programs or organizations: "Extra Help" from Medicare; Medicare's Coverage Gap Discount Program; Indian Health Service; AIDS drug assistance programs; most charities; and most State Pharmaceutical Assistance Programs (SPAPs).

It does not include:

- Payments made for: a) plan premiums, b) drugs not covered by our plan, c) non-Part D drugs (such as drugs you receive during a hospital stay), d) drugs obtained at a non-network pharmacy that does not meet our out-of-network pharmacy access policy.
- Payments made for your drugs by any of the following programs or organizations: employer or union health plans; some government-funded programs, including TRICARE and the Veteran's Administration; Worker's Compensation; and some other programs.

Your "total drug costs"

$934.98 month of June, 2016

$4,791.53 year-to-date (since January, 2016)

DEFINITION:

"Total drug costs" is the total of all payments made for your covered Part D drugs. It includes:

- What the plan pays.
- What you pay.
- What others (programs or organizations) pay for your drugs.

Learn More: Medicare has made the rules about which types of payments count and do not count toward "out-of-pocket costs" and "total drug costs." The definitions on this page give you only the main rules. For details, including more about "covered Part D drugs," see the *Evidence of Coverage*, our benefits booklet (for more about the *Evidence of Coverage*, see Section 6).



JOBID 020-608693S - 001880 - 0004 of 0005 - NNNNNN - 08972

CAROMONT MEDICAL GROUP INC

Guarantor Name	Albert Bradley
Patient Account #	1919366A3122
Statement Date	07/08/2016

Your Account Status

BCBS-SC notified us that you were not covered for the services rendered. Your balance is past due. If this is incorrect, contact your insurer.

Charges	$2,507.00
Previous Payments & Credits	-$2,347.68
Payment Due Upon Receipt	**$159.32**

PROFESSIONAL FEES

Charges for services rendered by a provider, such as an examination or explanation of results.

Patient Name	Provider Name	Service Location
Albert Bradley	Charmaine Luvis, DO	CIP_IP

Date	Description	Charge Status	Charges	Payments/ Credits	Patient Balance
03/15/2016	INITIAL HOSPITAL		$624.00		
04/07/2016	Insurance Payment: Medicare B-NC	Processed		-$155.33	
04/07/2016	Insurance Adjustment: Medicare B-NC	Processed		-$429.05	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$39.62

PROFESSIONAL FEES

Charges for services rendered by a provider, such as an examination or explanation of results.

Patient Name	Provider Name	Service Location
Albert Bradley	Wansi Zedom, MD	CIP_IP

Date	Description	Charge Status	Charges	Payments/ Credits	Patient Balance
03/17/2016	SBSQ HOSPITAL CA		$222.00		
04/08/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/08/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$14.11
03/18/2016	SBSQ HOSPITAL CA		$222.00		
04/09/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/09/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
06/02/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$14.11
03/19/2016	SBSQ HOSPITAL CA		$222.00		
04/15/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/15/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$14.11
03/20/2016	SBSQ HOSPITAL CA		$222.00		
04/15/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/15/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$14.11
03/21/2016	SBSQ HOSPITAL CA		$222.00		

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Any dispute regarding this statement or any amounts due must be submitted in writing to:
P.O. Box 19000, Belfast, ME 04915-4085
Submitting payment in an amount less than the total on this statement shall not constitute an offer to settle any dispute, regardless of any accompanying communication.

CAROMONT MEDICAL GROUP INC

Guarantor Name	Albert Bradley
Patient Account #	1919366A3122
Statement Date	07/08/2016

Your Account Status

BCBS-SC notified us that you were not covered for the services rendered. Your balance is past due. If this is incorrect, contact your insurer.

Charges	$2,507.00
Previous Payments & Credits	-$2,347.68
Payment Due Upon Receipt	**$159.32**

PROFESSIONAL FEES

Charges for services rendered by a provider, such as an examination or explanation of results.

Patient Name	Provider Name	Service Location
Albert Bradley	Wansi Zedom, MD	CIP_IP

Date	Description	Charge Status	Charges	Payments/ Credits	Patient Balance
04/15/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/15/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$14.11

PROFESSIONAL FEES

Charges for services rendered by a provider, such as an examination or explanation of results.

Patient Name	Provider Name	Service Location
Albert Bradley	Andrew Timothy, DO	CIP_IP

Date	Description	Charge Status	Charges	Payments/ Credits	Patient Balance
03/23/2016	SBSQ HOSPITAL CA		$222.00		
04/14/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/14/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$14.11
03/24/2016	SBSQ HOSPITAL CA		$222.00		
04/16/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/16/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$14.11
03/25/2016	HOSPITAL DISCHAR		$329.00		
04/16/2016	Insurance Payment: Medicare B-NC	Processed		-$82.03	
04/16/2016	Insurance Adjustment: Medicare B-NC	Processed		-$226.04	
05/12/2016	Insurance Company: BCBS-SC	Non-Cover		$0.00	
	Patient Balance - Misc.				$20.93

TOTAL PATIENT BALANCE **$159.32**

Carolinas HealthCare System

Facility: Carolina Hospitalists Group
Patient Name: Albert Bradley
Account Number: 82-3623932
Statement Date: 06/02/2016

Date of Service Transaction Date	Description	Charges	Insurance Payments Adjustments	Patient Payments Adjustments	Current Amount You Owe
	INVOICE NUMBER: 75423481 CAROLINAS HOSPITALIST GROUP Insurance billed Provider: Beril Cakir MD				
05/26/2016	MEDICARE PYMT: Visit Date: 04/23/2016		$188.65CR		
04/23/2016	SUBSQT HOSP CARE-DA E&M SIGNIFIC C	**$209.00**			
	VISIT TOTAL CHARGES	**$209.00**			$20.35
	INVOICE NUMBER: 75423482 CAROLINAS HOSPITALIST GROUP Insurance billed Provider: Beril Cakir MD				
05/24/2016	MEDICARE PYMT: Visit Date: 04/24/2016		$131.89CR		
04/24/2016	SUBSQT HOSP CARE-DA E&M MINOR COMP	**$146.00**			
	VISIT TOTAL CHARGES	**$146.00**			$14.11
	INVOICE NUMBER: 75423483 CAROLINAS HOSPITALIST GROUP Insurance billed Provider: Beril Cakir MD				
05/24/2016	MEDICARE PYMT: Visit Date: 04/25/2016		$222.07CR		
04/25/2016	HOSP D/C DA MGMT; MORE THAN 30 MIN	**$243.00**			
	VISIT TOTAL CHARGES	**$243.00**			$20.93

Contact Information

Our Customer Service Representatives are available to provide personalized customer service and quick handling of all inquiries and questions at 704-512-4808 or 1-800-378-3947, Monday - Thursday 8:30am to 5:30pm and Fridays 9:00am to 4:30pm.

3747 - 0X15E4ECFA - CHS_PDH_022525 - 082

##03747

SUMMARY EXPLANATION OF BENEFITS CLAIM(S) DETAIL

This is important information about services ALBERT BRADLEY received. The following information shows how much we covered and how much you may owe your provider for services received.

Patient: ALBERT BRADLEY	ID: ZCS37611600	Patient Relationship to Policyholder: SPOUSE

Claim Number: 6F141133U-00-00 | **Provider: LEVINE CANCER INSTITU** NON-PARTICIPATING PROVIDER | **Date(s) of Service: 10/08/16 - 10/11/16** | **Amount Provider May Bill You 4.52**

Your Provider Charged		Medicare Deductible	Medicare Coinsurance	Total Benefit Allowed	Medicare Approved	Medicare Paid	Amount We Paid		Amount Paid to Your Provider
492.00		0.00	38.83	186.53	191.05	152.22	34.31		34.31
209.00		0.00	19.94	0.00	98.12	78.18	0.00		0.00
209.00		0.00	19.94	0.00	98.12	78.18	0.00		0.00
TOTAL:									
910.00		**0.00**	**78.71**	**186.53**	**387.29**	**308.58**	**34.31**		**34.31**

To date, you have satisified 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 2,338.37 for this person this benefit period.

0012370

Claim Number: 6F141195U-00-00 | **Provider: PHYSICIANS ELDERCARE** NON-PARTICIPATING PROVIDER | **Date(s) of Service: 10/14/16** | **Amount Provider May Bill You 20.44**

Your Provider Charged		Medicare Deductible	Medicare Coinsurance	Total Benefit Allowed	Medicare Approved	Medicare Paid	Amount We Paid		Amount Paid to Your Provider
285.00		0.00	32.48	139.36	159.80	127.32	12.04		12.04

To date, you have satisified 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 2,304.06 for this person this benefit period.

Claim Number: 6F151452U-00-00 | **Provider: MID ATLANTIC EMERGENC** NON-PARTICIPATING PROVIDER | **Date(s) of Service: 10/17/16** | **Amount Provider May Bill You 0.00**

Your Provider Charged		Medicare Deductible	Medicare Coinsurance	Total Benefit Allowed	Medicare Approved	Medicare Paid	Amount We Paid		Amount Paid to Your Provider
642.00		0.00	34.13	195.90	167.92	133.79	34.13		34.13
34.00		0.00	1.67	16.67	8.23	6.56	1.67		1.67
TOTAL:									
676.00		**0.00**	**35.80**	**212.57**	**176.15**	**140.35**	**35.80**		**35.80**

To date, you have satisified 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 2,374.17 for this person this benefit period.

Claim Number: 6F192348U-00-00			Provider: MECKLENBURG EMERGENCY NON-PARTICIPATING PROVIDER			Date(s) of Service: 05/23/16		Amount Provider May Bill You 0.00	
Your Provider Charged		Medicare Deductible	Medicare Coinsurance	Total Benefit Allowed	Medicare Approved	Medicare Paid	Amount We Paid		Amount Paid to Your Provider
895.00		0.00	81.37	640.00	400.32	318.95	81.37		81.37
201.60		0.00	13.90	108.00	68.39	54.49	13.90		13.90
TOTAL:									
1,096.60		**0.00**	**95.27**	**748.00**	**468.71**	**373.44**	**95.27**		**95.27**

To date, you have satisified 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 187.00 toward your out-of-pocket maximum. You have satisfied 212.61 of the 2,540.00 out-of-pocket maximum for this benefit period. We paid a total of 2,469.44 for this person this benefit period.

*REMARKS:
WE PROVIDE ADMINISTRATIVE CLAIMS PAYMENT SERVICES ONLY AND DO NOT ASSUME ANY FINANCIAL RISK OR OBLIGATION WITH RESPECT TO CLAIMS.

(1) THIS AMOUNT EXCEEDS THE MAXIMUM ALLOWABLE AMOUNT FOR THIS SERVICE.

(2) WE PROCESSED THESE CHARGES ON A PREVIOUS CLAIM. PLEASE REFER TO THE EXPLANATION OF BENEFITS (EOB) WE SENT EARLIER FOR DETAILS ABOUT YOUR CLAIM STATUS.

IF YOU NEED INFORMATION REGARDING THE SPECIFIC TREATMENT AND/OR DIAGNOSIS CODES FILED ON THE CLAIM(S) IN THIS NOTICE, PLEASE CALL THE CUSTOMER SERVICE NUMBER SHOWN ON THE FIRST PAGE OF THIS NOTICE.

PARA OBTENER ASISTENCIA EN ESPANOL, LLAME AL NUMERO DE ATENCION AL CLIENTE QUE APARECE EN LA PRIMERA PAGINA DE ESTA NOTIFICACION.

PREVENTIVE SCREENING: DID YOU KNOW THAT YOU MAY BE ELIGIBLE FOR A FREE PREVENTIVE HEALTH SCREENING WORTH MORE THAN $300? IF YOU ARE COVERED BY THE STATE HEALTH PLAN, YOU (AND YOUR COVERED SPOUSE) MAY PARTICIPATE IN A WORKSITE SCREENING THROUGH YOUR EMPLOYER, REGISTER FOR A REGIONAL SCREENING OR VISIT A PARTICIPATING PROVIDER. LEARN MORE AT WWW.EIP.SC.GOV/WELLNESS.

Patient Name:	Albert Bradley	**Procedure Date:**	3/11/2016 3:42 PM
MRN:	0005744851	**Account Number:**	1607100297
Date of Birth:	10/27/1949	**Admit Type:**	Outpatient
Age:	66	**Room:**	Endo 1
Gender:	Male	**Note Status:**	Finalized
Attending MD:	KENT C. HOLTZMULLER, MD		

Providers: KENT C. HOLTZMULLER, MD (Doctor), ROXANN BURGESS, RN (Nurse), ZORIDA WAHID, Technician (Nurse)

Procedure: Upper GI endoscopy

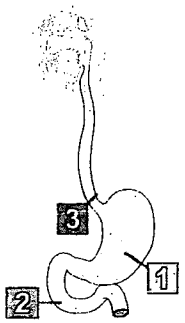
Indications: Exchange PEG tube due to malfunctioning gastrostomy tube

Referring MD: Barry J. Hanger, MD (Referring MD)

Medicines: Monitored Anesthesia Care

Complications: No immediate complications.

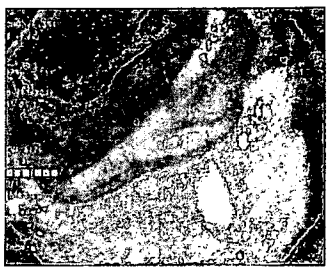
Procedure: Pre-Anesthesia Assessment:
- The H&P and patient medication allergies have been reviewed. The patient has been examined by the appropriate qualified practitioner. No changes have occurred in the patient's condition since the H&P was originally completed unless noted below. The mental status has been assessed and is without change from the pre-procedure assessment. The patient's tolerance of previous anesthesia has been reviewed. The risks and benefits of the procedure and questions were answered and informed consent was obtained. Patient identification and proposed procedure were verified by the physician, nurse and anesthesia personnel prior to procedure start in procedure room. After reviewing the risks and benefits, the patient was deemed in satisfactory condition to undergo the procedure. The anesthesia plan was to use monitored anesthesia care. Immediately prior to administration of medications, the patient was re-assessed for adequacy to receive sedatives with no changes noted from H&P. The heart rate, respiratory rate, oxygen saturations, blood pressure and response to care were monitored throughout the procedure. The physical status of the patient was re-assessed after the procedure.



Upper Gastrointestinal Tract

- ASA Grade Assessment: IV - After obtaining informed consent, the endoscope was passed under direct vision. Throughout the procedure, the patient's blood pressure, pulse, and oxygen saturations were monitored continuously. The GIF-H190 2527806 was introduced through the mouth, and advanced to the third part of duodenum. The upper GI endoscopy was accomplished without difficulty. The patient tolerated the procedure well.

Findings:
- The examined esophagus was normal.
- The examined duodenum was normal.


