

# IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

UNITED STATES COURTS
SOUTHERN DISTRICT OF TEXAS
FILED

ROBERT ARTHUR HALL	§	MAR 1 8 1997
Plaintiff,	§	MAR 1 0 1001
	§	CIVIL ACTION
VS.	§	CV-H-97- Michael N. Milby, Clark of Cours
	§	
Sheriff Tommy B. Thomas, Major K.W. Berry	§	~ ~ 0 7 1
Deputy Marcorif Thomas, Dr. Mike Seale,	§	H - 97 - 874
Major M.W. Quinn, Dr. C. Trinh, Dr. D.	§	
Klein, Dr. Mark Chassay, Nurse K. Howard,	§	
Dr. M. Guice, Dr. A. Phi, Dr. Kham Luu,	§	
Dr. Pamela Wilson,	§	

## PLAINTIFF'S ORIGINAL COMPLAINT

TO SAID JUDGE OF THIS HONORABLE COURT,

Defendants

Comes now, ROBERT ARTHUR HALL, Plaintiff, by and through his Attorney of record, Thomas J. Bevans, and files his Original Complaint against Defendants, alleging violations of his Constitutional Rights under "color of law" by Sheriff Tommy B. Thomas, et al., and pursuant to Title 42, United States Code, Section 1983. Plaintiff seeks declaratory judgment, injunctive relief and monetary damages. A trial by jury is also requested. In support of his complaint the Plaintiff will show as follows:

I

## **JURISDICTION**

This is a Civil Rights Action under Federal Statutes 42 United States Code, Section 1983 and 42 United States Code, Section 12132. First, Fifth, Eighth and Fourteenth Amendments pursuant to 28 United States Codes, Section 1343.

 $\mathbf{II}$ 

#### VENUE

Venue lies within the Southern District of Texas where Plaintiff's claim arose.

#### Ш

### **PARTIES**

- A) Plaintiff, Robert Arthur Hall, (Harris County Sheriff's Department prisoner number 615184; United States Marshal's Service prisoner number 38261-079), is a citizen of the United States and currently a federal prisoner in the custody of the United States Attorney General. At all times mentioned in this complaint, Plaintiff Hall was a federal prisoner in the Harris County Sheriff's Department, Detention Bureau-Jail Division, 1301 Franklin Street, Houston, Texas 77002.
- B) Defendant Tommy Thomas was at all times mentioned in this complaint the appointed Sheriff of the Harris County Sheriff's Department (HCSD) who oversees and directs the operation of the HCSD Detention Bureau's jail facilities located at 1301 Franklin Street and 701 N. San Jacinto, both of which are located in Houston, Texas 77002. Defendant Thomas is named in this action in his individual and official capacities. Defendant Tommy Thomas can be served at 1301 Franklin, Houston, Texas 77002;

Defendant K.W. Berry was at all times mentioned in this complaint a HCSD Major assigned as the supervisor to the HCSD Inmate Housing Bureau as an employee of the HCSD and may be served at 1301 Franklin, Houston, Texas 77002. Defendant Berry is named in this action in his individual and official capacities;

Defendant Marcorif Thomas was at all times mentioned in this complaint employed by the HCSD as a Deputy Sheriff in the Classification Bureau of the HCSD and may be served at 1301 Franklin, Houston, Texas 77002. Defendant Thomas is named in this action in his individual and official capacities;

Defendant Dr. Mike Seale was at all times mentioned in this complaint employed as the Medical Director of the HCSD-Medical Division (HCSD-MD) and may be served at 1301 Franklin, Houston, Texas 77002. Dr. Seale is named in this action in his individual and official capacities;

Defendant M.W. Quinn was at all times mentioned in this complaint employed as a HCSD Major assigned as the Hospital Administrator of the HCSD-MD and can be served at 1301 Franklin, Houston, Texas 77002. Defendant Quinn is named in this action in his individual and

official capacities;

Defendant Dr. C. Trinh was at all times mentioned in this complaint employed by the HCSD-MD as a physician who treated HCSD jail inmates' medical problems and may be served at 1301 Franklin, Houston, Texas 77002. Defendant Trinh is named in this action in his individual and official capacity;

Defendant Dr. D. Klein was at all times mentioned in this complaint employed by the HCSD-MD as a physician who treated HCSD jail inmates' medical problems and may be served at 1301 Franklin, Houston, Texas 77002. Defendant Klein is named in this action in his individual and official capacities;

Defendant Dr. Mark Chassay was at all times mentioned in this complaint employed by the HCSD-MD as a physician who treated HCSD jail inmates' medical problems and may be served at 1301 Franklin, Houston, Texas 77002. Dr. Chassay is named in this action in his individual and official capacities;

Defendant Nurse K. Howard was at all times mentioned in this complaint employed by the HCSD-MD as a Licensed Vocational Nurse (LVN) who treated HCSD jail inmates' medical problems and may be served at 1301 Franklin, Houston, Texas 77002. Defendant Howard is named in this action in her individual and official capacities;

Defendant Dr. M. Guice was at all times mentioned in this complaint employed by the HCSD-MD as a physician who treated HCSD jail inmates' medical problems and may be served at 1301 Franklin, Houston, Texas 77002. Defendant Guice is named in this action in his individual and official capacities;

Defendant Dr. A. Phi was at all times mentioned in this complaint employed by the HCSD-MD as a physician who treated HCSD jail inmates' medical problems and may be served at 1301 Franklin, Houston, Texas 77002. Defendant Phi is named in this action in his individual and official capacities.

Defendant Dr. Kahm Luu was at all times mentioned in this complaint employed by the HCSD-MD as a physician who treated HCSD jail inmates' medical problems and may be served at 1301 Franklin, Houston, Texas 77002. Dr. Luu is named in this action in his individual and official capacities;

Defendant Dr. Pamela Wilson was at all times mentioned in this complaint as a medical doctor on the Lyndon B. Johnson General Hospital (LBJGH) Urology Staff which treated HCSD jail inmates referred to her by HCSD-MD Consultation Request and may be served at 5656 Kelley Street, Houston, Texas 77026. Defendant Wilson is named in this action in her individual and official capacities.

### IV

### **FACTS OF CLAIM**

- On 9/8/93 Plaintiff was released from the custody of the Federal Bureau of Prisons (A) (BOP) and paroled to the custody of the United States Parole Commission (USPC) to the supervision of Mr. Louis Brewster, Chief Probation Officer, Southern District of Texas. Direct supervision of Plaintiff was delegated to Mr. Frank Flanigan, U.S. Probation Officer, Conroe, Texas. At the time of release BOP, USPC and U.S. Probation Office records adduce an ongoing history of serious physical and mental conditions that legally designated Plaintiff as a disabled person pursuant to definitions found in the Americans With Disabilities Act. (See 42 U.S.C. Section 12102 (2) (A) (B); and 28 Code of Federal Regulations Section 35.104 et seq.). These disabilities include, but are not limited to: neurological (brain damage at birth); epilepsy; musculoskeletal; hyperthyroidism; chronic kidney dysfunction (renal calculi); diabetes; mental and emotional illnesses of life long nature such as bipolar disorder (manic depressive); clinical major depression and split personality. (See records attached as Exhibits 58-64). Plaintiff's case history and mental condition warranted Mr. Brewster's office to seek and receive as a condition of release a "Special Mental Health Aftercare Condition" which stipulated "you shall participate in an inpatient or an out-patient mental health program as directed by your probation officer." (See 5/23/95 letter attached as Exhibit 58).
- (B) In early 1994 Plaintiff experienced severe kidney problems. Being indigent Plaintiff applied at the Harris County Hospital District Regional Eligibility Center for a Patient ID card known commonly as the "Gold Card." Plaintiff received the gold card and was designated to the Acres Home Community Health Center. At the center tests were conducted and it was discovered that Plaintiff had traces of blood and ketones in a urine sample which prompted the center to refer the case to Lyndon B. Johnson General Hospital (LBJGH). At LBJGH it was

determined that with a chronic kidney infection that Plaintiff had developed a kidney stone (renal calculi). The LBJGH Urology Staff triaged Plaintiff's case to Hermann Hospital for "Lithotripsy" to remove the kidney stone in July 1994.

Plaintiff physically weakened by months of infection and constant pain from the kidney condition, and **not** receiving the therapy and treatment as ordered under the USPC Special Mental Health Aftercare Condition supposedly due to laking government funds, went into major depression. The depression caused Plaintiff to seek other avenues of the much needed psychotherapy and psychiatric treatment. In September 1994, Plaintiff made contact with the Mental Health Mental Retardation Association (MHMRA) in Humble, Texas. The MHMRA diagnosed Plaintiff with Major Depression/Organic Mood Disorder, prescribed the psychotropic medication Elavil but was unable to provide individual counseling with a psychiatrist. (See MHMRA record attached as Exhibits 64,65) Still suffering from the chronic kidney condition and untreated major depression, Plaintiff was arrested on a USPC parole violator warrant and placed in the Harris County Jail (HCJ) as a federal prisoner on 2/21/95 under sheriff's prisoner number 615184. (See MHMR record attached as Exhibits 64, 65). Still suffering from the chronic kidney condition and untreated major depression, Plaintiff was arrested by the Houston Office of the United States Marshals Service on a USPC parole violator warrant. The Marshals Service had the Plaintiff placed in the Harris County Jail (HCJ) as a federal prisoner on 2/21/95 under Sheriff's Prisoner Number (SPN) 615184.

## (D) <u>HARRIS COUNTY SHERIFF'S DEPARTMENT (HCSD)</u>

CLASSIFICATION AND MEDICAL SCREENING. 1.) After being placed in the HCSD-Jail Division (HCSD-JD) 1301 Franklin Jail facility (1301 facility) a medical screening health questionnaire was incorrectly completed by Defendant Deputy Marcorif Thomas. (See 2/22/95 record attached as Exhibit 49) Three correct answers were glossed over which directly influenced classification criteria and these three omissions discriminated against the Plaintiff's disabled status by depriving him of both immediate and needed physical and psychiatric medical attention that date and at later dates in this complaint. The incorrect answers are (a) as to question number one: only hours after the questionnaire was completed the HCSD-Medical Division (HCSD-MD) and LBJGH medical records indicate Plaintiff was taken to LBJGH at the consulting request of

Defendant Dr. C. Trinh as Plaintiff was in extreme pain from the chronic kidney infection and dysuria. (See 2/22/95 records attached as Exhibits 1,50). (b) as to questions ten and eleven: answer to twelve states yes, the Plaintiff had previously been in the HCJ on 5-18-1988. Deputy Thomas omitted or ignored the proper HCSD policy, procedure, program or plan of reviewing the 1988 HCJ incarceration. Verification of the 1988 jail record would have stated that Plaintiff was admitted to the same HCJ 1301 facility in 1986 and placed on the MHMRA jail floor and considered a suicide risk at that time. The record further reflects that Plaintiff attempted suicide in the Harris County Jail in 1975. (See 2/22/75 record attached as Exhibit 59) The health questionnaire is the primary medical screening of incoming inmates for potential psychiatric attention. The glossing over and indifferent answering techniques of the classification deputy, as in this instance, lead to a permanent set of misinformation facts to become a permanent part of Plaintiff's HCSD-MD Medical Record (MR). This adversely effected Plaintiff's immediate and subsequent treatment as a disabled person in not being able to realize any accomodations in the HCJ because the initial medical screening is declaring no to mental health problems when clearly the present records and the past jail records historically state the opposite. Should the questions been correctly answered then theoretically with a yes answer to either question it should have activated a "Red Flag" for the Plaintiff to have been interviewed by the MHMRA staff at the HCJ. 2.) On 2/23/95 a second health questionnaire was completed after Plaintiff returned from LBJGH and repeated the same mistakes as on the 2/22/95 questionnaire. (See 2/23/95 record attached as Exhibit 55) Plaintiff, after admitting to feeling suicidal, was not sent to the MHMRA floor, but rather classified to the fifth floor of the HCJ 1301 facility, to be housed in a single man segregation cell in cellblock 5B5. The 2/22/95 questionnaire states a yes to question seven in that Plaintiff was taking seizure medications for his epileptic condition. Plaintiff with the handicaps of epilepsy, hyperthyroidism, kidney dysfunction and life long mental illness was not classified correctly. Instead of being placed in a "hospital cellblock" on the MHMRA floor, he was instead placed in the more severe setting of administrative segregation. The 5B5 cells were designated for minimal contact with other humans. These cells consist of four solid surrounding concrete walls with a recessed metal sliding door with a five inch slit window that does not permit outside visual inspection of the cells total interior area. Approximately one-third of the cell's interior is out of

the visual sight line of the supervising HCSD Deputy Sheriff and it is in this section that the wallmounted steel bunk is located. (See example drawing attached as Exhibit 32) It is in this unobservable section of the cell that Plaintiff has been forced to sleep or sit for more than a year. It is against the dictates of reasonable correctional/jail motiffs in the safe and orderly operation of the institution, for an epileptic or any seizure related medically diagnosed inmate to be classified and housed alone and out of the sight of all medical and security personnel that could render assistance/aid to the usually repetitive cycle with seizure disorders. 3) On 2/27/95 the HCSD classification officers made another error in Plaintiff's case by transferring him from the 1301 facility to the 701 N. San Jacinto facility (701 facility). The HCSD policy, procedure, program, or plan on classification was to keep all "inmate medical cases" similar to Plaintiff's at the 1301 facility where the main HCSD-MD clinic is located. On 3/9/95, eleven days later, the classification officers at the request of the HCSD-MD 701 facility clinic corrected the mistake and returned Plaintiff as a "medical case" back to the 1301 facility. Though the classification officers now clearly recognized the medical status of Plaintiff the classification officers did not place Plaintiff in a hospital cellblock or on the medical floor, but rather continued in the deprivation of Plaintiff's serious medical needs by classifying him back to 5B5-09 administrative segregation. 4) On 4/18/96 HCSD grievance #96-03 was partially sustained to Plaintiff's allegations that the administration has allowed the "overall conditions" of administrative segregation cell block 5B5-09, where Plaintiff as a disabled person had been confined in a segregation cell for over a year, to become "punitive" through discrimination and the loss of Plaintiff's privileges without due process of law. (See 3/6/96 Inmate Grievance Form attached as Exhibit 71). The promised administrative relief to the granted grievance was never forthcoming. (See 4/18/96 IGB-004 Form attached as Exhibit 72) 5) The permanent misinformation of Deputy Thomas in the two health questionnaires of 2/22/95 and 2/23/95 are still part of Plaintiff's active MR and this prevented the HCSD-MD from making the same type accomodation referral to the HCJ MHMRA Forensic Unit concerning Plaintiff's clinical depression. In paragraph C supra the Plaintiff was diagnosed at MHMRA on 9/01/94 with major depression and so had a medical history and MR readily available to the MHMRA Forensic Unit at the HCJ. Had not Deputy Thomas, through negligence and deliberate indifference to Plaintiff's serious medical needs as a disabled person, glossed over

the answers to the health questionnaire, thus defeating its design and purpose, then Plaintiff would have been referred to MHMRA and his case picked up and treatment for his depression been provided for. Ironically Plaintiff's MR at MHMRA at Humble, Texas shows the MHMRA searching for Plaintiff from 1/10/95 to 3/17/95 which was one (1) month after his incarceration in the HCJ. (See MHMRA record attached as Exhibit 65) Nearly a year later Dr. Guice documents Plaintiff's ongoing "mild depression" in the MR. (See 1/10/96 MR entry attached as Exhibit 18) The record supports that Plaintiff has suffered life-long depression; was suffering major depression on 9/01/94; admitted to feeling suicidal on being booked into the HCJ on 2/22/95; and a general practioner notes a year later on 1/10/96 that Plaintiff appeared to be suffering "mild depression." The record is silent to any accomodation of mental health treatment by any agency, especially the MHMRA, during Plaintiff's entire incarceration in the HCJ from 2/22/95 to 7/12/96.

The physical and mental suffering of Plaintiff from 2/22/95 to 7/12/96 in the HCJ (E) was the proximate result of Defendant M. Thomas' egregrious failure to properly classify the Plaintiff as a disabled person and to provide an adequate jail housing assignment as an accommodation that kept the Plaintiff from harm, injury or reasonable fear thereof, and that this callous disregard of and deliberate indifference to the rights, personal safety and medical needs to the Plaintiff as a disabled person and was the direct result of a pattern and practice of the hiring of unqualified and incompetent security personnel to work in the HCSD classification section, the maintenance of inadequate security measures and procedures to insure proper classification of inmates in the HCJ and these described circumstances and conditions were deliberately and knowingly maintained by the Defendants T. Thomas, Berry, and M. Thomas and each of them, and in total callous disregard of and deliberate indifferences to the rights and personal safety and well-being of the Plaintiff thereby subjecting Plaintiff, and/or causing him to be subjected to an unfit and dangerous living enviornment and conditions pervaded with a high level of injury, the unnecessary and wanton infliction of pain that denied him due process, was cruel and unusual punishment and a denial of equal protection of the law that resulted in Plaintiff being in diminished mental and debilatative physical states of health for seventeen (17) months during which time Plaintiff was compelled to stand federal trial in Cause No. H-95-201 on November 29, 1995, in said states of health, and all of the foregoing in violation of Plaintiff's federally protected rights as

delineated in the succeeding paragraphs.