2 3rd Portion of the Duodenum : Normal

- A gastric tube was found on the anterior wall of the stomach.
- Normal mucosa was found in the entire examined stomach. Because the tube was poorly functioning the PEG required removal. The PEG was removed under endoscopic vision. Removal was easily accomplished using a snare. An externally removable 24 Fr EndoVive Safety gastrostomy tube was lubricated. The guide wire was passed through the existing G-tube port and snared endoscopically. The endoscope and snare were then removed, pulling the wire out through the mouth. The g-tube was tied to the guidewire, pulled through the mouth into the stomach and then pulled out from the stomach

Carolinas HealthCare System Pineville

Endoscopy Unit

3/11/2016

Albert Bradley

This Upper GI endoscopy was performed on Friday, March 11, 2016. Our impressions and recommendations are as follows:

Impressions :
- Normal esophagus.
- Normal examined duodenum.
- A gastric tube was found in the stomach.
- Normal mucosa was found in the entire stomach.
- Because was not functioning the PEG was removed and replaced with an externally removable PEG.
- No specimens collected.

Recommendations :
- Discharge patient to home (ambulatory).
- Replace as needed

Can use immediately.

If I can be of further assistance, please feel free to contact me. Work: (704) 302-8200

Sincerely,

KENT C. HOLTZMULLER, MD
Finalized Date: 3/11/2016 4:11:31 PM
This report has been signed electronically.

December 28, 2015

Christine Bradley
864 Hawley Ave., Unit 222
Belmont, NC 28012

Commissioner T. Scott Beck
SC Workers Compensation Commission
1333 Main St., Suite 500
Columbia, SC 29202-1715

Dear Commissioner Beck:

It has been brought to my attention major decisions have been made regarding my husband's case. This is very concerning since Mike Farry informed me that he is no longer the guardian. and since I, nor Albert Bradley, the claimant received proper notification of this matter. Albert Bradley was also not present for any hearing regarding such matters. Again, this is quite concerning. Which brings me again to all the matters of concern that I have brought to your attention over the duration of this case regarding my husband's claim/case such as not receiving home health services, denial of physical and speech therapy, denial of transportation, denial of medical services all under the direction of the workers' compensation commission. and now using this ploy to attempt stop his weekly compensation check and end his claim. The insurance company (Zurich) for several years has tried to kill my husband and me in the process and the commission is fully aware of what is going on. Now another repeat attempt of what was done in Texas and with Gaston County DSS?

Albert Bradley has paid for medications and supplies out-of-pocket that were ordered to be paid back since January 2013, and he still has not received those payments yet. Albert Bradley has driven to court several times and has never been paid mileage. Why? Albert Bradley goes to the doctor for medical care and the doctors comes in to treat him. Then they retreat and return with, "Oh, I'm sorry there isn't anything wrong with him." When there clearly is something wrong with him. Why? Now, do you think that I will just sit back and allow the insurance company to actually take over my husband, be his guardian, and terminate his life? Is this even legal? I have sweat over this man since the time that Southern Industrial proved to be negligent with their habitually malfunctioning equipment which he unfortunately fell victim to on May 16, 2011. I have taken care of this man since his injury because Zurich refuses to provide him with reliable, professional, honest, home health services—without creating conflict to make it appear that I am causing a problem because THEY DON'T WANT TO PAY!

This is ridiculous. It is a shame that the one regulating body (SC WCC) that is in place to provide some form of regulation for monstrous insurance companies (Zurich) that obviously do not have the injured workers' best interests at heart will actually stand by and let their injured workers fall prey to these monsters. This is very sad. And on top of that, in severe cases such as these, to have family members to become victimized and abused to a point where they have been enslaved is

been made without my regard, and I have not been afforded a right to be present at said hearings to be given the opportunity to seek representation in this matter.

Again, the claimant Albert Bradley is brain-injured and totally disabled from the injuries he sustained while at work on May 16, 2011. The insurance carrier Zurich, was aware of injuries Mr. Bradley suffered at the hands of home health agencies they put in place, and Zurich neglected to have him treated. Zurich was aware of shoulder injuries that were noted by medical records to be chronic injuries, and such injuries occurred when he was under the care of home health. Zurich knew all along about Albert Bradley's shoulder injuries before I ever reported such an injury, and they acted as they usually do—as if nothing ever happened. In their usual neglectful manner. The same way Zurich filed the false report to the Gaston County Department of Social Services to have the claimant Albert Bradley removed from the home so they could continue their pattern of neglect by not paying for his care. They (Zurich) are responsible for the injuries Mr. Bradley sustained, and they (Zurich) are responsible for the neglect they continue to inflict upon him. As for the Roho Cushion, a licensed physician or therapist must set-up this special cushion according to the recommendations of the manufacturer. Who was the licensed therapist or physician the carrier sent out to the home to set up the Roho cushion? Who was the licensed technician the carrier sent out to the home to repair the air mattress? Remember, I do not have any rights.

Albert Bradley continues to receive numerous medical bills that are not being paid by the carrier who is the primary payer of the claimant's medical expenses. Mr. Bradley is receiving harassing phone calls from bill collectors as a result of Zurich not taking accountability and paying for the care of Albert Bradley. This is not Medicare's responsibility, and please be clear that Albert Bradley, nor will any of his family members be responsible for any of the claimant's medical debt.

Next issue, the dilapidated van is not for sale. I am not responsible for transporting, and I will not transport Albert Bradley to medical appointments. There are stipulations that I have great concerns about along with the fact that I have the responsibility of being a 24/7 caregiver. Again, this brings great concern, and I stress any decisions being made regarding me or my husband, Albert Bradley, I have the right to have representation and be present when such decisions are being made.

Also, for the record, Albert Bradley does not have a case manager or a nurse. Jennifer Burton is not Albert Bradley's case manager, and she makes no contact with Albert Bradley, me, or any other family members. Jennifer Burton also gave false testimony at the previous hearing in which we were all present. She lied under oath, and she continues to provide false documentation for files as they relate to Albert Bradley.

Commissioner Beck, I appreciate your assistance with this matter.

Sincerely,

Christine Bradley

Cardiovascular Services
Dermatology
Endocrinology
Gastroenterology
Senior Services

Internal Medicin
Hematology/Oncolog
Pulmonolog
Rheumatolog
Sleep Medicin

Mecklenburg Medical Group

Social Security Administration
609 Cotton Blossom Cir.
Gastonia,
NC, 28054

To Whom It May Concern,

Albert Bradley [date of birth 10-27-1949] is in need of total care and is unable to make his own decisions. He was involved in a severe accident in 05-16-2011 with facial injuries, respiratory arrest ultimately requiring a tracheostomy. There was resultant anoxic brain injury and aphasic. He also has a PEG tube for his feeds and nutrition, requiring insulin. He requires 24-hour total care due to the severity of his injuries, and due to the anoxic brain injury, cannot make his own decisions.

Please contact us if you have any further questions.

Yours sincerely,
Barry Hanger MD.
Dr. B. Hanger

Signature Line
Electronically Signed By: HANGER, BARRY J MD
04/16/2012 10:45 PM

www.mecklenburgmedicalgroup.org
332 Sam Newell Road, Suite 2000 • Matthews, NC 28105 • 704-302-8500 • 704-302-8501 (fax) ◘ 200 S. College Street, Suite 500 • Charlotte, NC 28202 • 704-302-8800 • 704-632-4001 (fa
10650 Park Road, Suite 420 • Charlotte, NC 28210 • 704-302-8700 • 704-302-8701 (fax) ◘ 4525 Cameron Valley Parkway • Charlotte, NC 28211 • 704-302-9300 • 704-302-9301 (fa
1900 Brunswick Avenue • Charlotte, NC 28207 • 704-302-8400 • 704-338-6577 (fax) ◘ 15110 John J. Delaney Drive, Suite 200 • Charlotte, NC 28277 • 704-302-8100 • 704-302-8101 (fa
16455 Statesville Road, Suite 200 • Huntersville, NC 28078 • 704-302-8600 • 704-302-8650 (fax) ◘ 1025 Morehead Medical Drive, Suite 200 • Charlotte, NC 28204 • 704-302-8000 • 704-302-8001 (fa
3030 Randolph Road, Suite 200 • Charlotte, NC 28211 • 704-302-8200 • 704-302-8201 (fax) ◘ 7666 Charlotte Highway, Suite 200 • Indian Land, SC 29707 • 803-431-8225 • 803-431-8226 (fax)
13640 Steelecroft Parkway, Suite 320 • Charlotte, NC 28278 • 704-302-8900 • 704-302-8901 (fax)

Carolina Urology Partners

PO Box 2369
Huntersville, NC 28070

1 / 2

STATEMENT DATE	12/23/16
ACCOUNT NUMBER	83575
PAYMENT DUE DATE	Due Upon Receipt
PAY THIS AMOUNT	$140.42

Billing Questions? Call (888) 718-8827

000347

Albert Bradley
864 HAWLEY AVE UNIT 222
BELMONT, NC 28012-3497

STATEMENT - Carolina Urology Partners

DATE	DESCRIPTION	AMOUNT	INSURANCE BALANCE	PATIENT BALANCE
02/09/16	ENCOUNTER 576181 FOR BRADLEY WITH WATERHOUSE JR MD, ROBERT L			
02/09/16	99213 - OFFICE OR OTHER OUTPATIENT VISIT LVL 3	130.00		39.53
02/18/16	MEDICARE PAYMENT (PR1 (DEDUCTIBLE AMOUNT))	0.00		
02/18/16	MEDICARE ADJUSTMENT (PR1 (DEDUCTIBLE AMOUNT))	-59.71		
07/26/16	BCBS PAYMENT	-30.76		
07/26/16	BCBS ADJUSTMENT	0.00		
	ENCOUNTER TOTAL	39.53	0.00	39.53
02/17/16	ENCOUNTER 581635 FOR BRADLEY WITH WATERHOUSE JR MD, ROBERT L			
02/17/16	99214 - OFFICE OR OTHER OUTPATIENT VISIT LVL 4	195.00		72.32
03/07/16	MEDICARE ADJUSTMENT (PR1 (DEDUCTIBLE AMOUNT))	-91.39		
03/07/16	MEDICARE PAYMENT (PR1 (DEDUCTIBLE AMOUNT))	-6.29		
03/22/16	BCBS PAYMENT	0.00		
07/22/16	PATIENT CHECK PAYMENT	-25.00		
02/17/16	51798 - BLADDER ULTRASOUND/ PVR	46.00		3.57
03/07/16	MEDICARE PAYMENT	-14.00		
03/07/16	MEDICARE ADJUSTMENT	-28.43		
03/22/16	BCBS PAYMENT	0.00		
02/17/16	81003 - URNLS DIP STICK/TABLET RGNT AUTO	6.00		
03/07/16	MEDICARE ADJUSTMENT	-3.00		
03/07/16	MEDICARE PAYMENT	-3.00		

If paying by check, please include your account number on the checks memo line

Current	Over 30 Days	Over 60 Days	Over 90 Days	Over 121 Days	Total Amount Due
$0.00	$0.00	$39.53	$0.00	$100.89	$140.42

PLEASE DETACH AT THE PERFORATION AND MAIL THIS PORTION WITH YOUR PAYMENT

☐ Please check box if above address is incorrect or if insurance information has changed and indicate change(s) on reverse.

☐ VISA ☐ MASTERCARD ☐ DISCOVER ☐ AMEX

CARD NUMBER	3 DIGIT CODE	AMOUNT PAID
SIGNATURE		EXP. DATE
NAME		STATEMENT ID
Albert Bradley		52303002

AMOUNT DUE	ACCOUNT NUMBER	PAYMENT DUE DATE
$140.42	83575	Due Upon Receipt

To make your payment online, please visit www.carolinaurology.com and click Online Bill Pay

Please remit payments to:

Carolina Urology Partners
PO Box 2369
Huntersville, NC 28070

Carolina Urology Partners

Statement Date: 12/23/16
Account Number: 83575
Patient Name: Albert Bradley

DATE	DESCRIPTION	AMOUNT	INSURANCE BALANCE	PATIENT BALANCE
	ENCOUNTER TOTAL	75.89	0.00	75.89
08/08/16	ENCOUNTER 691590 FOR BRADLEY WITH WATERHOUSE JR MD, ROBERT L			
08/08/16	99998 - NO SHOW FEE - OFFICE VISIT	25.00		25.00
	ENCOUNTER TOTAL	25.00	0.00	25.00

0020861

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

713522 009067
0005 of 0006

November 21, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6F141133U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER:
910.00	34.31 Sent to Provider	4.52 The provider can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 2,338.37 for this person this benefit period.

Medicare paid 308.58. **We have paid 34.31.** **You owe your provider 4.52.**

MEDICARE COORDINATED CLAIM

Provider	LEVINE CANCER INST	LEVINE CANCER INST	LEVINE CANCER INST	
Network Participation	NO	NO	NO	
Dates of Service	10/08/16	10/09/16	10/11/16	
Type of Service	INPATIENT VISIT(S)	INPATIENT VISIT(S)	INPATIENT VISIT(S)	
Charge	492.00	209.00	209.00	
Medicare Deductible	0.00	0.00	0.00	
Medicare Coinsurance	38.83	19.94	19.94	
Total Benefit Allowed	186.53	0.00	0.00	
Medicare Approved AMT	191.05	98.12	98.12	
Medicare Paid	152.22	78.18	78.18	
We Paid	34.31	0.00	0.00	

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0020857

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

713522 009067
0001 of 0006

November 21, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6F192348U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
1,096.60	95.27	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 187.00 toward your out-of-pocket maximum. You have satisfied 212.61 of the 2,540.00 out-of-pocket maximum for this benefit period. We paid a total of 2,469.44 for this person this benefit period.

Medicare paid 373.44. **We have paid 95.27.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	MECKLENBURG EMERGE	MECKLENBURG EMERGE		
Network Participation	NO	NO		
Dates of Service	05/23/16	05/23/16		
Type of Service	AMBULANCE	AMBULANCE		
Charge	895.00	201.60		
Medicare Deductible	0.00	0.00		
Medicare Coinsurance	81.37	13.90		
Total Benefit Allowed	640.00	108.00		
Medicare Approved AMT	400.32	68.39		
Medicare Paid	318.95	54.49		
We Paid	81.37	13.90		

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0012368

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

STATE HEALTH PLAN

This is not a bill. Any amounts you may owe your provider should not be sent directly to us.

CHRISTINE W BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

729617 002908
0001 of 0004

SUMMARY EXPLANATION OF BENEFITS

Claims Processed from 11/18/16 to 12/08/16 December 9, 201

This summary information is for claims processed for patients covered under your Member ID ZCS37611600. You will also find claim(s) details. We produce this report every three weeks. If you have questions about your claims, please visit our website at www.SouthCarolinaBlues.com or call Customer Service at 800-868-2520 or locally at 803-736-1576 Monday - Friday 8:00 a.m. - 6:00 p.m.