## (F) <u>HCSD - Initial Medical Interview-Referral to Lyndon B. Johnson General</u> <u>Hospital</u>

After the 2/22/95 classification, and that same date, Plaintiff was taken to the HCSD-MD clinic in the 1301 facility for a regular physical evaluation given to all new arrivals in the HCJ system. At this evaluation the diagnosis arrived at was 1) Epilepsy, 2) Hyperthyroidsim, 3) history of Renal Calculi (kidney stones) and that Plaintiff had not urinated in some time and was in extreme discomfort with pain radiating from mid-back to groin. Treatment of the kidney dysfunction in 1994 was noted, and that the HCSD-MD staff had been unable to void Plaintiff's bladder with a straight catheter attempt. A request was made by Defendant Dr. C. Trinh, HCSD-MD, to send Plaintiff to LBJGH by van for a urology evaluation. (See 2/22/95 MR entry attached as Exhibit 1) Prior to being taken to LBJGH, the HCSD-MD was able to obtain a small urine sample that tested to have "trace blood and small ketones." (See 2/22/95 consultation request attached as Exhibit 50) The 2/22/95 Consultation Request stated that Plaintiff had been evaluated and treated by the LBJGH Urology Staff in the past (1994).

the Plaintiff was transported by the HCSD to LBJGH and arrived at 10:00 a.m. on 2/22/95. A HCHD Emergency Department Record was completed on Plaintiff. (See 2/22/95 HCHD Record attached as Exhibit 51) This record stated the chief complaint was "Pain/Dysuria/Seizure Disorder." The "Initial Assessment" category stated "Kidney stone crushed last July, pain, trace blood." The history category notes "Lithotripsy" in July 1994. At the bottom of the record is a drawing and description of Plaintiff's symptoms. Directly under the history is the "Date/Time" that states 2/22/95 at 12:45p.m. the evaluations elapsed time in the overcrowded county hospital was two hours and forty-five minutes. The bottom left hand corner of the record bears the imprint from Plaintiff's "Gold Card" patient ID which proves that Dr. Pamela Wilson of the LBJGH Urology Staff was aware that it was the same patient that had been previously treated for Renal Calculi and kidney dysfunction a few months before in 1994. As a free indigent disabled person, Plaintiff had received moderately good medical attention from LBJGH. In custody as an indigent disabled prisoner Plaintiff seemingly ceased to exist as a human being with civil rights by the

Urology Staff, for the LBJGH medical record turns quiet to the needs of the Plaintiff for at 12:50 p.m. on 2/22/95, Plaintiff was discharged by Dr. Wilson without receiving treatment whatsoever for the same condition that Plaintiff had been treated for at LBJGH. (See HCHD record attached as Exhibit 52) The disparity of the record becomes clear when Exhibits 50 and 51 are compared with the HCHD emergency center discharge instructions of Exhibit 52. These instructions indicate the Plaintiff is to resume "normal activity" though the Urology Staff knew of the 1994 kidney condition treatment and of the instant complaint that date which urine samples showed "traces of blood and ketones." There is **no** follow-up written orders concerning the kidney complaint. The callous disregard, deliberate indifference and wanton infliction of pain by Dr. Wilson and the LBJGH Urology Staff against the disabled Plaintiff was so blatant that a doctor signed in the "Patients Signature" space of Exhibit 52 and a copy was not given to the Plaintiff even though the record exhibits Plaintiff's "Patient ID", name and number. Plaintiff was dismissed by the LBJGH Urology Staff without comment. From this date forward there was no further follow-up orders or medical attention by Dr. Wilson and the LBJGH Urology Staff which resulted in Plaintiff continuing to suffer physical pain and experience extreme distress with this untreated kidney condition from 2/22/95 to 7/12/96. 2) Plaintiff was taken from LBJGH to the HCSD-MD clinic at the 1301 facility. Ms. C. Ware, LVN, completed a "Master Problem List" which is part of the Plaintiff's MR. (See 2/22/95 Master Problem List attached as Exhibit 53) The Master Problem List is silent to Plaintiff's chronic kidney condition for it is not listed as a problem though this is the same HCSD-MD clinic that sent Plaintiff to LBJGH a few hours before with a consultation request issued by Dr. Trinh, HCSD-MD that states: "...renal calculi presents @ extreme back and abdo. discomfort, claims evaluated by LBJ Urology in the past, s/p removal of kidney stone, currently c/o dysuria, backpain @ radiation to groin. Urine dip: trace of blood, small ketones..." (See exhibits 1 & 50). It is indicative of the deliberate indifference to Plaintiff's serious medical needs as a disabled person that Dr. Trinh sent Plaintiff to LBJGH based on the medical facts that: (a) The medical staff at first had been unable to obtain a urine sample with a "straight catheter attempt;" (b) once having obtained a small urine sample it tested positive for the presence of trace blood and small ketones; (c) the medical staff was apprised of the past history of kidney and urinary tract conditions and that Plaintiff stated he had been evaluated by the LBJ

Urology Staff which was verified at LBJGH on 2/22/95; (d) and that Plaintiff was exhibiting signs of physical distress, pain and discomfort. Dr. Trinh neglected to provide proper medical care by a follow-up interview which would have exposed Plaintiffs' unchanged physical conditions and he would have seen by the HCHD medical paperwork that Plaintiff had not been accomodated or treated at LBJGH but rather had been "shuffled" through by the indifferent Urology Staff and that Plaintiff, as a disabled person, was still in need of serious medical attention. This failure to provide proper medical care through Dr. Trinh's deliberate indifference, brought about the needless suffering and wanton infliction of pain to the Plaintiff. With nurse Ware's omission in the master problem list, and with Dr. Trinh's failure to follow-up on his own ordered consultation request, it is demonstrated, as with the foregoing health questionnaires in part D of this complaint, that there is a discernable pattern and practice, based on negligence of official HCSD Medical Records with omitted or missing information and over looked pertinent medical data, not making its way into Plaintiff's permanent HCSD-MD medical record. The policy, procedure, program, or plan that the HCSD-MD utilizes in accurate record keeping, as charged by law, is here demonstratably being departed from and which proved to be a contributing factor that detrimentally affected Plaintiff's health and well-being as a disabled person in the subsequent nontreatment of Plaintiff's chronic kidney condition from 2/22/95 to 7/12/96. 3) The 3/30/95 Plaintiff's MR describes: "burning urination" and a 4/3/95 M.D. appointment is set. The Plaintiff's MR at 4/3/95 describe: "chronic kidney stones." (See 4/3/95 MR entry attached as Exhibit 3) The specific kidney complaint was overshadowed and completely forgotten by the misdiagnosis of the "Herpes." No further follow-up was ordered concerning the kidney condition and the resultant pain which the plantiff had suffered from the untreated ailment for forty-two (42) days. 4) The 4/14/95 Plaintiff's MR describes: "dysuria" and again the specific kidney/urinary condition was overshadowed and completely forgotten by the ongoing misdiagnosis of "Herpes." No further follow-up was ordered concerning the "dysuria" and the resultant pain which the Plaintiff had now suffered from for fifty-three (53) days. (See 4/14/95 entry attached as Exhibit 5). 5) The 6/8/95 Plaintiff's MR describes: "back pain 6-8 wks." A 6/19/96 M.D. appointment was scheduled for Plaintiff but was never kept by the HCSD-MD. (See 6/8/95 entry attached as Exhibit 7) Plaintiff had now been in back and kidney pain for one-hundred and nineteen (119) days. 6) The 7/18/95

Plaintiff's MR describes: "chronic back pain" (kidney area). Plaintiff realizing that no adequate medical care is going to be forthcoming after five (5) months of requests to the HCSD-MD, asks for an extra mattress and medications to stop the pain in his back. This patchwork medical request is granted and Plaintiff is given a "Special Needs Advisement" (SNA) for an extra mattress. (See 7/18/95 advisement attached as Exhibit 57) and a minor pain medication for fifteen (15) days. (See 7/18/95 MR entry attached as Exhibit 9) No further follow-up was ordered concerning the kidney related back pain which Plaintiff had now suffered with for one-hundred and forty-eight (148) days. 7) The 11/27/95 Plaintiff's MR describes: "kidney pain." A 12/5/95 M.D. appointment was made for Plaintiff. The 12/5/95 Plaintiff's MR describes: "kidney pain, 1994 lithotripsy at LBJGH, a kidney stone was found....Kidney stones x 2yrs." (See 12/5/95 MR entry attached as Exhibit 14) Plaintiff had been with kidney and back pain two-hundred and eighty-eight (288) days. This is the only M.D. appointment since Plaintiff's first admission to jail on 2/22/95 that a urine test was ordered and actually performed by the HCSD-MD. (See 12/7/95 lab results attached as Exhibit 29) This test accidentally discovered a high glucose level that led to a diabetes diagnosis on 12/7/95. (See 12/7/95 MR entry attached as Exhibit 15) These test results had the same overshadowing effect as in other serious medical conditions described in this complaint in that the kidney pain complaint was forgotten as a specific issue to be treated by the HCSD-MD and negligently is no longer mentioned in Plaintiff's MR as late as the 6/4/96 MR entry and at which time Plaintiff had suffered kidney and back pain for over fifteen (15) months.

(H) This inadequate medical treatment of Plaintiffs serious kidney condition from 2/22/95 to 7/12/96 by Defendants T. Thomas, Berry, Seale, Quinn, Trinh, Guice, Phi, Luu and Wilson has resulted in unnecessary physical suffering of Plaintiff for a period of over fifteen (15) months through an ongoing pattern and practice of arbitrary and capricious discrimination to the Plaintiff and all the proximate result of Defendants T. Thomas, Berry, Seale, Quinn, Trinh, Guice, Phi, Luu and Wilson's deliberate indifference to the serious medical needs of the Plaintiff amounting to the infliction of unnecessary pain that denied him due process, was cruel and unusual punishment, and a denial of equal protection under the law that resultted in Plaintiff being in diminished mental and debilitative physical states of health for seventeen (17) months and duringn which time Plaintiff was compelled to stand federal trial in Cause No. H-95-201 on

November 29, 1995, in said states of health; and all of the foregoing in violation of Plaintiff's federally protected rights delineated in the succeeding paragraphs.

## (I) HCSD-MD TWO WEEK PHYSICAL AND MEDICALLY RESTRICTED USE OF LEG IRONS.

- 1) On 3/8/95, and while Plaintiff was still incorrectly housed by the HCSD Classification Section to the 701 N. San Jacinto Facility (701 Facility), he was given a mandatory "two-week physical". A HCSD-MD "History & Physical Examination" record was completed and signed by S. O'Neall, R.N., and D. Klein, M.D. which states as a written medical order under "Comments" (See 3/8/95 history attached as Exhibit 56) Bilateral Achilles tendons surgery. " '75 (cannot wear leg irons for that reason)..." In 1975 Plaintiff's achilles tendons had been severed in both legs, and the surgical reattachment left the tendons short and tight with minimal ankle rotation leaving Plaintiff with a physical orthopedic disability in both legs. Any contact or pressure from a foreign object to this area of the ankle causes pain, bruising, spraining, and/or temporary loss of foot control and impaired coordination. By the design nature and use, leg irons when used on Plaintiff, falls on the scar lines of both legs and the use of leg irons is painful and causes tenderness, soreness and partial lameness for days after their use. Nurse O'Neall and Dr. Klein both correctly identified the physical orthopedic disability, and the problems that it presented, and took appropriate and timely action by issuing the "Medical Restriction" on the use of leg irons on Plaintiff as an attempt at accomodation. Dr. Klein then failed to fill out a Special Needs Advisement (SNA) which was the follow-up step in the HCSD-MD policy, procedure, program or plan that would have insured that the security personnel did not use the leg irons on Plaintiff. Dr. Klein's failure to follow-up is the cause of Plaintiff having to suffer over a year and three months of pain from the use of the leg irons and the deprivation of Plaintiff's rights and privileges as a prisoner in the HCJ.
- 2) On 3/9/95 Plaintiff was transferred back to the HCJ 1301 facility wearing leg irons and was placed back in administrative segregation cellblock 5B5-09. Since the implementation of this written medical restriction on the use of leg irons on 3/8/95, these legally given medical orders/instructions have been deliberately and totally disregarded by all HCSD personnel.

3) In support of this part of the complaint the Plaintiff relates the following:

(A) On 5/12/95 Plaintiff was placed in leg irons by HCSD Deputy Lewellen and taken to the 1301 facility clinic for Plaintiff to receive some missed medications. At the clinic Plaintiff complained to Defendant Dr. Mark Chassay, HCSD-MD, that his ankles and tendons were swollen from the medically restricted use of leg irons. Plaintiff requested Deputy Lewellen to ask Dr. Chassay to verify in Plaintiff's MR the 3/8/95 entry on the History & Physical Examination Record wherein Dr. Klein and Nurse O'Neall had given and signed written orders/instructions, in the comment section that the leg irons were not to be used on Plaintiff. Deputy Lewellen made the request and Dr. Chassay and defendent K. Howard, LVN and J. Lewis, W.C. briefly and indifferently leafed through Plaintiff's MR and because of their negligence and deliberate indifference overlooked the legitimate entry of Dr. Klein and Nurse O'Neall on 3/8/95. Dr. Chassay then implied to Deputy Lewellen that Plaintiff was trying to deceive the deputy. Plaintiff protested that he was telling the truth and had personally witnessed the written instructions of 3/8/95 and the signature on the record by both Dr. Klein and Nurse O'Neall. Evidence of the ongoing pattern and practice of deliberate indifference to Plaintiff is here demonstrated in that Dr. Chassay did not need the medical record to resolve the complaint. As a licensed physician his own authority allowed him to issue medical orders, restrictions, and issue a Special Needs Advisement. Dr. Chassay having Plaintiff physically present needed only to examine Plaintiff's ankles and thereby resolve the issue of accomodation of the orthopedic disability. In total apathy to Plaintiff's needs, Dr. Chassay without any examination whatsoever, instructed Deputy Lewellen that he was done interviewing Plaintiff. Deputy Lewellen returned the Plaintiff to cellblock 5B5 where he was continually subjected to the painful use of the still medically restricted use of leg irons for the next one-year and three months.

(B) On 5/22/95, Plaintiff requested Deputy David Davis, HCSD-Classification that the use of leg irons be discontinued. Plaintiff explained to Deputy Davis that the HCSD-MD had on 3/8/95 ordered that leg irons not be used but somehow that order had not made its way to the Jail Division Officials. Deputy Davis informed Plaintiff that he would talk with HCSD-MD personnel and to Sgt. T. Roshto, HCSD-JD, Fifth floor Supervisor to see if Sgt. Roshto would on his own initiate the discontinuance of the leg irons. Deputy Davis was

unsuccessful and the use of leg irons was enforced against the medical order/instructions not to use them on the disabled Plaintiff.

- 4) The use of leg irons continued from 2/22/95 thru 4/17/96 as demonstrated by two separate letters to U.S. Marshal Al Solis from Plaintiff's attorney Mr. Thomas Bevans and which are respectively dated 4/8/96 (See 4/8/96 Bevans letter attached as Exhibit 73) and 4/17/96 (See 4/17/96 Bevans letter attached as Exhibit 74) each letter shows service copy to U.S. District Judge Ewing Werlein, Jr; Defendant Tommy Thomas, Sheriff Harris County; and the Plaintiff. The 4/8/96 letter enumerates Plaintiff's medical complications as: (a) diabetic condition-problem with feet; (b) walking with cane (while wearing leg irons); (c) problems with achilles tendon. The Bevans letter requests the accommodations that Plaintiff's feet **not** be shackled and that the attorney himself had visually observed that the disabled Plaintiff was compelled to wear the medically restriced leg irons.
- 5) The 4/17/96 Bevans letter documents that the HCSD-JD had been deliberately indifferent to the medical need of the disabled Plaintiff, even after being put on notice by the 4/8/96 Bevans letter by continuing to cause Plaintiffs needless suffering and the wanton infliction of pain and the deliberate indifference and callous disregard of Defendant Sheriff Tommy Thomas to deprive Plaintiff of his civil rights. This insensibility of Sheriff Thomas and Defendant Major. K.S. Berry, HCSD, and Defendant Major M.W. Quinn is exemplified in a 4/15/96 letter from Major Berry to Mr. Bevans that shows service copy to Major Quinn and states that Berry's office will do an immediate review of Plaintiff's classification and medical needs. (See 4/15/96 Berry letter attached as Exhibit 75) The MR of Plaintiff shows he was **not** directly seen by a HCSD-MD physician from 3/19/96 to 6/4/96. Plaintiff's MR validates that Sheriff Thomas, Major Berry and Major Quinn took no actions and completely ignored the Bevan's letters requests for accommodation and for medical attention of 4/8/96 and 4/17/96.
- 6) A review of Plaintiff's MR and a comparison of HCSD-MD policy, procedure, programs or plan statements indicate the primary causative factor in the "state of confusion" concerning the use of leg irons is traced back to the initial History and Physical Examination of 3/8/95. Dr. Klein failed to "follow-up" on the written orders/instructions under the comments section of the record by failing to take the next HCSD-MD procedural step of filling out and

signing a form M-172 "Special Needs Advisement". (See example advisement attached as Exhibit 57) The SNA was specifically created to serve the very need of physical relief that Plaintiff's condition required and which Dr. Klein and Nurse O'Neall readily admitted Plaintiff needed. Said failure of Dr. Klein to follow-up with this accommodation was deliberately indifferent to Plaintiff's serious medical needs as a disabled person and which resulted in one-year and three-months of needless suffering, duress, pain and injury to Plaintiff by his being forced to wear the admittedly painful leg irons.