This document outlines your share of the charges for services. You should use this to determine how much you need to pay. If there is a discrepancy, use this summary to discuss the charges with your provider.

Name: ALBERT BRADLEY **Patient Relationship to Policyholder: SPOUSE**

Amount We Paid Your Provider(s):	
LEVINE CANCER INSTITU	34.31
PHYSICIANS ELDERCARE	12.04
MID ATLANTIC EMERGENC	35.80
MECKLENBURG EMERGENCY	95.27
Medicare Paid:	949.69
Amount Your Provider(s) May Bill You:	
LEVINE CANCER INSTITU	4.52
PHYSICIANS ELDERCARE	20.44
MID ATLANTIC EMERGENC	0.00
MECKLENBURG EMERGENCY	0.00

EXPRESS SCRIPTS®
Medicare (PDP)
Express Scripts Medicare
P.O. Box 690
Franklin Lakes, NJ 07417-0690

Financial Adjustment Detail Statement

0-E-502990-001-03-05
ALBERT BRADLEY

Member Number: [redacted]60001
Carrier#/CMS Contract#: 7258 S5660
Reference Number: PRN0012460774
Date/Check Number: 11/07/2016 801460278

Date of Service	Rx Number	Ingredient Cost	Dsp Fee	Sales Tax	Other Payer Amt Paid	Patient Pay Amount	Net Due	Expl Codes
GROUP# SCPEBAMEDDSTD								
11/02/16	000020792956	733.25	5.50	0.00	0.00	36.94	701.81	

Total Adjustments	8.29
Payments Received	0.00
Previous Account Balance	5.01-
Refund Issued	3.28
Statement Total	**0.00**

Please be advised that there is a credit balance on your account. See enclosed letter and refund check for a detailed explanation.

AA - Your original claim was reversed and adjusted due to multiple retroactive changes

Express Scripts Medicare (PDP) is a prescription drug plan with a Medicare contract.
Enrollment in Express Scripts Medicare depends on contract renewal.

LT434021

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ICVFR5 (REV.7 08|16)

0020859

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

7135522 009067
0003 of 0006

November 21, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6F151452U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
676.00	35.80	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 2,374.17 for this person this benefit period.

Medicare paid 140.35. **We have paid 35.80.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	MID ATLANTIC EMERG	MID ATLANTIC EMERG		
Network Participation	NO	NO		
Dates of Service	10/17/16	10/17/16		
Type of Service	ER VISIT(S)	OUTPT X-RAY/LAB		
Charge	642.00	34.00		
Medicare Deductible	0.00	0.00		
Medicare Coinsurance	34.13	1.67		
Total Benefit Allowed	195.90	16.67		
Medicare Approved AMT	167.92	8.23		
Medicare Paid	133.79	6.56		
We Paid	34.13	1.67		

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

SOUTHEAST ANESTHESIOLOGY CONSULTANTS, PLLC

Patient Name	ALBERT BRADLEY	Account Number	SAC101286472

Service Date	Description	Provider	Charges	Payments	Total
03/27/15	ANESTHESIA SERVICES CAROLINAS MEDICAL CENTER	KLOPOTOWSKI	0.00	0.00	0.0
03/27/15	EGD PLACE GASTROSTOMY TUBE	KLOPOTOWSKI	1,216.00	0.00	1,216.0
05/06/15	MEDICARE PAYMENT BY MCR NC	KLOPOTOWSKI	0.00	65.20	-65.2
05/06/15	MEDICARE ADJUSTMENT BY MCR NC	KLOPOTOWSKI	0.00	1,132.84	-1,132.8
05/06/15	SEQUESTRATION ADJUSTMENT BY MCR NC	KLOPOTOWSKI	0.00	1.33	-1.3
05/06/15	MEDICARE PAYMENT BY MCR NC	KLOPOTOWSKI	0.00	0.00	0.0

DUE TO RECENT ACTIVITY ON YOUR ACCOUNT, THIS BALANCE IS YOUR RESPONSIBILITY. IF YOU NEED TO MAKE ANY CORRECTIONS TO YOU ACCOUNT PLEASE CALL OUR OFFICE. THANK YOU

For Billing Questions, Please Call: (888) 280-9533

Si usted necesita ayuda en espanol, llame por favor (888) 280-9533.

Amount Due $ 16.63

This physician group does not work for the hospital and our services are not covered in the hospital bill.

To pay your bill on-line, please visit us at www.americananesthesiology.com/payonline

Please detach the bottom portion and return with your payment. Keep the top portion for your records

Statement Date	Amount Due	Account Number	PAYMENT DU
05/07/2015	16.63	SAC101286472	05/17/201

PLEASE CHARGE MY ☐ VISA ☐ MC ☐ AMEX ☐ DISCOVER ☐ DI

Card Number | Amount

Signature | EXP DATE | CVV

SOUTHEAST ANESTHESIOLOGY CONSULTANTS, PLLC
PO BOX 535440
ATLANTA, GA 30353-5440

An Affiliate of AMERICAN ANESTHESIOLOGY

Amount Enclosed $ ☐☐☐.☐☐

**********AUTO**3-DIGIT 280 T2 P1
ALBERT BRADLEY
864 HAWLEY AVE UNIT 222
BELMONT NC 28012-3497

Remit payment to:

SOUTHEAST ANESTHESIOLOGY CONSULTANTS, PLLC
PO BOX 535440
ATLANTA, GA 30353-5440

00000000SAC1012864723 0000000001663 050720157

SOUTHEAST ANESTHESIOLOGY CONSULTANTS, PLLC

Patient Name	ALBERT BRADLEY	Account Number	SAC101286472

Service Date	Description	Provider	Charges	Payments	Total
03/27/15	ANESTHESIA SERVICES CAROLINAS MEDICAL CENTER	KLOPOTOWSKI	0.00	0.00	0.0
03/27/15	EGD PLACE GASTROSTOMY TUBE	KLOPOTOWSKI	1,216.00	0.00	1,216.0
05/06/15	MEDICARE PAYMENT BY MCR NC	KLOPOTOWSKI	0.00	65.20	-65.2
05/06/15	MEDICARE ADJUSTMENT BY MCR NC	KLOPOTOWSKI	0.00	1,132.84	-1,132.8
05/06/15	SEQUESTRATION ADJUSTMENT BY MCR NC	KLOPOTOWSKI	0.00	1.33	-1.3
05/06/15	MEDICARE PAYMENT BY MCR NC	KLOPOTOWSKI	0.00	0.00	0.0

THIS ACCOUNT WILL BE PLACED WITH OUR COLLECTION AGENCY UNLESS FULL PAYMENT IS RECEIVED BY DUE DATE INDICATED BELOW. THANK YOU

For Billing Questions, Please Call: (888) 280-9533

Si usted necesita ayuda en espanol, llame por favor (888) 280-9533.

Amount Due $ 16.63

This physician group does not work for the hospital and our services are not covered in the hospital bill.

To pay your bill on-line, please visit us at www.americananesthesiology.com/payonline

Please detach the bottom portion and return with your payment. Keep the top portion for your records

Statement Date	Amount Due	Account Number	PAYMENT DU
07/07/2015	16.63	SAC101286472	07/17/201

PLEASE CHARGE MY ☐ VISA ☐ MC ☐ AMEX ☐ DI

Card Number | Amount

Signature | EXP DATE | CVV

SOUTHEAST ANESTHESIOLOGY CONSULTANTS, PLLC
PO BOX 535440
ATLANTA, GA 30353-5440

An Affiliate of AMERICAN ANESTHESIOLOGY

Amount Enclosed $ ____.__

**********AUTO**3-DIGIT 280 T1 P1
ALBERT BRADLEY
864 HAWLEY AVE UNIT 222
BELMONT NC 28012-3497

Remit payment to:

SOUTHEAST ANESTHESIOLOGY CONSULTANTS, PLLC
PO BOX 535440
ATLANTA, GA 30353-5440

00000000SAC1012864723 0000000001663 070720155

DI0107

98.0 T
137/82
87(P)

CaroMont Regional Medical Center

2525 Court Drive
Gastonia, NC 28053
704-834-2266

Discharge Instructions for: **Bradley, Albert**

Arrival Date: 02 96 **Saturday, August 15, 2015**

Thank you for choosing **CaroMont Regional Medical Center** for your care today. The examination and treatment you have received in the Emergency Department today have been rendered on an emergency basis only and are not intended to be a substitute for an effort to provide complete medical care. You should contact your follow-up physician by calling for an appointment as soon as possible. You should see the follow up physician in two to four days. Please see the follow up physician if not improving and return to the Emergency Center if feeling worse. It is important that you let him or her check you and for you to report any new or remaining problems since it is impossible to recognize and treat all element of an injury or illness in a single emergency center visit.

Care provided by: ,
Hammes, Stephanie, PA-C

Clinical Impression: Contusion - arm

DISCHARGE INSTRUCTIONS	FORMS
Bruise Contusion Hematoma	Your Medicine Play it Safe
FOLLOW UP INSTRUCTIONS	**PRESCRIPTIONS**
Emergency Department When: As needed; Reason: Pain, If symptoms return, Change in condition, Worsening of conditions, As needed **Private Physician** When: 7 - 10 days; Reason: As needed, Return if not better	None
SPECIAL NOTES	
None	

Albert Bradley
MRN # 944346

Choice Medical, Inc. is an independent company that supplies medical equipment to this facility; you have a choice to receive the equipment at this facility (provided by Choice Medical, Inc.) or to receive a written prescription for your items that may be taken to a supplier of your choosing.

I authorize my physician/healthcare facility to release to Choice Medical, Inc. and for Choice

CAROMONT MEDICAL GROUP INC

Guarantor Name	Albert Bradley
Patient Account #	1919366A3122
Statement Date	02/18/2017

Your Account Status

BCBS-SC notified us that you were not covered under their plan. This balance is your responsibility. If this is incorrect, contact your insurer.

Charges	$222.00
Previous Payments & Credits	-$207.89
Payment Due Upon Receipt	**$14.11**

PROFESSIONAL FEES

Charges for services rendered by a provider, such as an examination or explanation of results.

Patient Name	Provider Name	Service Location
Albert Bradley	**Andrew Timothy, DO**	CIP_IP

Date	Description	Charge Status	Charges	Payments/ Credits	Patient Balance
03/22/2016	SBSQ HOSPITAL CA		$222.00		
04/14/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/14/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
02/18/2017	Insurance Company: BCBS-SC	Not Elig		$0.00	
	Patient Balance - Misc.				$14.11
	TOTAL PATIENT BALANCE				**$14.11**

121091--7284

Any dispute regarding this statement or any amounts due must be submitted in writing to:
P.O. Box 19000, Belfast, ME 04915-4085
Submitting payment in an amount less than the total on this statement shall not constitute an offer to settle any dispute, regardless of any accompanying communication.

PROFESSIONAL RECOVERY CONSULTANTS

2700 Meridian Parkway Suite 200
Durham, NC 27713-2204

1-800-991-5265

11/02/16

Creditor: CAROMONT MEDICAL GROUP

Total Balance: $63.26

Account #(s): 26778232

Refer #(s): 1919366

Balance(s): $63.26

NOTICE OF REFERRAL

Dear Albert Bradley,

This notice is to inform you the above referenced account(s) has been listed with this office for collection. Please be advised, if this account is not resolved after thirty days of your receipt of this letter it may be listed with one or more credit bureaus. If you would like to speak to an account representative please call 1-800-991-5265.

You can access your account online at www.prconlinepayment.com. You can also access your account by phone by calling 1-800-840-1036. You will need the account number found at the top of this notice.

Unless you notify this office within 30 days after receiving this notice that you dispute the validity of this debt or any portion thereof, this office will assume this debt is valid. If you notify this office in writing within 30 days from receiving this notice that you dispute validity of this debt this office will obtain verification of the debt or obtain a copy of a judgment and mail you a copy of such judgment or verification. If you request of this office in writing within 30 days after receiving this notice this office will provide you with the name and address of the original creditor, if different from the current creditor. This is an attempt to collect a debt and any information obtained will be used for that purpose. This is a communication from a debt collector.

Office Hours are Mondays through Thursdays 8:00 a.m. to 7:00 p.m. and Fridays 8:00 a.m. to 4:30 p.m., Eastern Time

N.C. Dept. of Insurance Permit #710

Please detach and return this portion with your payment

594/0000594/0004

PO Box 1982
Southgate, MI 48195-0982

PLEASE CHARGE MY		
CARD NUMBER		
PAYMENT AMOUNT	SEC	EXP
SIGNATURE		
ACCOUNT # 26778232	NAME ON THE CARD	**TOTAL DUE $63.26**

Albert Bradley
864 Hawley Ave Unit 222
Belmont, NC 28012-3497

PROFESSIONAL RECOVERY CONSULTANTS, INC.
PO Box 51187
Durham, NC 27717-1187

PRC/053 210 98296614

0021427

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

664286 009387

September 26, 2016

STATE HEALTH PLAN SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6E560361U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER:
155.00	11.80 Sent to Provider	5.98 The provider can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,792.73 for this person this benefit period.

Medicare paid 69.68. **We have paid 11.80.** **You owe your provider 5.98.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	08/19/16			
Type of Service	NURSING HOME VISIT			
Charge	155.00			
Medicare Deductible	0.00			
Medicare Coinsurance	17.78			
Total Benefit Allowed	81.48			
Medicare Approved AMT	87.46			
Medicare Paid	69.68			
We Paid	11.80			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

Final Notice!

PATIENT NAME: Albert Bradley
ACCOUNT NO.: GPS170358

NOTICE DATE: 11/02/16
BALANCE DUE: $33.45

Our records indicate that your account is seriously overdue.

We are extending this final opportunity to settle your financial obligation, or set up payment arrangements. Your account will be sent to collections if we do not receive immediate payment. As a reminder, this may adversely affect your credit if the account balance remains unpaid.

We urge you to conclude this matter by paying the account in full within five (5) business days. Unless you notify our Patient Financial Services Department within five (5) business days after receipt of this notice, the debt referred to in this notice shall be assumed to be valid to transfer to collections.

If there is anything we can do to assist you in the payment of your account balance, contact us at the phone number listed below. The best time to reach our representatives is Monday thru Thursday 8am-8pm EST and Friday 8am-6pm EST.

For your convenience, please visit our website at www.paymentsmd.com. We offer the option of paying using Visa, MasterCard, Discover and electronic check. If you wish to set up recurring payments we also have this option available.

Your immediate attention to this matter is needed. If payment has been forwarded or arrangements made, please disregard this notice with our sincere thanks. Please be advised 25% of your account balance must be made upon receipt of your statement.