- 7) The foregoing failure by Dr. Klein is exacerbated in that Plaintiff did seek to redress to the inadequate medical care by writing an informal letter to Nurse O'Neall on 3/13/95. (See 3/13/95 letter attached as Exhibit 66) The letter stated the indifferent attitude of Dr. Chassay, Nurse Howard, and Ms. Lewis at the 3/12/95 interview. This letter, as an informal link in the administrative remedy process was placed in plantiff's MR and yet no SNA form was filled out concerning the leg irons for accommodation of Plaintiff's disabled condition. Plaintiffs written plea for medical assistance was deliberately ignored by the HCSD-MD personnel with their full knowledge that it would lead to needless suffering and the wanton infliction of pain to the disabled Plaintiff.
- (J) The medically restricted use of leg irons by the HCSD-JD from 3/8/95 to 6/4/96, and for fear of further infliction of suffering, pain, and injury prevented the Plaintiff from attending the Inmate Law Library, Church, prayer groups, and recreational activities as afforded and provided to all other inmates housed in Administrative Segregation cellblock 5B5. Because of this ongoing pattern and practice of the arbitrary and capricious discrimination the Plaintiff was compelled not to attend any Law Library period or recreational activity during this 3/8/95 to 6/4/96 period of incarceration. The HCJ Administrations physically forced this deprivation of Plaintiff's civil rights through physical duress of the Plaintiff that kept him continuously incarcerated twenty-four (24) hours a day for over a year period in Administrative Segregation with the exceptions of attorney visits, clinic appointments and court appearances he was compelled to attend. The mental duress, suffering, pain and injury to Plaintiff by the use of the medically restricted leg irons from 3/8/95 in the HCSD-JD was the proximate result of Defendants, T. Thomas, Berry, Quinn, Seale, Klein and Chassay's egregrious failure to take the

necessary steps to adequately protect the disabled Plaintiff from discrimination due to his disability and from harm, suffering, pain, injury, or the reasonable fear thereof, after having been put on notice in writing by the Plaintiff in his MR and by Plaintiff's attorney's written notice that suffering, physical pain and injury was befalling the Plaintiff and their deliberate indifference to the serious medical needs, civil rights, and personal safety of the Plaintiff and was the direct result of a pattern and practice of not following up on written medical orders/instructions by incompetent medical personnel, the maintenance of inadequate HCSD-MD policies, procedures, programs or plans to ensure that medical orders/insturctions are followed up on by medical and security personnel. These described circumstances and conditions were deliberately and knowingly maintained by Defendants T. Thomas, Berry, Quinn, Seale, Klein and Chassay, and in total callous desregard of and deliberate indifference to the well being, personal safety, serious medical needs and rights of the disabled Plaintiff thereby subjecting him, or causing him to be subjected to the prohibition of the free exercise of religion and to the unnecessary and wanton infliction of pain that denied him due process, was cruel and unusual punishment and a denial of equal protection of the law that resulted in Plaintiff being in a debilitative physical state of health for fifteen (15) months and during which time Plaintiff was compelled to stand federal trial in Cause No. H-95-201 on November 29, 1995, in said state of health; and all of the foregoing in violation of Plaintiff's rights as delineated in the succeeding paragraphs.

## (K) <u>SEIZURE DISORDER - MEDICAL NEGLECT AND MEDICAL</u> <u>MALPRACTICE</u>

On 2/22/95 Ms. C. Ware, LVN, placed a HCSD-MD Special Need Treatment Plan (SNTP) for a seizure disorder in the Plaintiff's MR. (See 2/22/95 SNTP attached as Exhibit 54) The SNTP lays out the medical criteria for the treament of inmate/patients who have seizure disorders such as Plaintiff's epilepsy. In these terms the SNTP states the HCSD-MD goals was to keep Plaintiff seizure free as possible through the medications Dilantin(phenytoin) and Phenobarbital, that the type and frequency of diagnostic testing would be blood tests every three (3) months to check the levels of Dilantin/Phenobarbital, and that the frequency of follow up medical evaluations of every three (3) months to check the effectiveness of medications and

possible adjustment to plans. The SNTP is clear and concise that the HCSD-MD knew the correct and prescribed procedure to treat Plaintiff's seizure disorder. In Plaintiff's case to reach the SNTP goal of keeping Plaintiff seizure free as possible there were in Plaintiff's case three separate and distinct steps for medical personnel to follow and that was medication; diagnostic testing; and the adjustment of treatment modality based on diagnostic testing of the seizure medications found to be in Plaintiff's blood.

## (L) <u>MEDICATION</u>

During Plaintiff's incarceration in the HCJ as a disabled federal prisoner he sought every available avenue of administrative relief to his obtaining the proper doses of the prescribed seizure disorder medications Dilantin and Phenobarbital. Seizure disorder medications are considered "controlled medications" by the HCSD-MD and are dispensed by HCSD-MD nurses, commonly referred to as "Med Cart Nurses", on two regulated A.M. and P.M. rounds to the cell blocks located on each of the inmate housing floors of the HCJ. The nurses have a rolling medical cart (med cart) that they bring from the 1301 facility clinic to the respective inmate housing floors. The cellblocks are broken into four (4) alphabetically designated quads A-D. Each quad is broken up into cellblocks numbered 1-6. On each cellblock and/or cell the respective location letters and numbers are printed in characters ten inches (10") tall and are clearly visible and easy to read. Once on the desired floor, in the correct quad, and at the right cellblock and cell the Med Cart Nurse then refers to a Medication Administration Record (MAR) that is set up by location and which has each individual inmates name, number, type drug to be dispensed and time to be dispensed. (See MAR example attached as Exhibits 33-47). The MAR is designed that it shows the chronological order of delivery of the controlled medications in the month, day and A.M. and P.M. delivery schedules as prescribed by the HCSD-MD Physicians. If a particular dispensation of controlled medications is made to the respective inmate then the Med Cart Nurse places his/her initials in the corresponding box for date, day and A.M. or P.M. delivery. If dispensation was not made then the nurse either initials the corresponding box and draws a circle around the initials, or writes "no" and/or leaves the box unmarked altogether. The MAR system is part of the HCSD-MD policy, procedure, program or plan to track and monitor the dispensation of ordered prescription medications to inmates and also for use in keeping a record in the inmates MR of all

previous months that controlled medications have been dispensed. The MAR also serves the HCSD-MD Physicians in ascertaining if his/her patients are receiving the proper amount of medications.

## (M) <u>MISSED SEIZURE DISORDER MEDICATIONS</u>

A review of the MAR in Plaintiff's MR reflect that from 02/22/95 to 03/01/96 Plaintiff did not receive the prescribed seizure medication doses for approximately one hundred and eighty (180) of the total amount of doses ordered by the HCSD-MD Physicians. (See MAR attached as Exhibits 33-47.) The MAR was indicating the inconsistency in dispensation by the HCSD-MD Med Cart Nurses. The HCSD-MD Medical personnel were not doing the customary follow-up by reviewing what the MAR was clearly indicating to all the physicians and nurses who reviewed Plaintiff's MR. Plaintiff as previously noted in this complaint on the use of medically restricted leg irons, and for that reason at all times in this complaint, was easy to locate within the HCJ 1301 Facility. The use of leg irons prohibited Plaintiff from attending all jail activities except for the compelled clinic and court appearances. Even for the compelled appearances the HCSD-MD policy, procedure, program and plans provided that Plaintiff was to receive the seizure disorder medication. At no time during Plaintiff's incarceration from 2/22/95 to 7/12/96 is there a reason or excuse why the HCSD-MD Med Cart Nurses to not have dispensed to Plaintiff the daily prescribed A.M. and P.M. seizure disorder medications as provided under the SNTP for seizure disorders.

## (N) <u>DIAGNOSTIC TESTING SEIZURE DISORDER MEDICATIONS</u>

Pursuant to the SNTP the second distinct step for the HCSD-MD in the "short and long term goals" of keeping Plaintiff as seizure free as possible is the objective of the type and frequency of diagnostic testing to assure proper medication levels which is accomplished by blood tests of Plaintiff at intervals of three (3) months. In Plaintiff's particular case the drugs being tested for are Phenobarbital and Phenytoin (Dilantin). The blood test itself is a uniform procedure used in general medicine. A small amount of blood is drawn from Plaintiff and then tested for the Phenobarbital and Phenytoin (P/P) levels found in the sample. The tests are then reported in writing on a HCSD-MD Laboratory (lab) Results form under the Therapuetic Drugs column. The

normal ranges are numerically 15-40 for Phenobarbital and 10-20 for Phenytoin and are printed on the form near each respective drug. (See lab results attached as Exhibits 22-28) When lab technicians get a test result the numerical value is written on the provided line for each respective drug tested. Since the normal value ranges are printed adjacent to each respective therapuetic drug, the Lab Technician can tell at a glance whether the respective therapuetic drug level is low, normal, or high. Any value outside the normal range is commonly referred to as a "panic level" and is supposed to draw the attention of the attending physician. By keeping the P/P levels in the normal ranges then would in effect meet the SNTP goals of helping to keep Plaintiff as seizure free as possible.