Patient Financial Services
888-291-1568

Your payment options:

For credit card and electronic check payments visit: www.PaymentsMD.com

Toll Free: 888-291-1568 Para preguntas, por favor llame al 866-822-3370

Have questions or inquiries? Please email us at eresolution@paymentsmd.com

3691-APOLLOSTM-3288149-2283403310-P; 15726553-1-24; 37854595-1; 1

Detach and return bottom portion with payment. Please make checks payable to Gastonia Physicians Services, PLLC and write your account number on the check.

PMD | PAYMENTS MD
Medical billing. Technology-driven.

Return Mail Processing Center
PO Box 3475
Toledo, OH 43607-0475
Do Not Send Payments or Correspondence To This Address

RETURN SERVICE REQUESTED

For online payments visit www.PaymentsMD.com

CHECK #	CHECK CARD USING FOR PAYMENT		
CARD NUMBER	MASTERCARD ☐	DISCOVER ☐	VISA ☐
AUTHORIZED SIGNATURE			
WRITTEN NAME		EXPIRATION DATE	/

3 DIGIT VIN	PATIENT NAME	BILLING ZIP	DUE DATE
	Albert Bradley		On Receipt

ACCOUNT #	STATEMENT DATE	AMOUNT PAID	AMOUNT DUE
GPS170358	11/02/16		$33.45

664866A (PG2)

A NSF fee of $35.00 for returned checks will be assessed to your account. Make check payable to Gastonia Physicians Services, PLLC.

004123
0101

ALBERT BRADLEY
864 HAWLEY AVE UNIT 222
BELMONT, NC 28012-3497

GPS-S1

GASTONIA PHYSICIANS SERVICES, PLLC
Mailstop: 45685597
PO BOX 660827
DALLAS, TX 75266-0827

456855972000000000000000000000GPS17035811022016000000033454

0023721

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

572834 010329

June 13, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D541287U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER:
231.67	11.41 Sent to Provider	27.21 The provider can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,519.63 for this person this benefit period.

Medicare paid 151.36. **We have paid 11.41.** **You owe your provider 27.21.**

MEDICARE COORDINATED CLAIM

Provider	QUALITY MOBILE XRA	QUALITY MOBILE XRA	QUALITY MOBILE XRA	
Network Participation	NO	NO	NO	
Dates of Service	05/11/16	05/11/16	05/11/16	
Type of Service	OUTPT RADIOLOGY	OUTPT RADIOLOGY	OUTPT RADIOLOGY	
Charge	40.11	28.29	163.27	
Medicare Deductible	0.00	0.00	0.00	
Medicare Coinsurance	6.69	4.72	27.21	
Total Benefit Allowed	40.11	28.29	78.78	
Medicare Approved AMT	32.90	23.20	133.88	
Medicare Paid	26.21	18.48	106.67	
We Paid	6.69	4.72	0.00	

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0023717

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

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EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

572834 010329

June 13, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D581951U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER(S):
860.10	0.00	56.00
		The provider(s) can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 0.00 of the 2,540.00 out-of-pocket maximum for this benefit period. We paid a total of 1,486.66 for this person this benefit period.

Medicare paid 219.52. **We have paid 0.00.** **You owe your provider 56.00.**

MEDICARE COORDINATED CLAIM

Provider	MECKLENBURG EMERGE	MECKLENBURG EMERGE		
Network Participation	NO	NO		
Dates of Service	05/09/16	05/09/16		
Type of Service	AMBULANCE	AMBULANCE		
Charge	669.00	191.10		
Medicare Deductible	0.00	0.00		
Medicare Coinsurance	42.82	13.18		
Total Benefit Allowed	0.00	0.00		
Medicare Approved AMT	210.69	64.83		
Medicare Paid	167.87	51.65		
We Paid	0.00	0.00		

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019101

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina
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EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at
800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

595987 008175

July 11, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D800281U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
117.00	11.45	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,608.48 for this person this benefit period.

Medicare paid 44.89. **We have paid 11.45.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	06/01/16			
Type of Service	NURSING HOME VISIT			
Charge	117.00			
Medicare Deductible	0.00			
Medicare Coinsurance	11.45			
Total Benefit Allowed	58.97			
Medicare Approved AMT	56.34			
Medicare Paid	44.89			
We Paid	11.45			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0021306

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

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EXPLANATION OF BENEFITS

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800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

791891 009436

February 20, 2017

STATE HEALTH PLAN — SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	7C451750U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER:
323.00	11.82	0.00
	Sent to Provider	The provider can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2017. This claim contributed 39.60 toward your out-of-pocket maximum. You have satisfied 224.60 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 11.82 for this person this benefit period.

Medicare paid 44.46. **We have paid 11.82.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	CHARLOTTE RADIOLOG			
Network Participation	NO			
Dates of Service	01/26/17			
Type of Service	INPT X-RAY/LAB			
Charge	323.00			
Medicare Deductible	0.00			
Medicare Coinsurance	11.82			
Total Benefit Allowed	59.39			
Medicare Approved AMT	56.28			
Medicare Paid	44.46			
We Paid	11.82			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019966

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

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EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

561819 008840
0001 of 0006

May 30, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D400644U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
223.00	9.60	15.84

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,486.66 for this person this benefit period.

Medicare paid 99.74. **We have paid 9.60.** **You owe your provider 15.84.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	03/28/16			
Type of Service	NURSING HOME VISIT			
Charge	223.00			
Medicare Deductible	0.00			
Medicare Coinsurance	25.44			
Total Benefit Allowed	109.34			
Medicare Approved AMT	125.18			
Medicare Paid	99.74			
We Paid	9.60			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019968

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

561819 008840
0003 of 0006

May 30, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D460254U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
223.00	9.60	15.84

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,426.45 for this person this benefit period.

Medicare paid 99.74. **We have paid 9.60.** **You owe your provider 15.84.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	04/28/16			
Type of Service	NURSING HOME VISIT			
Charge	223.00			
Medicare Deductible	0.00			
Medicare Coinsurance	25.44			
Total Benefit Allowed	109.34			
Medicare Approved AMT	125.18			
Medicare Paid	99.74			
We Paid	9.60			

*** Please refer to the remarks section.**

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www.SouthCarolinaBlues.com

CAROMONT MEDICAL GROUP INC

Guarantor Name	Albert Bradley
Patient Account #	1919366A3122
Statement Date	02/18/2017

Your Account Status

BCBS-SC notified us that you were not covered under their plan. This balance is your responsibility. If this is incorrect, contact your insurer.

Payment Due

$14.11

Due Upon Receipt

Choose a Payment Method

Pay Online
Recommended

Make a secure online payment: www.quickpayportal.com
QuickPay Code: RZ9C-WF6R-THB1-4H3

Mail Payment

Mail your payment with the coupon below.
Make checks payable to: CAROMONT MEDICAL GROUP INC.
Please include your account # on the check.

Questions? Have a question about your balance, or need to update your insurance information with us? Call 704-834-2450

Thank you for choosing CAROMONT MEDICAL GROUP INC

We appreciate your prompt payment in full.
Thank you for choosing Caromont Health. Our Customer Service Representatives are here to assist you Monday through Friday, 8:30 a.m until 5:00 p.m. Please contact our office at 704-834-2450 to resolve your balance today.

detailed summary ➤

Detach this coupon and return with your payment

CAROMONT MEDICAL GROUP INC
PO BOX 14099
BELFAST ME 04915

Pay Online At QuickPay

www.quickpayportal.com | QuickPay Code: RZ9C-WF6R-THB1-4H3

Due Date	Patient Account #
Upon Receipt	1919366A3122
Amount Due	**Amount Enclosed**
$14.11	

Make checks payable to CAROMONT MEDICAL GROUP INC. Please include your account # on the check.

ALBERT BRADLEY
864 HAWLEY AVE UNIT 222
BELMONT NC 28012-3497

CAROMONT MEDICAL GROUP INC
ATTN # 5168C
PO BOX 14000
BELFAST ME 04915-4033

1275278

☐ Check box if insurance or patient information has changed.
Please indicate change on reverse side.

Carolinas HealthCare System

Carolina Hospitalists Group
PO Box 70826
Charlotte, NC 28272-0826

Important Message

Thank you for choosing Carolinas HealthCare System for your healthcare needs. Should you have any comments or questions regarding your statement, please contact us at the address on the front of this statement or through one of the options below.

To request a detailed list of charges, please contact us.

Regarding Your Account

Please remit payment on or before the due date listed. Thank you for choosing Carolinas HealthCare System for your healthcare needs.

(*Informacion en Español al revés de esta factura)

Account Summary

Patient Name:	Albert Bradley
Statement Date:	06/02/2016
Account Number:	82-3623932
Due Date:	06/23/2016

Charge Summary

Total Charges through: 06/02/2016	$598.00
Insurance Pending:	$0.00
Total Insurance Pmts/Adjmts Since Last Stmt:	$542.61
Total Patient Pmts/Adjmts Since Last Stmt:	$0.00
You Owe:	$55.39

Insurance Information

Primary: On File: MEDICARE

Contact Us

Our Customer Service Representatives are available to provide personalized customer service and quick handling of all inquiries and questions at **704-512-4808 or 1-800-378-3947**, Monday - Thursday 8:30am to 5:30pm and Fridays 9:00am to 4:30pm.

Online bill pay is now available!

To pay your bill online
Go To: www.carolinashealthcare.org
Select Pay Your Bill, Online PIN: 3318

Pursuant to NC General Statute S25-3-506, a processing fee of $25.00 will be assessed on all returned checks.

Please detach the bottom portion and return with your payment. Keep the top portion for your records.

Carolinas Healthcare System
PO Box 2008
Morrisville, NC 27560

Billing Inquiries: 704-512-4808 or 1-800-378-3947

82-3623932	**06/02/2016**
MEDICARE	**On File**
Amount Due: $55.39	

DUE DATE: 06/23/2016

Make Checks Payable To:

Carolinas Hospitalist Group
PO Box 70826
Charlotte, NC 28272-0826

#0374?

**********AUTO**5-DIGIT 28215
ALBERT BRADLEY
ALDERGATE UMRC-SNF
3800 SHAMROCK DR
CHARLOTTE NC 28215-3220

0820000036239321000000553917

☐ PLEASE CHECK THIS BOX IF YOUR ADDRESS OR INSURANCE INFORMATION HAS CHANGED. INDICATE THE CHANGES ON THE REVERSE SIDE.

☐ PLEASE CHECK THIS BOX IF PAYING BY CREDIT CARD. INDICATE THE INFORMATION ON THE REVERSE SIDE.

STATEMENT 0035

CharlotteRadiology

PO BOX 600109, RALEIGH NC 27675-6109

PAYMENT DUE UPON RECEIPT

STATEMENT DATE	PAY THIS AMOUNT
06/20/16	$12.04
ACCOUNT #	SHOW AMOUNT PAID HERE
801903	$

Office Hours: 8:00am - 5:00pm
704/362-7020 800/948-4117

0100000080190340000120406201 64

01986

ALBERT BRADLEY
3800 Shamrock Dr
Aldergate Umrc-Snf
Charlotte NC 28215-3220

MAKE CHECK PAYABLE AND REMIT TO:

Charlotte Radiology, PA
P.O. Box 600109
Raleigh NC 27675-6109

DETACH TOP PORTION AND RETURN WITH PAYMENT IN ENCLOSED ENVELOPE

DATE	DESCRIPTION	CHARGES	PAYMENTS	ADJUSTMENTS	PATIENT BALANCE
05/02/16	CHEST ONE VIEW	$55.00			$55.00
	Location: CAROLINAS MEDICAL CENTER				
05/02/16	CT ABDOMEN AND PELVIS WITH CONTRAST	$498.00			$498.00
	Location: CAROLINAS MEDICAL CENTER				
04/20/16	CHEST ONE VIEW	$55.00			$55.00
	Location: CAROLINAS MEDICAL CENTER				
04/20/16	CHEST ONE VIEW	$55.00			$55.00
	Location: CAROLINAS MEDICAL CENTER				
04/20/16	CT ANGIOGRAPHY-CHEST W & W/O CONT	$479.00			$479.00
	Location: CAROLINAS MEDICAL CENTER				
05/24/16	CT SCAN-HEAD-WITHOUT CONTRAST	$233.00			$8.49
	Location: CAROLINAS MEDICAL CENTER				
06/18/16	381 - CONTRACTUAL ADJUSTMENT		$33.29	$191.22	
05/24/16	SHOULDER XRAY-2 OR MORE VIEWS	$49.00			$1.88
	Location: CAROLINAS MEDICAL CENTER				
06/18/16	381 - CONTRACTUAL ADJUSTMENT		$7.35	$39.77	
05/24/16	HUMERUS XRAY	$48.00			$1.67
	Location: CAROLINAS MEDICAL CENTER				
06/18/16	381 - CONTRACTUAL ADJUSTMENT		$6.53	$39.80	

Account Information

Statement Date:	06/20/2016
Account:	801903
Patient:	ALBERT BRADLEY
Total Balance:	$1,154.04
Insurance Pending:	$1,142.00
Patient Balance:	**$12.04**

DUE NOW

$12.04

This amount is your responsibility

Pay Online At:

www.charlotteradiology.com
Code ID: CRPA0001 Access#: 5416863-1-1445
Or Call 704/362-7020 or 800/948-4117

SCAN FOR MOBILE PAYMENT

Gaston EMS System

Post Office Box 1475

Gastonia, NC 28053

(704) 866-3273

Date Billed: 11/06/2015

BRADLEY, ALBERT C
864 HAWLEY AVE
APT 222
BELMONT, NC 28012

PAT-316824 Trip Number: 00015044917 Service Date: 08/07/2015

BLS NON EMERGENCY	450.00	1	450.00
RESCUE MILEAGE LOADED PATIENT	12.00	21.3	255.60

ZURICH REQUESTED A REFUND ON
THIS CLAIM. BILL IS YOUR
RESPONSIBILITY.

Total Charges:	705.60
Credits:	0.00
Amount Due:	705.60

Gaston EMS System

Post Office Box 1475

Gastonia, NC 28053

(704) 866-3273

Date Billed: 11/06/2015

BRADLEY, ALBERT C
864 HAWLEY AVE
APT 222
BELMONT, NC 28012

PAT-316824 Trip Number: 00015046731 Service Date: 08/15/2015

BLS NON EMERGENCY	450.00	1	450.00
RESCUE MILEAGE LOADED PATIENT	12.00	4.2	50.40

ZURICH REQUESTED A REFUND ON THIS CLAIM. BILL IS YOUR RESPONSIBILITY.

Total Charges:	500.40
Credits:	0.00
Amount Due:	500.40

Gaston EMS System

Post Office Box 1475

Gastonia, NC 28053

(704) 866-3273

Date Billed: 11/13/2015

BRADLEY, ALBERT
864 HAWLEY AVE
APT 222
BELMONT, NC 28012

PAT-316824 Trip Number: 00015044936 Service Date: 08/07/2015

BLS NON EMERGENCY	450.00	1	450.00
RESCUE MILEAGE LOADED PATIENT	12.00	21.8	261.60

ZURICH DENIED YOUR CLAIM.
PLEASE CONTACT OUR OFFICE
WITH YOUR PAYMENT.
THANK YOU

Total Charges:	711.60
Credits:	0.00
Amount Due:	711.60

Gaston EMS System

Post Office Box 1475

Gastonia, NC 28053

(704) 866-3273

Date Billed: 11/13/2015

BRADLEY, ALBERT C
864 HAWLEY AVE
APT 222
BELMONT, NC 28012

PAT-316824 Trip Number: 00015048794 Service Date: 08/26/2015

BLS NON EMERGENCY	450.00	1	450.00
RESCUE MILEAGE LOADED PATIENT	12.00	7.4	88.80

ZURICH DENIED THIS CLAIM. BILL IS YOUR RESPONSIBILITY.

Total Charges:	538.80
Credits:	0.00
Amount Due:	538.80

CAROMONT MEDICAL GROUP INC
PO BOX 14099 BELFAST ME 04915

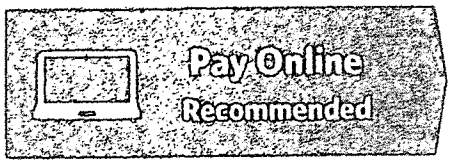
Guarantor Name	Albert Bradley
Patient Account #	1919366A3122
Statement Date	06/10/2016

Your Account Status

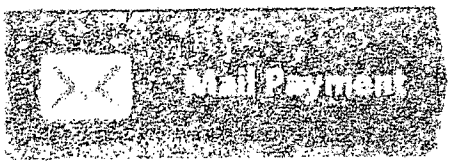
BCBS-SC notified us that you were not covered for the services rendered. Your balance is past due. If this is incorrect, contact your insurer.

Payment Due
$159.32
Due Upon Receipt

Choose a Payment Method



Make a secure online payment: www.quickpayportal.com
QuickPay Code: 5D43-BX7Y-Z9T1-4H3



Mail your payment with the coupon below.
Make checks payable to: CAROMONT MEDICAL GROUP INC.
Please include your account # on the check.

Questions? Have a question about your balance, or need to update your insurance information with us? Call 704-834-2450

Thank you for choosing CAROMONT MEDICAL GROUP INC

You have a past due balance. Please pay immediately. Thank you for choosing Caromont Health. Our Customer Service Representatives are here to assist you Monday through Friday, 8:30 a.m until 5:00 p.m. Please contact our office at 704-834-2450 to resolve your balance today.

Enjoy the ease and security of paperless statements. Visit the Patient Portal today to sign up.

detailed summary ➤

121091--5146

Detach this coupon and return with your payment.

CAROMONT MEDICAL GROUP INC
PO BOX 14099
BELFAST ME 04915

Pay Online At QuickPay

www.quickpayportal.com | QuickPay Code: 5D43-BX7Y-Z9T1-4H3

Due Date	Patient Account #
Upon Receipt	1919366A3122
Amount Due	**Amount Enclosed**
$159.32	

Make checks payable to CAROMONT MEDICAL GROUP INC. Please include your account # on the check.

ALBERT BRADLEY
864 HAWLEY AVE UNIT 222
BELMONT NC 28012-3497

CAROMONT MEDICAL GROUP INC
ATTN # 5168C
PO BOX 14000
BELFAST ME 04915-4033

☐ Check box if insurance or patient information has changed.
Please indicate change on reverse side.

PROFESSIONAL RECOVERY CONSULTANTS

2700 Meridian Parkway Suite 200
Durham, NC 27713-2204

1-800-991-5265

11/02/16

Creditor: CAROMONT MEDICAL GROUP

Total Balance: $63.26

Account #(s): 26778232
Refer #(s): 1919366
Balance(s): $63.26

NOTICE OF REFERRAL

Dear Albert Bradley,

This notice is to inform you the above referenced account(s) has been listed with this office for collection. Please be advised, if this account is not resolved after thirty days of your receipt of this letter it may be listed with one or more credit bureaus. If you would like to speak to an account representative please call 1-800-991-5265.

You can access your account online at www.prconlinepayment.com. You can also access your account by phone by calling 1-800-840-1036. You will need the account number found at the top of this notice.

Unless you notify this office within 30 days after receiving this notice that you dispute the validity of this debt or any portion thereof, this office will assume this debt is valid. If you notify this office in writing within 30 days from receiving this notice that you dispute validity of this debt this office will obtain verification of the debt or obtain a copy of a judgment and mail you a copy of such judgment or verification. If you request of this office in writing within 30 days after receiving this notice this office will provide you with the name and address of the original creditor, if different from the current creditor. This is an attempt to collect a debt and any information obtained will be used for that purpose. This is a communication from a debt collector.

Office Hours are Mondays through Thursdays 8:00 a.m. to 7:00 p.m. and Fridays 8:00 a.m. to 4:30 p.m., Eastern Time

N.C. Dept. of Insurance Permit #710

Please detach and return this portion with your payment

594/0000594/0004

PO Box 1982
Southgate, MI 48195-0982

PLEASE CHARGE MY VISA MasterCard		
CARD NUMBER		
PAYMENT AMOUNT	SEC	EXP
SIGNATURE		
ACCOUNT # 26778232	NAME ON THE CARD	**TOTAL DUE $63.26**

Albert Bradley
864 Hawley Ave Unit 222
Belmont, NC 28012-3497

PROFESSIONAL RECOVERY CONSULTANTS, INC.
PO Box 51187
Durham, NC 27717-1187

PRC/053 210 98296614

CAROMONT MEDICAL GROUP INC

Guarantor Name	Albert Bradley
Patient Account #	1919366A3122
Statement Date	02/18/2017

Your Account Status

BCBS-SC notified us that you were not covered under their plan. This balance is your responsibility. If this is incorrect, contact your insurer.

Charges	$222.00
Previous Payments & Credits	-$207.89
Payment Due Upon Receipt	**$14.11**

PROFESSIONAL FEES

Charges for services rendered by a provider, such as an examination or explanation of results

Patient Name	Provider Name	Service Location
Albert Bradley	**Andrew Timothy, DO**	CIP_IP

Date	Description	Charge Status	Charges	Payments/ Credits	Patient Balance
03/22/2016	SBSQ HOSPITAL CA		$222.00		
04/14/2016	Insurance Payment: Medicare B-NC	Processed		-$55.32	
04/14/2016	Insurance Adjustment: Medicare B-NC	Processed		-$152.57	
02/18/2017	Insurance Company: BCBS-SC	Not Elig		$0.00	
	Patient Balance - Misc.				$14.11
	TOTAL PATIENT BALANCE				**$14.1**

Any dispute regarding this statement or any amounts due must be submitted in writing to:
P.O. Box 19000, Belfast, ME 04915-4085
Submitting payment in an amount less than the total on this statement shall not constitute an offer to settle any dispute, regardless of any accompanying communication.

0019968

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

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EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

561819 008840
0003 of 0006

May 30, 2016

STATE HEALTH PLAN — SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D460254U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
223.00	9.60	15.84

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,426.45 for this person this benefit period.

Medicare paid 99.74. **We have paid 9.60.** **You owe your provider 15.84.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	04/28/16			
Type of Service	NURSING HOME VISIT			
Charge	223.00			
Medicare Deductible	0.00			
Medicare Coinsurance	25.44			
Total Benefit Allowed	109.34			
Medicare Approved AMT	125.18			
Medicare Paid	99.74			
We Paid	9.60			

*** Please refer to the remarks section.**

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THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019966

State Health Plan
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Columbia, SC 29260

South Carolina

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or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

561819 008840
0001 of 0006

May 30, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D400644U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
223.00	9.60	15.84

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,486.66 for this person this benefit period.

Medicare paid 99.74. **We have paid 9.60.** **You owe your provider 15.84.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	03/28/16			
Type of Service	NURSING HOME VISIT			
Charge	223.00			
Medicare Deductible	0.00			
Medicare Coinsurance	25.44			
Total Benefit Allowed	109.34			
Medicare Approved AMT	125.18			
Medicare Paid	99.74			
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Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

561819 008840
0003 OF 0006

May 30, 2016

STATE HEALTH PLAN — SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D460254U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
223.00	9.60	15.84

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MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	04/28/16			
Type of Service	NURSING HOME VISIT			
Charge	223.00			
Medicare Deductible	0.00			
Medicare Coinsurance	25.44			
Total Benefit Allowed	109.34			
Medicare Approved AMT	125.18			
Medicare Paid	99.74			
We Paid	9.60			

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THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0021306

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

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EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

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or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

791891 009436
0001 of 0006

February 20, 2017

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	7C451750U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
323.00	11.82	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2017. This claim contributed 39.60 toward your out-of-pocket maximum. You have satisfied 224.60 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 11.82 for this person this benefit period.

Medicare paid 44.46. **We have paid 11.82.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	CHARLOTTE RADIOLOG			
Network Participation	NO			
Dates of Service	01/26/17			
Type of Service	INPT X-RAY/LAB			
Charge	323.00			
Medicare Deductible	0.00			
Medicare Coinsurance	11.82			
Total Benefit Allowed	59.39			
Medicare Approved AMT	56.28			
Medicare Paid	44.46			
We Paid	11.82			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019101

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

595987 008175
0001 of 0002

July 11, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D800281U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
117.00	11.45	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,608.48 for this person this benefit period.

Medicare paid 44.89. **We have paid 11.45.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	06/01/16			
Type of Service	NURSING HOME VISIT			
Charge	117.00			
Medicare Deductible	0.00			
Medicare Coinsurance	11.45			
Total Benefit Allowed	58.97			
Medicare Approved AMT	56.34			
Medicare Paid	44.89			
We Paid	11.45			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0023721

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

572834 010329
0005 of 0006

June 13, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D541287U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER:
231.67	11.41 Sent to Provider	27.21 The provider can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,519.63 for this person this benefit period.

Medicare paid 151.36. **We have paid 11.41.** **You owe your provider 27.21.**

MEDICARE COORDINATED CLAIM

Provider	QUALITY MOBILE XRA	QUALITY MOBILE XRA	QUALITY MOBILE XRA	
Network Participation	NO	NO	NO	
Dates of Service	05/11/16	05/11/16	05/11/16	
Type of Service	OUTPT RADIOLOGY	OUTPT RADIOLOGY	OUTPT RADIOLOGY	
Charge	40.11	28.29	163.27	
Medicare Deductible	0.00	0.00	0.00	
Medicare Coinsurance	6.69	4.72	27.21	
Total Benefit Allowed	40.11	28.29	78.78	
Medicare Approved AMT	32.90	23.20	133.88	
Medicare Paid	26.21	18.48	106.67	
We Paid	6.69	4.72	0.00	

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0023717

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

572834 010329
0001 of 0006

June 13, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D581951U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER(S):
860.10	0.00	56.00

The provider(s) can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 0.00 of the 2,540.00 out-of-pocket maximum for this benefit period. We paid a total of 1,486.66 for this person this benefit period.

Medicare paid 219.52. **We have paid 0.00.** **You owe your provider 56.00.**

MEDICARE COORDINATED CLAIM

Provider	MECKLENBURG EMERGE	MECKLENBURG EMERGE		
Network Participation	NO	NO		
Dates of Service	05/09/16	05/09/16		
Type of Service	AMBULANCE	AMBULANCE		
Charge	669.00	191.10		
Medicare Deductible	0.00	0.00		
Medicare Coinsurance	42.82	13.18		
Total Benefit Allowed	0.00	0.00		
Medicare Approved AMT	210.69	64.83		
Medicare Paid	167.87	51.65		
We Paid	0.00	0.00		

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019966

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at
800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

5618I9 008840
0001 of 0006

May 30, 2016

STATE HEALTH PLAN — SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D400644U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
223.00	9.60	15.84

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,486.66 for this person this benefit period.

Medicare paid 99.74. **We have paid 9.60.** **You owe your provider 15.84.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	03/28/16			
Type of Service	NURSING HOME VISIT			
Charge	223.00			
Medicare Deductible	0.00			
Medicare Coinsurance	25.44			
Total Benefit Allowed	109.34			
Medicare Approved AMT	125.18			
Medicare Paid	99.74			
We Paid	9.60			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0021306

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

791891 009436
0001 of 0006

February 20, 2017

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	7C451750U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
323.00	11.82	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2017. This claim contributed 39.60 toward your out-of-pocket maximum. You have satisfied 224.60 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 11.82 for this person this benefit period.

Medicare paid 44.46. **We have paid 11.82.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	CHARLOTTE RADIOLOG			
Network Participation	NO			
Dates of Service	01/26/17			
Type of Service	INPT X-RAY/LAB			
Charge	323.00			
Medicare Deductible	0.00			
Medicare Coinsurance	11.82			
Total Benefit Allowed	59.39			
Medicare Approved AMT	56.28			
Medicare Paid	44.46			
We Paid	11.82			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019101

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

595987 008175
0001 of 0002

July 11, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D800281U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
117.00	11.45	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,608.48 for this person this benefit period.

Medicare paid 44.89. **We have paid 11.45.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	06/01/16			
Type of Service	NURSING HOME VISIT			
Charge	117.00			
Medicare Deductible	0.00			
Medicare Coinsurance	11.45			
Total Benefit Allowed	58.97			
Medicare Approved AMT	56.34			
Medicare Paid	44.89			
We Paid	11.45			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

0019101

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

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EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

595987 008175
0001 of 0002

July 11, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D800281U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID:	WHAT YOU OWE PROVIDER:
117.00	11.45 Sent to Provider	0.00 The provider can bill you for this amount if you have not yet paid.

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,608.48 for this person this benefit period.

Medicare paid 44.89. **We have paid 11.45.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	06/01/16			
Type of Service	NURSING HOME VISIT			
Charge	117.00			
Medicare Deductible	0.00			
Medicare Coinsurance	11.45			
Total Benefit Allowed	58.97			
Medicare Approved AMT	56.34			
Medicare Paid	44.89			
We Paid	11.45			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

0021598

State Health Plan
P.O. Box 100605
Columbia, SC 29260

South Carolina

BlueCross BlueShield of South Carolina is an independent licensee of the Blue Cross and Blue Shield Association

EXPLANATION OF BENEFITS

THIS IS NOT A BILL

If you have a question about your claim, please call Customer Service at

800-868-2520
or locally at 803-736-1576
Monday - Friday 8:00 a.m. - 6:00 p.m.