**(0)** LAB RESULTS. 1) On 3/30/95, Lab Results #1571 and #1572 showed that Plaintiff's P/P levels were low enough for HCSD-MD Medical Director Dr. Mike Seale to make the 3/31/95 notation on the Lab form that states, "Refer (Plaintiff) to M.D. (medical doctor)." (See 3/30/95 Lab Results attached as Exhibit 22) Twelve (12) days later on 4/12/95, J. Fryer, W.C., set an appointment for Plaintiff for 4/19/95, per Dr. Seale's request and notes "(See Lab Form)" as the reason for the appointment. (See 4/12/95 MR entry attached as Exhibit 4) The 4/19/95 M.D. appointment was not kept by the HCSD-MD. On 4/14/95, Fryer set another appointment in place of the foregoing for 4/21/95 and this M.D. appointment was also not kept by the HCSD-MD, and in deliberate indifference to plainiff's serious medical needs, and in violation of the HCSD-MD prescribed SNTP for seizure disorders, the HCSD-MD completely dropped any further attempts at following-up on the Medical Directors orders to see that Plaintiff was medically interviewed by a HCSD-MD Physician for the low P/P levels. 2) On 6/2/95, and over two months after the first P/P levels, Lab Results #3128 and #3129 showed that Plaintiff's P/P levels were still low enough for Dr. Seale to make the 6/7/95 notation on the Lab form, "refer to M.D." (See 6/2/95 Lab Results attached as Exhibit 23) On 6/8/95, J. Lewis, W.C., set an appointment for Plaintiff to see an M.D. on 6/19/95. (See 6/8/95 MR entry attached as Exhibit 7) The 6/19/95 M.D. appointment was not kept by the HCSD-MD. On 6/13/95, J. Fryer, W.C. set an appointment for Plaintiff to see an M.D. on 6/20/95 at the request of Dr. Seale and cites, " (See Lab form)" as the reference for the M.D. appointment. (See 6/13/95 MR entry attached as Exhibit 8) The 6/20/95 M.D. appointment was not kept by the HCSD-MD in deliberate

indifference to Plaintiff's serious medical needs and in violation of the HCSD-MD prescribed SNTP for seizure disorders, the HCSD-MD completely dropped any further attempts to followup on the Medical Director's second order to have Plaintiff seen by a doctor for the low P/P levels. These Lab Results document that the HCSD-MD knew beyond a doubt that Plaintiff's seizure disorder medication levels had been in the low panic range for nearly three months and yet took no action to get Plaintiff to an M.D. 3) On 7/7/95, Lab Results #3128 and #3129 showed that Plaintiff's P/P levels were still low enough for Dr. Seale to make the 7/11/95 notation on the Lab Form, "Refer to M.D." (See 7/7/95 Lab Results attached as Exhibit 24) The Lab Form shows a handwritten notation by R. Washington, W.C., that an appointment had been scheduled for Plaintiff for 7/18/95, but failed to enter the reason of the appointment into Plaintiff's MR. Eleven (11) days later on 7/18/95, Washington was unable to relate to the M.D. who saw Plaintiff what the appointment was originally scheduled for. Plaintiff at this time was not privileged to any of his MR or Lab Results and so could not inform the M.D. of why Dr. Seales wanted the doctor to see the Plaintiff. There is no mention of the low P/P Lab Results documented in Plaintiff's MR that date. (See 7/18/95 MR entry attached as Exhibit 9) On 10/27/95 Lab Results #4938 and #4939 showed that Plaintiff's P/P levels were low enough for Dr. Seale to make the 10/30/95 notation on the Lab Form, "Refer to MD" (See 10/27/95 Lab Results attached as Exhibit 25) This is the fourth and last attempt by Medical Director Dr. Seale to have Plaintiff seen by a HCSD-MD Physician for the low P/P levels, which have now been documented as low for approximately eight (8) months. On 10/31/95, J. Fryer, W.C. set an M.D. appointment for Plaintiff at Dr. Seale's request for 11/3/95. (See 11/3/95 MR entry attached as Exhibit 12) On 11/3/95 J. Lewis, W.C. documents calling the Fifth Floor of the HCJ three (3) times to have Plaintiff brought to the 1301 Facility Clinic, but the HCSD Deputies would not bring Plaintiff to the clinic and so she reset the appointment to 11/6/95. (See 11/3/95 MR entry attached as Exhibit 12) 5) On 11/6/95 after four (4) attempts in eight (8) months the Plaintiff was interviewed by Defendant Dr. Luu for his low levels of the P/P seizure disorder medications. Plaintiff explained to Dr. Luu that he was not being dispensed a large part of the seizure disorder medications by the HCSD-MD Med Cart Nurses. Dr. Luu confirmed in the MAR that Plaintiff was telling the truth by looking at only one (1) page of the MAR. In an unethical attempt to breakthrough the

incompetency of the Med Cart Nurses, Dr. Luu nearly doubled the doses of seizure disorder medications. (See 11/6/95 MR entry attached as Exhibit 12) On 11/8/95 Dr. Luu ordered Lab Results #5132 to ascertain the P/P levels of the "double dose treatment technique." (See 11/8/95) Lab Results attached as Exhibit 26) Dr. Luu failed to take into consideration that at the time of the 11/6/95 prescription that the HCSD-MD had a policy, procedure, program or plan that filled "new" prescriptions after two (2) days. Thus the 12/8/95 Lab test came before the new double dose prescription had started. Dr. Luu nor Dr. Seale made any notations on the Lab form concerning the 11/8/95 Lab Results. 6) On 1/10/96 Lab Results #184, #185 showed that Plaintiff's P/P levels were low. Dr. Guice initials the Lab Results. (See 1/10/96 Lab Results attached as Exhibit 27) Dr. Guice notes the levels in Plaintiff's MR and orders a repeat test. (See 1/19/96 MR entry attached as Exhibit 18) Plaintiff was not interviewed by Dr. Guice on this matter of the consistently low P/P levels of Plaintiff. 7) On 1/30/96 Lab Results #540, #541 showed that Plaintiff's P/P levels were low and Dr. Guice initials the results but makes no entry into the Plaintiff's MR concerning the test. (See 1/30/96 Lab Results attached as Exhibit 28) Plaintiff's MR documents seven (7) blood tests taken to determine the proper P/P levels and all tests showed low results and outside the normal range. For approximately seven (7) months the Plaintiff's MR reflects that Medical Director Dr. Seale was ordering M.D. appointments for Plaintiff's serious medical condition. Through incompetence and negligence, the HCSD-MD Medical personnel assigned this duty failed to make the follow-up on Dr. Seale's orders. This deprivation of the doctor ordered appointments through deliberate indifference and callous disregard brought about the continuing unnecessary suffering, wanton infliction of pain and injury to Plaintiff through the continuing pattern and practice of the denial of adequate medical attention of the HCSD-MD Med Cart Nurses not consistently dispensing the prescribed seizure disorder medication. Had any of the many missed M.D. appointments been kept Plaintiff's deprivation of the prescribed medication could have come to light and thus a remedy to the problem could have been effected by the HCSD-MD.

(P) <u>ADJUSTMENT OF MODALITY</u>. The HCSD-MD was **not** monitoring the MAR nor following through with follow-up medical evaluations even when confronted with the lab result of the Diagnostic Testing that indicated Plaintiff's blood levels of P/P to be in the low

panic range for one year in Plaintiff's case and therefore there could **not** have been any "Adjustment of Treatment Modality" by the HCSD-MD.

- (Q) In all three major areas of the HCSD-MD SNTP for seizure disorders in Plaintiff's instant case, the HCSD-MD failed through incompetence, negligence and deliberate indifference to Plaintiff's serious medical needs to see that Plaintiff as a disabled person: (a) received the proper amount of seizure disorder medication at the proper time; (b) that proper diagnostic testing was performed on Plaintiff with the proper follow-up on any abnormal test results; and (c) and to make the necessary adjustment in Plaintiff's treatment modality once the low blood test results led to the conclusion that the HCSD-MD Med Cart Nurses were being derelict in their official medical duties. Plaintiff's MR documents daily seizure activity. (See MR entries 4/3/95 attached as Exhibit 3; 6/9/95 attached as Exhibit 8; 2/8/96 attached as Exhibit 19) Daily seizure activity can be directly contributable to the HCSD-MD not following the HCSD-MD SNTP for Seizure Disorders. The mental duress suffered and the physical pain and injury that has befallen Plaintiff by the HCSD-MD's failure to follow the SNTP from 2/22/95 to 7/12/96, was the proximate result of Defendants T. Thomas, Berry, Seale, Quinn, Trinh, Guice, Howard, Phi and Luu's egregious failure to follow the implemented steps and safeguards as provided for in the HCSD-MD SNTP for Seizure Disorders. This caused any and all excessive amounts of seizure activity for over one (1) year in the HCJ and was the proximate result of Defendant's T. Thomas, Berry, Seale, Quinn, Trinh, Guice, Phi and Luu's deliberate indifference to the serious medical needs of the Plaintiff amounting to the infliction of unnecessary pain and and suffereing that denied him due process, was cruel and unusual punishment and a denial of equal protection of the law that resulted in Plaintiff being in diminished mental and debilitative physical states of health for over one (1) year and during which time Plaintiff was compelled to stand federal trial in Cause No. H-95-201 on November 29, 1995, in said states of health; and all of the foregoing in violation of Plaintiff's federally protected rights as delineated in the succeeding paragraphs.
- (R) <u>HERPES MISDIAGNOSIS/DIABETES DIAGNOSIS</u> 1) On 2/22/95 when the Plaintiff was admitted to the HCJ he was initially interviewed by the HCSD-MD and referred to the LBJGH Urology Staff for Dysuria, Renal Calculi, and complaints of extreme back pain in Plaintiff's mid-back radiating to the groin. (See 2/22/95 MR entries attached as Exhibits 1,50,51)