ALBERT BRADLEY
864 HAWLEY AVENUE
BELMONT NC 28012

579075 009379
0001 of 0002

June 20, 2016

STATE HEALTH PLAN

SUMMARY INFORMATION

Patient's Name	Relationship to Policyholder	ID No.	Claim No.
ALBERT BRADLEY	SPOUSE	ZCS37611600	6D613894U-00-00

TOTAL CHARGE FOR YOUR CLAIM:	TOTAL AMOUNT WE PAID: Sent to Provider	WHAT YOU OWE PROVIDER: The provider can bill you for this amount if you have not yet paid.
231.00	22.47	0.00

To date, you have satisfied 445.00 of the 445.00 deductible for the benefit period that began 01/01/2016. This claim contributed 0.00 toward your out-of-pocket maximum. You have satisfied 5,080.00 of the 5,080.00 out-of-pocket maximum for this benefit period. We paid a total of 1,542.10 for this person this benefit period.

Medicare paid 88.07. **We have paid 22.47.** **You owe your provider 0.00.**

MEDICARE COORDINATED CLAIM

Provider	PHYSICIANS ELDERCA			
Network Participation	NO			
Dates of Service	05/11/16			
Type of Service	NURSING HOME VISIT			
Charge	231.00			
Medicare Deductible	0.00			
Medicare Coinsurance	22.47			
Total Benefit Allowed	115.78			
Medicare Approved AMT	110.54			
Medicare Paid	88.07			
We Paid	22.47			

*** Please refer to the remarks section.**

Suspect claims fraud? Please help by calling our hotline at 800-763-0703.

THANK YOU FOR ALLOWING US TO SERVE YOU!

www.SouthCarolinaBlues.com

Important Information about Your Review and Appeal Rights

Review/Questions

If you need help understanding this notice or our decision to deny a service or coverage, you can either:

1. Submit a secure electronic question through our Website:

   - Go to StateSC.SouthCarolinaBlues.com
   - Log in to My Health Toolkit®
   - Click on "Ask Customer Service"
   - Ask your question

or

2. Call us at 800-868-2520

Appeal

You may also request an appeal of your claim. Just send a written appeal within six months of this notice to:

State Health Plan
Attn: Appeals Department
P.O. Box 100605
Columbia, SC 29260-0605

Please include the following in your request for appeal:

- The word "appeal"
- The Benefits Information Number (BIN) on your State Benefits identification card
- The claim number of the services being reconsidered which is found on your Explanation of Benefits (EOB)
- Reason(s) for your appeal
- Any supporting documentation

PLEASE NOTE: No one, including your provider, may submit an appeal on your behalf.

THIS IS NOT A CHECK. DETACH THIS STUB AND RETAIN FOR YOUR RECORDS.

OFFICE OF LEE COUNTY COUNCIL COUNTY OF LEE BISHOPVILLE, S.C. 29010

CORP.	STE.	DIV.	DEPT.	MAN NO.		PERIOD END	CHECK NO.
1	SC	1	260	372	SAL RATE 1144.1500	1/30/2011	101165

EMPLOYEE	SOC. SEC. NO.	REG. HRS.	O.T. HRS.	OTH. HRS.
BRADLEY, ALBERT	xxx-xx-0113	80.00		

STATEMENT OF EARNINGS AND DEDUCTIONS

EARNINGS			TAXES AND DEDUCTIONS					
DESCRIPTION	CURRENT	YEAR TO DATE	DESCRIPTION	CURRENT	YEAR TO DATE	DESCRIPTION	CURRENT	YEAR TO DATE
GROSS	1,669.15	3,338.30	FED TAX	77.61	155.22	FICA	64.80	129.60
NET PAY	1,116.68	2,233.36	MCARE	22.37	44.74	SC TAX	75.41	150.82
SALARY	1,144.15	2,288.30	POLRT	108.49	216.98	DLIFE	11.68	23.36
MISC	525.00	1,050.00	RETHL	13.33	26.66	111M	96.74	193.48
			611M	29.20	58.40	TOPLIF	52.56	105.12
			511M	0.28	0.56			

VACATION .00 SICK .00 PERSONAL .00 COMP .00 HOLIDAY .00

ORIGINAL DOCUMENT HAS COLORED BACKGROUND PRINTED ON CHEMICAL REACTIVE PAPER & HAS A MICROPRINTED BORDER

101165

NOTIFICATION OF DEPOSIT

STATE OF SOUTH CAROLINA
OFFICE OF LEE COUNTY COUNCIL
BISHOPVILLE, SOUTH CAROLINA 29010

ACCT 1 ********5505 $1,116.68

DATE FEBRUARY 4th, 2011

DEPOSITED AMOUNT
***$1,116.68*

PAY TO THE ORDER OF

ALBERT BRADLEY
475 LOWER LEE SCHOOL ROAD
MAYESVILLE, SC 29104

NON NEGOTIABLE

Southern Industrial Constructors, Inc.

HOURS		RATE	EARNINGS		OTHER PAY				PAY PERIOD
REGULAR	OVERTIME		REGULAR	OVERTIME	BASIS	RATE	AMOUNT	DESCRIPTION	
38.25		20.50	784.13		1.54			VacAcc	3-06 to 3-12-11

TOTAL PAY
784.13

DEDUCTIONS THIS PERIOD												TOTAL DEDUCTIONS
FWH	58.76	MEDTAX	11.17	SOC	32.35	SCSWH	39.91	401k	117.62			305.53
DD	478.60	DEN	13.90	401Ln	28.82	Unifrm	3.00					

EMPLOYEE INFORMATION	YEAR - TO - DATE TOTALS						NET PAY
ALBERT BRADLEY	GROSS	7400.58	FICA	409.49	401K	1110.08	.00
25848	FWH	511.20	SWH	366.16			

PLEASE DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS

Southern Industrial Constructors, Inc.

HOURS		RATE	EARNINGS		OTHER PAY				PAY PERIOD
REGULAR	OVERTIME		REGULAR	OVERTIME	BASIS	RATE	AMOUNT	DESCRIPTION	
38.25		20.50	784.13		1.54			VacAcc	3-06 to 3-12-11

TOTAL PAY
784.13

DEDUCTIONS THIS PERIOD												TOTAL DEDUCTIONS
FWH	58.76	MEDTAX	11.17	SOC	32.35	SCSWH	39.91	401k	117.62			305.53
DD	478.60	DEN	13.90	401Ln	28.82	Unifrm	3.00					

EMPLOYEE INFORMATION	YEAR - TO - DATE TOTALS						NET PAY
ALBERT BRADLEY	GROSS	7400.58	FICA	409.49	401K	1110.08	.00
25848	FWH	511.20	SWH	366.16			

PLEASE DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS

TAC (TM) MMORGAN 4950DLCA-750BE1-5CE1-86 3/16/2011 12:13:29 0:00

Southern Industrial Constructors, Inc.

6101 Triangle Drive
Raleigh, NC 27617
919-782-4600

RBC Centura
Raleigh, NC 27612

66-85
531

CHECK #	DATE	AMOUNT

PAY TO THE ORDER OF

ALBERT BRADLEY
475 LOWER LEE SCHOOL RD
MAYESVILLE, SC 29104

478.60

VOID

Authorized Signature

NOT NEGOTIABLE

Southern Industrial Constructors, Inc.

HOURS		RATE	EARNINGS		OTHER PAY				PAY PERIOD
REGULAR	OVERTIME		REGULAR	OVERTIME	BASIS	RATE	AMOUNT	DESCRIPTION	
28.00		20.50	574.00		1.54			VacAcc	2-06 to 2-12-11
	5.75	30.75		176.81					

TOTAL PAY
750.81

DEDUCTIONS THIS PERIOD											TOTAL DEDUCTIONS
FWH	54.51	MEDTAX	10.68	SOC	30.95	SCSWH	37.93	401k	112.62		292.41
DD	458.40	DEN	13.90	401Ln	28.82	Unifrm	3.00				

EMPLOYEE INFORMATION	YEAR - TO - DATE TOTALS						NET PAY
ALBERT BRADLEY	GROSS	4935.43	FICA	273.35	401K	740.31	.00
25848	FWH	354.53	SWH	246.46			

PLEASE DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS

Southern Industrial Constructors, Inc.

HOURS		RATE	EARNINGS		OTHER PAY				PAY PERIOD
REGULAR	OVERTIME		REGULAR	OVERTIME	BASIS	RATE	AMOUNT	DESCRIPTION	
28.00		20.50	574.00		1.54			VacAcc	2-06 to 2-12-11
	5.75	30.75		176.81					

TOTAL PAY
750.81

DEDUCTIONS THIS PERIOD											TOTAL DEDUCTIONS
FWH	54.51	MEDTAX	10.68	SOC	30.95	SCSWH	37.93	401k	112.62		292.41
DD	458.40	DEN	13.90	401Ln	28.82	Unifrm	3.00				

EMPLOYEE INFORMATION	YEAR - TO - DATE TOTALS						NET PAY
ALBERT BRADLEY	GROSS	4935.43	FICA	273.35	401K	740.31	.00
25848	FWH	354.53	SWH	246.46			

PLEASE DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS

TAC [TAI MMORGAN 495DEGA-2500E1-DCF1-DG 2/16/2011 11:02:55 0.00

Southern Industrial Constructors, Inc.
6101 Triangle Drive
Raleigh, NC 27617
919-782-4600

RBC Centura
Raleigh, NC 27612

66-85
531

CHECK #	DATE	AMOUNT

PAY TO THE ORDER OF
ALBERT BRADLEY
475 LOWER LEE SCHOOL RD
MAYESVILLE, SC 29104

458.40

VOID

Authorized Signature

NOT NEGOTIABLE

March 22, 2019

RECEIVED
MAR 22 2019
SC Court of Appeals

Christine Bradley, Pro se
475 Lower Lee School Rd.
Mayesville, SC 29104

SC Workers' Compensation Commission
1333 Main St.
Columbia, SC 29201

Re: Albert Bradley

Dear SCWCC:

I am in receipt of a letter dated and stamped March 14, 2019 that I received on March 21, 2019 from MGC (see attached). I contacted the court reporters with the contact information provided to me. I have received feedback from Creel Reporting, Inc. in which I have informed both SCWCC and the SC Court of Appeals that the document provided was incomplete and contained numerous errors. Initially, I was informed that Rob Fitzgerald was the reporter who for Creel Reporting, Inc. and the agency denied that he worked there. Deborah Thompson informed me initially that she did not have anything and that she only worked for one judge located in Beaufort, SC. I contacted Deborah Thompson again, and she informed me that she wasn't sure and that she would get back with me. Skylet Kean stated she performed reporting for one hearing for the case of Albert Bradley. However, she refused to provide me with information pertaining to her business for verification. I am also in receipt of court reporting provided by Jason Lockhart dated December 06, 2017 that is inaccurate.

I am still awaiting official documentation from all court reporters who recorded the hearings and meetings pertaining the case of Albert Bradley from the onset of his case to the present. Also, please inform me of the date and time that I may review files pertaining to the case of Albert Bradley. Thank you for your assistance.

RECEIVED
MAR 22 2019
SC WORKERS' COMPENSATION

Sincerely,

Christine Bradley

Christine Bradley, Pro se (Albert Bradley)

Cc: Jason Lockhart, Helen Hiser, Amanda Creel-Godfrey/Rob Fitzgerald, SC Court of Appeals

BASED ON CONCLUSIONS OF LAW AND FINDINGS OF FACT

Did the commissioner fail to consider important reasons for award for compensation? If so, what reasons?

Section 42-9-10(A)(B)(C)(D). Amount of compensation for total disability and what constitutes total disability. During proceedings and order, temporary compensation was applied to a permanent disability claim. Although Commissioner Beck stated that claimant Albert Bradley was declared permanently disabled, law was applied for temporary disability with attempt to settle the claim on that basis.

Section 42-15-60 (C)- Albert Bradley, now deceased claimant, who received total care and medical services in his home by family members 24/7 up until the year he was taken, were never compensated for the services they provided to the claimant even after care plan which was requested was presented to the court to show the care the claimant was receiving in the home. There was a court order which ordered monies which Albert Bradley paid out of his own monies to be reimbursed by the carrier for expenses such as medications and supplies dating back to 2013 which still have not been paid as of this date. Albert Bradley paid for his own transportation to court hearings, doctors' visits, medications, and nursing services, all which no reimbursement was received. Albert Bradley even had to purchase his own wheelchair accessible van for transportation out of his own money and was never reimbursed.

67-902-Dependency investigation. The argument here is that a thorough investigation of benefits on behalf of the claimant for all dependents through his employers should be brought before the court. Christine Bradley stated before the court in a prior hearing and made pleas to the Commission that she was due spousal benefits as she was the beneficiary listed for Albert Bradley through his employer Southern Industrial. Her request for further information and documentation pertaining to the above was not acknowledged.

Section 42-17-60. Christine Bradley, spouse of claimant, has been denied benefits. "In case of appeal from the decision of the commission on questions of law, the appeal does not operate as a supersedeas, and, after that time the employer is required to make weekly payments of compensation."

Sections 42-9-220, 42-9-230. Christine Bradley was separated from her husband on March 17, 2016, and all benefits that Albert Bradley had been receiving had stopped in December 2015.

Did the commissioner incorrectly decide the facts? If so, what facts?

Section 42-9-10(A)(B)(C)(D). Albert Bradley was declared permanently and totally disabled.

Section 42-15-80. It was ordered that Albert Bradley died of acute bronchopneumonia. No medical records including autopsy and toxicology results were submitted to support this

diagnosis. No expert witness testified at the hearing to provide expert testimony to support this diagnosis.

Albert Bradley died in the custody of Gaston County DSS/Tereasa Osborne, Stephanie Stevenson and Victoria Lichtenberger, appointed Guardian/Guardian ad Litem through the SC Workers' Compensation Commission. Victoria Lichtenberger is owner of ElderSource, located at 1018 East Blvd., Suite 3, Charlotte, NC, a geriatric care management company that is responsible for the placement of geriatric patients into adult homes and facilities.

Albert Bradley suffered immensely under the hands of Guardian Ad Litem Victoria Lichtenberger and Gaston County DSS/Tereasa Osborne, Stephanie Stevenson. From the time of their acquisition of the claimant, there was a rapid decline in his health evidenced by multiple hospital visits and admissions that ultimately led to his death.

Section 42-15-60- The claimant has medical bills that have not been paid by the carrier. These bills have not been brought before the court to show proof of payment.

67-902, 67-903, 67-904. Tuten testified that he conducted the dependency investigation in good faith when in fact he failed to make contact with all of the claimant's family members and failed to provide documentation to support his findings.

APA submission presented by Attorney Jason Lockhart used as evidence was not provided to all parties prior to hearing or after the hearing and was used as facts for the case.

67-216, 42-15-55. Victoria Lichtenberger, Guardian ad Litem, said representative for the deceased claimant, was speaking on behalf of the insurance company instead of the claimant. Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem and Gaston County DSS/Tereasa Osborne/Stephanie Stevenson when he died. Victoria Lichtenberger, Guardian Ad Litem was also documented as dependent of the claimant. Proof of guardianship was never provided during court when requested. Family members, or the claimant himself, Albert Bradley, was not present at any hearing for the appointment of Guardian Ad Litem.

Family members had very limited contact with Albert Bradley during the last year of his life, and visits with him were supervised when they were allowed.

Do you think the Commissioner applied the wrong law? If so, what law?

Section 42-9-20. Temporary compensation, partial disability law cannot be applied to a claimant who has suffered physical brain damage. Albert Bradley sustained physical brain damage on May 16, 2011, and was permanently and totally disabled on the date of his accident.

Do you feel there are any other reasons why the Commissioner's judgment was wrong? If so, what?

42-9-20. Based on the findings and the laws, as highlighted above a temporary compensation and partial disability cannot be applied when an individual has suffered a permanent disability.

Family members were denied their rights to civil proceedings for guardianship for Albert Bradley. Albert Bradley has a living spouse Christine Bradley.

67-902. There was failure to conduct a thorough dependency investigation through the claimant's employer Southern Industrial.

Albert Bradley was in the custody of Victoria Lichtenberger, Guardian Ad Litem, and owner of ElderSource and Gaston County DSS/Tereasa Osborne, Agency Attorney/Stephanie Stevenson, guardianship supervisor. No proof of guardianship was ever provided.

67-1301. Expert physician testimony was not heard on the given diagnosis, acute bronchopneumonia, as to the cause of Albert Bradley's death.

Other documentation which were ordered by the Commissioner to include the complete financial record of the claimant held by the Guardian Ad Litem Victoria Lichtenberger as well as her final accounting, full medical records from the time that Albert Bradley was taken into custody from 3/17/2016 until the date of his death including autopsy and toxicology were not submitted as ordered for review and evidence.

What action do you want the Commission to take in this case?

Apply the laws accordingly, consider the facts in this case, and apply due process to be fair in his decision-making and execution of the laws. Every individual has the right to fair and equal representation.

Statement of the Case

Albert Bradley suffered catastrophic injuries on May 16, 2011 while working for Southern Industrial Constructors, Inc. of Columbia, SC. Metal fragments from a chain link were impaled into his airway, and left him with anoxic and traumatic brain injuries. These injuries caused Albert Bradley to be totally disabled and completely reliant upon others for all his care needs. Albert Bradley was cared for in his home by his primary caregivers, Christine W. Bradley and Lavare Seltun until he was taken away from family members during a brief hospital visit at Caromont Regional Medical Center on March 17, 2016. He was taken into custody by Zurich American Insurance/Zurich North America/Jason Lockhart and Gaston County Department of Health and Human Services in Gastonia, NC.

Family members had no contact and no knowledge of Albert Bradley's whereabouts for approximately 30 days after separation. Family members received notification approximately 30 days later that Albert Bradley was in Mecklenburg County, NC at Carolinas Medical Center-Main in Charlotte, NC on life support. Family members had very limited access to Albert Bradley. They were often not allowed to touch him, even if they were permitted to visit for short periods of time. Christine Bradley was prohibited from visiting with her husband, Albert Bradley. She was not allowed to see him or touch him at all.

There is no documentation of a hearing for appointment of Guardian/Guardian Ad Litem, Victoria Lichtenberger. The defendants purport that there was a hearing, yet no family members, not even the claimant, were notified, served, or present at any such hearing. Albert Bradley suffered immensely under the hands of Guardian/Guardian Ad Litem Victoria Lichtenberger. Presiding Commissioner was notified of the status via letters regarding the status of Albert Bradley's condition and photos were provided as evidence. After several hospital admissions for

treatment of severe medical conditions under the direction of South Carolina's Workers' Compensation Commission appointed Guardian/Guardian Ad litem Victoria Lichtenberger and Gaston County DHHS, Albert Bradley subsequently died. Family members were notified after his death on February 5, 2017.

The defendants claim that Albert Bradley died of diffuse acute bronchopneumonia. Requests were made for autopsy report, toxicology report, expert witness testimony, and the medical records to support this claim. The family requested that all sealed medical records on this matter be opened for full review and these requests have yet to be granted.

APA submissions presented for testimony at hearings held by the defense have not been provided to the appellant for review and examination.

The defense argues that Victoria Lichtenberger has maintained an accounting for the claimant when in fact the claimant was also in the custody of the state of NC with the Gaston County Department of Health and Human Services (DHHS). Attorney Travis Page in Gastonia, NC was appointed to manage the accounting for the claimant for Gaston County DHHS. Requests were made all financial records pertaining to the claimant, and these records have yet to be received.

The defense maintains that there was good faith in conducting a dependency investigation, yet they still fail to show documentation of all family members notified. They also failed to provide documentation from all employers to show benefits due to beneficiaries on behalf of the claimant. Chris Tuten initially contacted Christine Bradley by phone shortly after the death of Albert Bradley and stated that he was investigating Albert Bradley's death.

The defense highlights that no medical bills were brought before the commission for consideration for payment. Albert Bradley was in the custody of Victoria Lichtenberger and

Gaston County DHHS. Albert Bradley was admitted to multiple facilities from March 17, 2016 until the time of his death.

The defense highlights that the South Carolina's Workers' Compensation Commission has full jurisdiction over the subject matter and parties pertaining to this case. However, this case was never brought before the commission for review, even with all the factors that occurred from March 17, 2016 until the time of his death.

FINDINGS OF FACT

1. Albert Bradley sustained traumatic brain injury while working for Southern Industrial Constructors, Inc. of Columbia, SC on May 16, 2011. Because of his injuries, he was declared permanently and totally disabled by the South Carolina Workers' Compensation Commission.
2. Albert Bradley received total care in his home by his wife Christine Bradley and his daughter Lavare Seltun until the time he was taken away from his family on March 17, 2016.
3. Attorney Mike Farry with Horton Law Firm in Greenville, SC was appointed as Guardian for Albert Bradley.
4. There is no evidence to support appointment of Victoria Lichtenberger as Guardian/Guardian Ad litem for the claimant Albert Bradley. No family members, not even the claimant, were notified, were served, or were present at any hearing.
5. Expert witness testimony, medical records, autopsy report, and toxicology report have been excluded for examination and review by the appellant to provide support to the claimant's cause of death.
6. Albert Bradley was taken into custody by Victoria Lichtenberger/Zurich Insurance/Jason Lockhart and Gaston County Department of Health and Human Services (DSS) after a brief hospital visit at Caromont Regional Medical Center on March 17, 2016.
7. Albert Bradley was also under the custody of Gaston County Department of Health and Human Services (DSS) in Gastonia, NC from March 17, 2016 until the time of his death February 5, 2017.

8. The family received notification after 30 days of no contact at all with the claimant that he was on life support in Mecklenburg County at Carolinas Medical Main in Charlotte, NC. Albert Bradley had numerous hospital visits with multiple hospitals for serious medical conditions from the time he was taken from March 17, 2016 until his death.
9. Chris Tuten did not provide documentation to show good faith in conducting a dependency investigation. All family members were not contacted. Documentation was not provided to the court to show beneficiaries of the claimant held through all employers.
10. APA submissions presented to the court for evidence by the defense was not provided to the appellant for review and examination prior to hearings.
11. Albert Bradley paid for transportation, medical care, and medical expenses out of his own monies.
12. Financial records have not been provided to show proof of full accounting of the claimant.
13. Victoria Lichtenberger, is a geriatric care manager and owner and operator of Eldersource Eldercare in Charlotte, NC.
14. Albert Bradley, the claimant, has a living spouse, Christine Bradley, and three living children: Derwin Bradley, Lavare Seltun, and Christy James.

PROOF OF SERVICE

THE STATE OF SOUTH CAROLINA

In The Court of Appeals
In The Supreme Court

RECEIVED
MAR 22 2019
SC Court of Appeals

Appellate Court Judges

Case No: 2018-001535

Christine Bradley (Albert Bradley), Pro se — Appellant

v.

RECEIVED
MAR 22 2019
SC WORKERS' COMPENSATION

SC Workers' Compensation Commission
Southern Industrial Constructors, Inc.,
Zurich American Insurance Company c/o
Zurich North America,
Victoria Lichtenberger, Guardian Ad Litem
Tereasa Osborne, Gaston County DHHS — Respondents

I certify that I have issued a response to SC Workers' Compensation Commission on March 22, 2019, by depositing a copy of it in the United States Mail to P.O. Box 1715, Columbia, SC 29202-1715 or via hand-delivery to 1333 Main St., Suite 500, Columbia SC. I certify that I have issued a copy to Southern Industrial Constructors on March 22, 2019, by depositing a copy of it in the United States Mail, to the attorney of record, Jason W. Lockhart at P.O. Box 12519, Columbia, SC, 29201, and via personal to delivery to his office at 1320 Main St., Columbia, SC, 29201. I certify that I have issued a copy Creel Reporting, Inc. to Amanda Creel-Godfrey/Rob Fitzgerald to 1230 Richland St., Columbia, SC 29201.

March 22, 2019

Christine Bradley (Albert Bradley), Pro se
475 Lower Lee School Rd.
Mayesville, SC 29104

Result Type:	Autopsy Final Report
Result Date:	February 06, 2017 11:13 AM EST
Result Status:	Auth (Verified)
Result Title:	Autopsy
Performed By:	WEIDA , CAROL J MD on February 06, 2017 11:13 AM EST
Verified By:	WEIDA , CAROL J MD on February 06, 2017 11:13 AM EST
Encounter info:	6404628045, CMC, IP - Inpatient Admission, 1/11/2017 - 2/6/2017
Contributor System:	COPATH

* Final Report *

Autopsy

Autopsy Final Report

Case Number: A17-16

Date Expired:	2/5/2017
Date Performed:	2/6/2017
Date Resulted:	3/7/2017
Ordering Physician:	Alpha A. Mehta

Post Mortem Hours: 13
Authorized By: DERWIN BRADLEY
Relationship to Patient: SON
Autopsy Restrictions: None

Final Anatomic Diagnoses

I. Brain
- A. Severe diffuse brain atrophy with changes consistent with remote anoxic/ischemic insult.
- B. Moderate cerebrovascular atherosclerosis.

II. Cardiovascular System
- A. Atherosclerotic coronary artery disease.
  1. Left anterior descending artery, 30-40%.
  2. Left circumflex coronary artery, 50% stenosis.
  3. Left common coronary artery, 40-50% stenosis.
- B. Mild cardiomegaly, 430 grams (expected 300-340 grams).
- C. Patchy myocyte hypertrophy.

III. Severe diffuse acute bronchopneumonia with evolving diffuse alveolar damage.

IV. Severe macrovesicular hepatic steatosis.
- A. Benign liver cysts.

V. Benign renal cyst.

edh 3/6/17

Report Electronically Signed
Carol J. Weida, M.D. 704-355-2251
Reviewed By:
William E. Ballinger
dh/3/6/2017

Procedure/Addenda
Autopsy - Provisional Anatomic Diagnosis **Date Ordered:** 2/6/2017 **Date Reported:** 2/7/2017
Anatomic Preliminary

I. Heavy consolidated lungs.

II. Atrophic brain (760 grams).
   A. Increased cerebrospinal fluid.
   B. CNS examination pending fixation.

III. Two benign-appearing liver cysts.

IV. A single benign-appearing renal cyst, right kidney.

CJW/edh 2/7/17

Report Electronically Signed
Carol J. Weida, M.D. 704-355-2251

Clinical Pathologic Correlation:
The decedent has been in a persistent vegetative state for several years and the brain showed diffuse atrophic changes.

The lungs showed acute bronchopneumonia evidence by alveolar airspaces distended by acute inflammation. There were focal hyaline membranes present as well as intraalveolar blood consistent with diffuse alveolar damage (clinical correlate adult respiratory distress syndrome).

There was severe macrovesicular steatosis involving the entire liver with preservation of portal triads.

The cause of death in this case were complications of diffuse acute bronchopneumonia.

CJW/edh 3/6/17

Clinical Summary
The decedent is a 66-year-old African-American male with a history of anoxic encephalopathy following an accident in 2011. He has been in a persistent vegetative state. He has a history of diabetes mellitus, dyslipidemia, a previous saddle embolus requiring DVT prophylaxis, pulmonary hypertension and history of acute respiratory failure status post prior tracheostomy subsequently removed. He was admitted for hypoxic respiratory failure on 1/11/2017 from a skilled nursing facility. He was treated with antibiotics. The patient had persistent respiratory failure. Pulmonary status did not improve despite antibiotic therapy. Multiple physicians were involved in his care as well as palliative care and there was concern that escalating treatments would cause more harm without a meaningful recovery. The physician's plan was to keep patient as comfortable as possible and to work with palliative care to assess with treatment of pain, air hunger and other symptoms. The patient expired on 2/5/2017.

A court order was in place giving the county of Gaston Department of Health and Human Services co-guardians for Albert Bradley. The son, Derwin Bradley, was given authorization to make all decisions regarding end of life care including do not resuscitate orders and withdraw all of the lift sustaining treatment. The autopsy permit was signed by the son. Stephanie Stephenson at the Gaston Department of Health and Human Services was contacted on 2/6/2017. A voicemail was left. The legal department at Carolinas Healthcare System was contacted and the case discussed with Kelly Randall. The legal situation was reviewed. The hierarchy of autopsy authorization was also reviewed. A decision was to proceed with the autopsy with Derwin Bradley as the next of kin providing authorization. At this time, there was no mention of a spouse in the admitting face sheet with patient demographics states that the decedent was single.

CJW/edh 2/7/17

An autopsy is performed on the body of Albert Bradley at Carolinas Medical Center, state of North Carolina on the 7th day of February, 2017. The autopsy permit is signed by the decedent's son (Derwin Bradley). There are no restrictions. Dr. Weida was notified prior to the beginning of the autopsy.

EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished adult male who weighs approximately 220 pounds, is 175 cm in height and appears compatible with the stated age of 67 years. The body identification includes left toe tag, right thumb tag. Rigor is fully fixed in all extremities and jaw. The scalp hair is black-white, measures 1.0 cm in length over the crown. The irides are brown. The cornea are slightly clouded. The sclerae and conjunctivae are unremarkable. The nose and ears are unremarkable. The lips and gums are slightly pale. The teeth are in poor repair. The deceased is not clean-shaven. The neck is without masses; however, a 1.0 x 1.0 cm, skin indentation with associated pallor is noted in the mid-clavicle aspect. The thorax is well developed. The abdomen is slightly protuberant. The penis is uncircumcised, and the testes are bilaterally descended within the scrotum. A slight focus of pallor is noted within the lower back, consistent with previous potential ulcer. The upper and lower extremities are well developed and symmetrical, without absence of digits. Identifying marks and scars consist of a 1.5 x 1.5 cm, transdermal defect, located within the mid-upper abdomen, consistent with potential medical therapy. No other evidence of emergency resuscitation or medical therapy is noted.