After a deliberately indifferent interview by the LBJGH Urology Staff, Plaintiff was returned to the HCSD-MD, where complaints of physical pain and discomfort were treated with deliberate indifference. He was medically cleared to be indifferently housed by HCSD-JD Classification Section Deputies in Administrative cellblock 5B5-09. 2) On 3/8/95 the two-week physical examination was performed on Plaintiff and because Plaintiff had lost a large part of his vision, it is noted on the History and Examination Record that Plaintiff was having trouble with his vision and needed to see an Optometrist. (See 3/8/95 History attached as Exhibit 56) 3) The 3/30/95 Plaintiff's MR described that Plaintiff had sores and a skin rash that would not heal. (See 3/30/95 MR entry attached as Exhibit 2) It was also stated by Plaintiff that he was still having trouble with his vision this date. 4) The 4/3/95 Plaintiff's MR describes sores that won't heal; muscle aches; and chronic kidney stones. Dr. Guice, from a mere visual observation, diagnosed the unhealing open sores as "Herpes." Dr. Guice writes some prescriptions and ends the interview with no other follow-up orders for diagnostic testing to verify if the sores/rash was in fact Herpes. (See 4/3/95 MR entry attached as Exhibit 3) 5) The 4/14/95 Plaintiff's MR describes: "herpes getting worse; states sores worse and dysuria." Dr. Trinh notes: "Here for gential lesions, treated for herpes" and offers the second opinion based solely on visual observation, that the condition is a "probable chancroid." Dr. Trinh orders some medications and ends the interview with no follow-up orders for diagnostic testing to determine what these sores/rash of nearly a two (2) month duration are. (See 4/14/95 MR entry attached as Exhibit 5) The 4/19/95 Plaintiff's MR describes: "Groin lesion appears unchanged." Dr. Guice orders some medications but makes no other follow-up orders for diagnostic tests to determine what these sores/rash of two (2) months are. (See 4/19/95 MR entry attached as Exhibit 6) 6) On or about 8/15/95, Reverend Ronald Cloutier, HCSD Catholic Chaplain made his first attempt to obtain adequate medical attention for the Plaintiff with the HCSD-MD, due to the overall appearance of Plaintiff with sores that would not heal and a physical state that was indicative of declining health. The HCSD-MD did not heed his request for Plaintiff's MR is silent to any action taken on behalf of Plaintiff by the HCSD-MD that date. 7) The 8/28/95 Plaintiff's MR describes: "Swollen glands; states he has swollen glands for months; painful urination; left side of testicles swollen, reddish." The doctor notes: "swelling; dysuria" and orders some medications but makes no other follow-up orders for

diagnostic testing to determine the cause of the swollen glands, sores and dysuria, which has now been documented in the Plaintiff's MR for over half a year. (See 8/28/95 MR entry attached as Exhibit 10) The 9/26/95 Plaintiff's MR describes: "swollen testicles; open sores on scrotal sac; also nm. (numerous) open sores" and makes a third guess diagnosis that this condition is "epididimitis." The doctor prescribes some medications but makes no follow-up orders for diagnostic tests to determine what is causing the eight (8) month long condition of open sores that will not heal. (See 9/26/95 MR entry attached as Exhibit 11) 8) On or about 10/02/95, Rev. Ronald Cloutier made a second attempt to obtain treatment for Plaintiff's debilitated condition of open sores; loss of vision and other symptoms that needed immediate medical attention from the HCSD-MD. Rev. Cloutier was unsuccessful in getting the HCSD-MD to treat Plaintiff's serious medical needs, for Plaintiff's MR is silent this date to any medical help being forthcoming to the Plaintiff from the HCSD-MD that month. 9) The 11/27/95 Plaintiff's MR describes: "Kidney pain" which led to the 12/05/95 appointment with Dr. Guice who describes in Plaintiff's MR: "Kidney pain; kidney stones; overweight" and orders some medications and for the first time in nine months of complaints, orders a common urine test. (See 11/27/95 and 12/5/95 MR entries attached as Exhibit 14) The Plaintiff's MR indicates the Urine Test Results were returned to Dr. Guice on 12/7/95 with the glucose at 336, when the normal range was 60-110. (See 12/7/95 Lab Results attached as Exhibit 29) 10) The 12/7/95 Plaintiff's MR describes that Plaintiff was brought to the 1301 Facility Clinic based on the discovery of the high glucose level. Dr. Guice then had a common glucose test of a "finger stick" performed on Plaintiff which showed a high of 380 which is nearly three (3) times the normal level. Dr. Guice then told Plaintiff he was a diabetic and ordered some medications, other follow-up tests and a diabetic diet for Plaintiff. (See 12/7/95 MR entry attached as Exhibits 15,16) Subsequent treatment with diabetic medications resulted in the sores on Plaintiff's body disappearing, his glands became unswollen, part of his vision returned, the thirst for liquids and dysuria came under better control.

(S) TREATMENT OF DIABETES 1) On 12/7/95, Dr. Guice informed Plaintiff that the HCSD-MD would perform regular glucose testing on Plaintiff to monitor glucose levels in the Plaintiff's blood. From 12/7/95 to 7/12/96 only two such tests were performed. (See 12/8/95 glucose test attached as Exhibit 30 and 1/6/96 glucose test attached as Exhibit 31) 2) Dr. Guice

also informed Plaintiff that the HCSD- MD would see that Plaintiff was placed on a diabetic diet. On 12/19/95 Plaintiff's MR describes an interview with Ms. C. Nichols, R.D./L.D. wherin Plaintiff was placed on a diabetic diet. (See 12/19/95 MR entry attached as Exhibits 16,17) From 12/19/95 to 7/12/96 Plaintiff's diabetic diet was sporadically delivered to Administrative Segregation cellblock 5B5-01. Plaintiff was compelled by HCSD Deputies to accept a regular main line diet when his diabetic diet was not forthcoming to the fifth floor of the HCJ 1301 Facility. On 3/20/96 Plaintiff wrote a letter to Ms. Nichols seeking administrative relief in obtaining his ordered diabetic diet. There was no response to Plaintiff from Ms. Nichols office. 3) Plaintiff's attorney, Mr. Thomas Bevans, directed a 4/17/96 letter to U.S. Marshal, Al Solis with service copy to Sheriff Thommy Thomas. This letter addressed the overall continuing decline of Plaintiff's general health but was never answered by the HCSD-Administration. (See 4/17/96 Bevans letter attached as Exhibit 74) 4) On 6/4/96, in an interview at the 1301 Facility Clinic, Plaintiff stated to Medical Director, Dr. Mike Seale since the diagnosis of diabetes on 2/7/95 that subsequently a medically needed diabetic diet had been ordered but the full benefits of the diet had not been realized, as often diet trays were not delivered and/or scheduled sandwiches and milk were stolen by inmate floor workers and that the HCSD Deputies of the fifth floor of the HCJ 1301 Facility were apathetic and did not intervene in such thefts or provide proper supervision over meal distribution to the inmates housed in Administrative Segregation cellblock 5B5-01. Dr. Seale asked Plaintiff had a grievance been filed in the matter and Plaintiff produced the 3/20/96 letter directed to Ms. C. Nichols, R.D./L.D. and which was referenced "Dietary needs not being met by HCSD." Dr. Seale said that the Nichols letter (written two months prior) had as yet crossed his desk. Dr. Seale suggested to Plaintiff to file a grievance on the matter for the preparation and delivery of diets was beyond his control.

(T) The causative factors in Plaintiff's misdiagnosis of Herpes and the resultant suffering with uncontrolled diabetes for over nine (9) months are 1) The failure of the HCSD-MD to set and keep scheduled medical doctor appointments with Plaintiff; 2) The failure of the HCSD-MD to follow policy, program, procedure or plans in the treatment of open wounds and sores that will not heal as was in Plaintiff's case; 3) The failure of the HCSD-MD physicians of upon seeing the open sores/rash that would not heal that was accompanied by chronic swollen

glands to order diagnostic testing or to have referred Plaintiff to a hospital in the HCHD to determine the cause of these symptoms; 4) The failure of the HCSD-MD physicians to order any follow-up treatment for Plaintiff's disease of a nine (9) month duration, such as appointments to see if the chronic condition had come under control due to the effectiveness of their last medical orders and respective treatment plans; 5) The failure of the HCSD-MD physicians to adequately read Plaintiff's MR and note that the unhealed open sores had plagued Plaintiff for months and had been visually misdiagnosed three separate times (Herpes, Chancroids, Epiditimitis) and to thereby have ordered lab tests in a timely manner; 6) The failure of the HCSD-MD physicians, due to all the foregoing, to properly diagnose one of the most common diseases of diabetes, especially in the light of all the symptoms that were readily present and visible in Plaintiff's case, i.e, dysuria, excessive thirst, unhealed sores, and loss of vision; 7) The failure of Lyndon B. Johnson General Hospital to have given adequate medical attention to Plaintiff on 2/22/95 and the failure to have ordered follow-up appointments for examinations and tests as the Plaintiff had a readily indentifiable medical history of genitourinary and thyroid problems prior to 2/22/95.

This inadequate medical treatment by Defendants T. Thomas, Berry, Seale, Quinn, **(U)** Trinh, Chassay, Guice, Howard, Phi, Luu, and Wilson has resulted in that Plaintiff suffered mentally for nine (9) months thinking he had contracted an incurable social disease; and suffered the physical loss of vision and the painful covering of sores and the internal discomfort of swollen glands and organs for months due to the extensively long period of time that Plaintiff endured the uncontrolled disease of diabetes and as a result his vision did not completely return to normal and Plaintiff now walks with a cane due to poor circulation and resultant numbness to the lower legs. All of this pain, suffering and injury was the proximate result of Defendants T. Thomas, Berry, Seale, Quinn, Trinh, Chassay, Guice, Howard, Phi, Luu and Wilson's deliberate indifference to the serioius medical needs of the Plaintiff that denied him due process, was cruel and unusual punishment and a denial of equal protection of the law that resulted in Plaintiff being in diminished mental and debilitative states of health for over nine (9) months and during which time Plaintiff was compelled to stand federal trial in Cause No. H-95-201 on November 29, 1995, in said states of health; and all of the foregoing in violation of Plaintiff's federally protected rights delineated in the succeeding paragraphs.