INTERNAL EXAMINATION

Cardiovascular System

The heart weighs 430 grams. The pericardial surfaces are smooth, glistening, and unremarkable. The pericardial sac is free of fluid or adhesions. The coronary arteries arise normally, follow the usual distribution, and are patent, free of thrombosis. The left common coronary artery and left anterior descending coronary arteries reveal approximately 10% atherosclerotic stenosis. The chambers and valves bear the usual size-position relationships and are unremarkable. The ventricular walls measure as follows: left ventricle - 1.7 cm, interventricular septum - 1.0 cm, right ventricle - 0.7 cm. The myocardium is red-brown with no lesions grossly appreciated. The valves measure as follows: tricuspid valve - 9.5 cm, pulmonary valve - 9.7 cm, bicuspid valve - 11.5 cm, aortic valve - 8.7 cm. The aorta and its major branches arise normally, follow the usual course and are widely patent, free of atherosclerosis and other abnormality.

Respiratory System

The right and left lungs weigh 810 grams and 750 grams. The upper airway is clear of debris and foreign material. A cluster of black lymph nodes are noted surrounding the hilum, measuring up to 3.0 cm (right). Adhesions are noted between lobes, most predominant within the right lobe. The pleural surfaces are red, dark purple, with a moderate amount of anthracotic pigment. The cut surfaces are severely congested, dark purple, with no focal lesions grossly appreciated.

Reticuloendothelial System

The spleen weighs 190 grams, has a smooth, intact, purple capsule, overlying purple, unremarkable, soft parenchyma, with no focal lesions identified.

Endocrine System

The thyroid gland is unremarkable, and the adrenal glands are slightly autolyzed.

Liver and Biliary System
The liver weighs 2,200 grams, revealing a smooth, variegated, pale pink to red, intact liver capsule and sectioned to reveal a variegated pale pink-red parenchyma, to include two, clear, thin, fluid filled, smooth walled cysts, one of which is located within the right lobe (4.5 x 4.2 x 3.5 cm), and within the middle lobe (0.8 x 0.8 x 0.7 cm). No other lesions are identified. The gallbladder contains approximately 200 cc of green-yellow, viscous bile, with no calculi identified.

Genitourinary System
The right and left kidneys weigh 230 grams and 220 grams, respectively. The renal capsules are smooth, thin, transparent, and strip with ease from the underlying, smooth, red-brown, cortical surface. The cortex is poorly delineated from the medullary pyramids. The calyces, pelves, and ureters are unremarkable. The right kidney reveals a 3.7 x 3.5 x 3.0 cm, clear, thin, fluid-filled unilocular cyst, within the subcortical aspect. The urinary bladder contains no urine, and the mucosa is pink, glistening, unremarkable. The prostate and seminal vesicles are unremarkable.

Alimentary Tract
The esophagus is lined by gray-white, smooth, unremarkable mucosa. The gastric mucosa is arranged in the usual rugal folds and the lumen contains approximately 300 cc of thin, green-yellow, material. The small and large bowel are unremarkable. The appendix is potentially surgically absent. The pancreas reveals a lobulated, tan appearance, and the ducts are clear.

Head
760 grams. A substantial amount of cerebral spinal fluid is expelled upon removal of the brain. The brain will be further dictated upon fixation.

Neck
Examination of the soft tissues of the neck including strap muscles, thyroid gland, and large vessels reveal no abnormalities.

Fixed Brain
The fixed brain weight is 760 grams. External examination of the brain reveals diffuse cerebral atrophy and moderate atherosclerosis involving the vessels of the Circle of Willis. The brain stem and cerebellum are also atrophic. Transverse sections through the midbrain demonstrates a dilated aqueduct of Sylvius. 1 cm coronal sections of the cerebral hemisphere reveals massive ventricular dilatation with extensive atrophy and encephalomalacia involving all of the cerebral tissues. These changes are symmetrical. 1/2 cm transverse sections of the brain stem and cerebellum again demonstrates diffuse atrophy of the cerebellar tissues and brain stem as well as white matter gliosis. The 4th ventricle is dilated. Representative sections are submitted.

SUMMARY OF SECTIONS:

A		
B	-	THYROID, ESOPHAGUS, TRACHEA
C	-	LEFT ANTERIOR DESCENDING CORONARY ARTERY, FOLLOWING LIGHT DECALCIFICATION
D	-	LEFT CIRCUMFLEX CORONARY ARTERY AND SPLEEN
E	-	LEFT COMMON CORONARY ARTERY, FOLLOWING LIGHT DECALCIFICATION
F	-	LYMPH NODE, RIGHT LUNG HILUM, REPRESENTATIVE AND RIGHT CORONARY ARTERY
G	-	LEFT VENTRICLE
H	-	INTERVENTRICULAR SEPTUM AND RIGHT LOWER LUNG LOBE
I	-	RIGHT VENTRICLE AND RIGHT MIDDLE LOBE LUNG
J	-	RIGHT UPPER LOBE LUNG, GALLBLADDER AND LEFT LOBE OF LIVER
K	-	LEFT UPPER LOBE LUNG, LIVER, MIDDLE LOBE CYST
L	-	LEFT UPPER LOBE LUNG, RIGHT LOBE OF LIVER WITH LARGER CYST
M	-	LEFT KIDNEY AND ADRENAL GLAND
N	-	RIGHT KIDNEY AND ADRENAL GLAND WITH CYST
O	-	BLADDER MUCOSA AND RECTAL MUCOSA

Autopsy Final Report
* Final Report *

P - PROSTATE, RIGHT LOBE, BASE
Q - LARGE BOWEL, RIGHT COLON AND GASTRIC MUCOSA
R - PANCREAS, HEAD AND TAIL
S-T- Not used
U-AA - BRAIN

DV/jle 2/7/17
WEB/ksj 2/24/17

Carol J. Weida, M.D. 704-355-2251
Denise I. Viapiano, PA(ASCP)
William E. Ballinger,Jr MD 704-355-2251
dvl1/2/7/2017

Completed Action List:
* Perform by WEIDA , CAROL J MD on February 06, 2017 11:13 AM EST
* VERIFY by WEIDA , CAROL J MD on February 06, 2017 11:13 AM EST
* Order by MEHTA , ALPA A MD on February 06, 2017 11:13 AM EST
* Assist by WEIDA , CAROL J MD on February 06, 2017 11:13 AM EST
* Transcribe by CONTRIBUTOR_SYSTEM , COPATH on February 06, 2017 11:13 AM EST

GASTON COUNTY DEPARTMENT OF
HEALTH & HUMAN SERVICES

330 Dr. Martin Luther King, Jr. Way • Gastonia, North Carolina 28052
Phone 704-862-7530 • www.gastonhhs.org

VISITATION AND SAFETY AGREEMENT
ALBERT BRADLEY

As the Court Appointed Guardian of the Person for Mr. Albert Bradley, it is this Department's responsibility to ensure safe and appropriate visitation occurs. This Department has been informed of a history relating to the family of attempts to remove Mr. Bradley from the care facility, interruption of care and noncompliance with medical care directives from qualified medical professionals, unfounded accusations of inappropriate care by medical professionals and actions that serve to disrupt Mr. Bradley's care and/or placement in a care facility. Due to this history, any relative wishing to visit with Mr. Bradley must agree, and his or her signature hereto does signify such agreement, with the following terms and conditions of visitation.

1. ALL VISITS WILL BE SUPERVISED BY LICENSED PROFESSIONAL STAFF AND/OR LAW ENFORCEMENT (IF WARRANTED). ALL VISITS WILL OCCUR IN A COMMON AREA OF THE LONG TERM CARE FACILITY.

2. THE SIGNATOR HERETO WILL REFRAIN FROM REMOVING CLOTHING OR OTHER ITEMS FROM MR. ALBERT BRADLEY AND/OR TAKING PHOTOGRAPHS OTHER THAN THOSE THAT ARE TYPICALLY TAKEN BY FAMILY FOR MEMORALIZATION OF SPECIAL EVENTS.

3. ALL HEALTH CARE OR OTHER CARE CONCERNS REGARDING ALBERT BRADLEY SHALL BE COMMUNICATED TO THE ASSIGNED GUARDIANSHIP SOCIAL WORKER AND/OR GUARDIANSHIP SUPERVISOR.

4. UNDER NO CIRCUMSTANCES SHALL HEALTH CARE CONCERN(S) AND/OR DISAGREEMENT(S) REGARDING ALBERT BRADLEY BE COMMUNICATED DIRECTLY AND/OR INDIRECTLY TO ANY HEALTH CARE PROVIDER WHO MAINTAINS RESPONSIBILITY IN THE CARE OF ALBERT BRADLEY.

RECEIVED
APR 11 2018
SC WORKERS' COMPENSATION

5. UNDER NO CIRCUMSTANCES SHALL ANY MEDICATION (OVER THE COUNTER OR PRESCRIPTION) BE ADMINISTERED TO ALBERT BRADLEY BY ANY FAMILY MEMBER.

6. THE SIGNATOR WILL REFRAIN FROM ANY INTERFERENCE (I.E. VERBALLY AND/OR PHYSICALLY) WITH MEDICAL CARE AND/OR SERVICES PROVIDED TO ALBERT BRADLEY BY ANY HEALTH CARE OR LONG TERM CARE PROVIDER.

7. ALBERT BRADLEY MAY NOT BE REMOVED FROM THE MEDICAL OR LONG TERM CARE FACILITY WITHOUT THE WRITTEN CONSENT OF THE GUARDIAN AND/OR HIS GUARDIANSHIP DESIGNEE.

CaroMont Health

March 30, 2016

Ms. Christine Bradley
864 Hawley Ave. Unit. 222
Belmont, NC 28012

RE: Albert Bradley

Dear Ms. Bradley:

I wanted to follow up with you in regards to your husband's stay at CaroMont.

It is my understanding one of our Case Managers, Angie Hall, has contacted you to discuss your concerns. As Angie explained to you, the Department of Social Services has been appointed the guardianship of your husband. If you have any questions or concerns, you can contact his current guardian, Amanda Green, at 704-862-7588.

If you have any additional questions or concerns, please do not hesitate to contact Andrew Blackman, our Patient Representative Assistant Manager, at 704-834-2682.

Sincerely,

Anna Lattimore

Anna Lattimore
Clinical & Patient Affairs Officer

October 18, 2016

Mr. Chris Dobbins, DHHS Director
Mr. Larry Brown, Clerk of Courts
325 MLK Jr. Way
Gastonia, NC 28054

Dear Sirs,

It is very disturbing to know that my husband, Judge Albert was sent back to the hospital on yesterday, October, 17, 2016 and your department (DSS) failed to contact me. It was brought to my attention by others that he was rushed to the hospital and information disclosed that his lungs are deteriorating, spots on his liver, bladder damaged, heart and kidneys are failing. Yet, with all this abuse and neglect Stephanie Stevenson, DSS Supervisor ordered that he be returned back to Asbury Nursing Home. The only logical answer to this is to continue the process of ending his life. I am aware that it is DSS goal to protect and not cause harm or abuse to children or adults.

At this time I continue to be denied visits or have any contact with the man I loved and cared for all our lives. This relationship has even strengthened after he was injured on his job. Our home was always filled with love and respect and certainly not abuse or neglect. As I stated on yesterday, it is not humane to kidnap an individual or perhaps your agency may want to say removed without having a legal right to do so. DSS removed/kidnapped Judge Bradley and held him hostage in January, 2012 and he was returned home to die. Although, he lived well for four years and the department launched their second attempt to complete their mission with Zurich insurance company March 17, 2016.

The family of Judge Albert Bradley: his children, grandchildren, relatives and friends are pleading for the RELEASE of their love one before it is too late. Also be aware that he is still being administered life ending medication by the request of your department attorney and Zurich insurance company. Judge Albert Bradley life is in your department hands. Let do what is right and best for Judge Bradley and everyone else that this is effecting.

Sincerely,

Christine Bradley

Christine Bradley, Wife of Judge Albert Bradley

C/c : Tereasa Osborne, Stephanie Stevenson and Michael Coone

Arthurs & Foltz, LLP

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Associate

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January 31, 2017

VIA OVERNIGHT DELIVERY

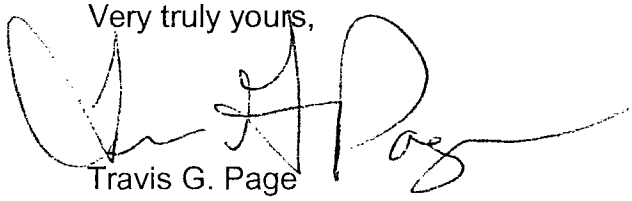
Mrs. Christine Bradley
864 Hawley Ave. #222
Belmont, NC 28012

Re: In the Matter of the Estate of Albert Bradley
12 E 323 (Gaston County)

Dear Mrs. Bradley:

In accordance with the provisions of North Carolina law, I herewith serve upon you the enclosed Petition for Discovery and Delivery of Assets in connection with the above referenced matter.

Very truly yours,



Travis G. Page

TGP/ksa

Enclosure:
Petition for Discovery and Delivery of Assets

NORTH CAROLINA

GASTON COUNTY

FILED

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GASTON CO., C.S.C.

BY NAB

IN THE GENERAL COURT OF JUSTICE
SUPERIOR COURT DIVISION
BEFORE THE CLERK
12 E 323

In the Matter of the Estate of:	)	**PETITION FOR DISCOVERY AND DELIVERY OF ASSETS**
ALBERT BRADLEY,	)	
Incompetent.	)	

The undersigned, Travis G. Page, Guardian of the Estate of Albert Bradley, hereby petitions the Court for the discovery and delivery of assets belonging to the Ward and states as follows:

1. That Travis G. Page was duly qualified as Guardian of the Estate of Albert Bradley by the Gaston County Clerk of Superior Court on or about April 13, 2016.

2. That since his qualification, he has engaged in the administration and maintenance of the Ward's estate.

3. That Christine Bradley, residing at 864 Hawley Ave. #222, Belmont, Gaston County, North Carolina, has in her possession numerous assets belonging to the Estate; including, but not limited to a wheelchair, percussion vest, and other items necessary for the Ward's care.

4. That Lavare Seltun also has in her possession monies belonging to the Estate, those being the Ward's South Carolina pension payments.

5. That demand has been made upon Christine Bradley for the release of assets to the Guardian of the Estate and the demand has been ignored and refused by Christine Bradley.

WHEREFORE, Petitioner, Travis G. Page, Guardian of the Estate of Albert Bradley, prays as follows:

1. That the Clerk of Court issue a notice to Christine Bradley and Lavare Seltun pursuant to N.C. Gen. Stat. § 28A-15-12 requiring them to appear before the Clerk to be examined regarding the possession of the property;

2. That upon such examination, the Clerk of Court enter an Order requiring Christine Bradley and Lavare Seltun to deliver any property of the Estate to Travis G. Page or be held in contempt of court;