## (V) <u>ADMINISTRATIVE REMEDY - MEDICATIONS AND MEDICAL</u> <u>ATTENTION</u>

Plaintiff, with the disability as a life long epileptic, was aware that the needed medications were not being properly dispensed to him by the HCSD-MD Med Cart Nurses. The Defendants documented into Plaintiff's MR a year long effort by the Plaintiff to verbally, through letters, family phone calls, personal intervention by a HCSD Catholic Chaplain, and by grievance procedures to seek from the HCSD both informal and formal administrative remedy and relief in efforts to obtain adequate medical care and specifically the serious medical need of receiving the much needed epilepsy medications as an accomodation to his disability at the proper time each day. These informal and formal attempts by the Plaintiff and others acting on his behalf are as follows: 1) On 3/12/95 Plaintiff was taken to the 1301 Facility Clinic where he informed Dr. Chassay that in the first twenty (20) days of incarceration in the HCJ that he had not been dispensed twenty-two separate A.M and P.M. doses of epilepsy medication by the Med Cart Nurses. (See 2/22/95 MAR attached as Exhibit 33) Dr. Chassay ordered a double dose (600mg.) of Dilantin be given to Plaintiff for a makeup remedy. (See 3/12/95 MR entry attached as Exhibit 2) Though the MAR substantuated Plaintiff's complaint of the twenty-two (22) missing doses, Dr. Chassay made no note in the MR, was not concerned about the potentially dangerous situation and with deliberate indifference to Plaintiff's serious medical needs, returned Plaintiff to Administrative Segregation Cellblock 5B5. 2) On 4/3/95 Plaintiff was taken to the 1301 Facility Clinic where he informed Dr. M. Guice that he had missed a lot of his epilepsy medication. Dr. Guice documented in the record "...8-9 day of meds x = 30 days." (See 4/3/95 MR entry attached as Exhibit 3) Dr. Guice had Plaintiff's MR before him and should have looked at the MAR of 2/22/95 (Exhibit 33) and he would have realized that in the first twenty-eight (28) days of the SNTP for Seizure Disorders that Plaintiff had not been dispensed thirty-four (34) separate doses of the A.M. and P.M. Seizure Disorder Medications by the Med Cart Nurses. Dr. Guice noted 8-9 days had been missed and then made no further entry into Plaintiff's MR about medical concerns to this deliberate indifference by the Med Cart Nurses to dispense prescribed Seizure Disorder Medications correctly. 3) On 6/1/95 and 6/13/95 Plaintiff complained to Nurse O'Quinn that he was not getting his Seizure Medications as ordered. (See Daily Segregation Rounds Record

attached as Exhibit 48) Plaintiff had been in the HCJ approximately one-hundred and eleven (111) days and the MAR for this period showed the nurses had failed to dispense to Plaintiff sixty (60) separate doses of the prescribed Seizure Disorder Medications. On 6/14/95 Nurse K. Howard, LVN, responding to Plaintiff's complaint to Nurse O'Quinn of 6/13/95 deliberately made a false entry into Plaintiff's MR that date that stated "Pt (patient) has received all doses of this med (medication)." It is clear that Nurse Howard was basing such a conclusion of the review of the MAR in Plaintiff's MR which indicated that there were sixty (60) of the missed doses of Seizure medication. (See 6/14/95 MR entry attached as Exhibit 9 and compare to MAR attached as Exhibits 33-38) Plaintiff's MR demonstrates that it is this same Nurse Howard that documented the 3/12/95 interview with Dr. Chassay (Exhibit 2). The interview where the "double dose" of Seizure Medications were given to Plaintiff to make up for the twenty-two (22) doses that were missed in the first twenty (20) days of incarceration. Nurse Howard's own documentation into the record of the 3/12/95 interview states awareness and knowledge of Plaintiff's problem in not receiving the proper amount of doses of seizure medication. The 6/14/95 entry signals an "at all cost" conspiracy to cover up any wrong doing or medical neglect by the HCSD-MD in the previous months. 4) On 6/8/95 and between the two complaints of Plaintiff to Nurse O'Quinn of 6/1/95 and 6/8/95, Plaintiff was interviewed by Nurse K. Howard wherein it was documented into the Plaintiff's MR that "meds (medications) being missed by Med Cart Nurse "and" missed meds medications." (See 6/8/95 MR entry attached as Exhibit 7) Nurse Howard felt on 6/8/95 that the problem was serious enough to warrant Plaintiff seeing a Medical Doctor and so requested in the 6/8/95 entry. Six (6) days later this is the same Nurse Howard who stated in Plaintiff's MR in reply to Plaintiff's complaints that "patient has received all doses of this medication." 5) On 6/9/95 Plaintiff's MR reflects he had a seizure and was carried by stretcher to the 1301 Facility Clinic where he was seen by W. Nelson, LVN. Nurse Nelson documented into the MR that Plaintiff was having seizure activity in Administrative Segregation due to not getting the prescribed Seizure Disorder Medications. Nurse Nelson referred Plaintiff to Defendant Dr. A. Phi to whom Plaintiff repeated the same complaint about not receiving all the epilepsy medications in a routine manner by the Med Cart Nurses. Dr. Phi stated that this was something he could not control and he sent Plaintiff back to Administrative Segregation without making any references to

the source of the complaint. Dr. Phi's entry into Plaintiff's MR is directly below Nurse Nelson's entry on the same page yet Dr. Phi's entry is void of any comment of the possible wrongdoing of the other HCSD-MD personnel. (See 6/9/95 MR entry attached as Exhibit 8) 6) On or about 8/15/95 Reverend Ronald Cloutier, HCSD Catholic Chaplain, and due to the overall appearance of Plaintiff that was indicative of declining health, personally interceded with the HCSD-MD to obtain adequate medical attention for the Plaintiff. HCSD-MD personnel did not heed his request, for Plaintiff's MR is silent as to any action taken on behalf of Plaintiff by the HCSD-MD this date. The MAR of Plaintiff's MR reflects on this date that Plaintiff had been deprived of ninety-six (96) separate doses of his ordered seizure medication by the HCSD-MD Med Cart Nurses. 7) On 8/23/95 Plaintiff sent a letter to the HCSD-MD Hospital Administrator that stated "...sent multiple requests..." some of which concerned his seizure disorder medications not being properly dispensed by the HCSD-MD nurses and "I have become increasingly ill while your department has been indifferent to my valid needs." Plaintiff at the time of this letter was being made to wear the medically restricted leg irons that had a crippling effect, was still untreated for the original kidney complaint, had been deprived of ninety - six (96) doses of epilepsy medications in a six month period, was covered in open sores that would not heal, and looked so physically deteriorated that a Catholic Chaplain was alarmed enough to make a personal trip to the 1301 Facility Clinic on Plaintiff's behalf to obtain adequate medical attention for his serious medical needs. All of which caused Plaintiff to write his first letter for assistance to the Hospital Administrator (Defendant Major M.W. Quinn). Plaintiff's letter was not answered by the Hospital Administrator. There is evidence that the 8/23/95 letter invoked the concern of Mr. John Goodejohn who answers grievances for the HCSD-MD Administration. 8) On 8/25/95 Mr. Goodejohn filled out a "Complaint Reply Form" (CRF) and placed it in Plaintiff's MR without giving Plaintiff a copy. (See 8/25/95 CRF attached as Exhibit 68) The CRF blatantly falsified the facts of Plaintiff's treatment by stating "Inmate has received care consistent to special needs treatment plan for seizure disorder..." signed by Mr. Goodejohn and most condemnably of all by HCSD-MD Medical Director Mike Seale who noted "Reviewed; agree with above" who also signed the CRF. On the date of Dr. Seale's agreement with Mr. Goodejohn that the SNTP for Plaintiff's seizure order had been met the Plaintiff's MAR in their respective possession for review

indicated there had been one-hundred (100) missed seizure medication dispensations in Plaintiff's case in one-hundred and eighty-three (183) days of incarceration. 9) On 9/20/95 Plaintiff having not received adequate medical attention by the HCSD-MD wrote a letter to U.S. Marshall Ray Bright which was made part of Plaintiff's MR. (See 9/20/95 Bright letter attached as Exhibit 69) The letter stated the ongoing pattern and practice of deliberate indifference to the serious medical need of Plaintiff and listed that Plaintiff had written seven (7) Inmate Requests and three (3) grievance letters to the HCSD-MD in the seven (7) months of his incarceration (2/22/95-9/20/95) and as to that date had not received adequate medical attention from the Defendant's. 10) On or about 10/2/95 Rev. Ron Cloutier, HCSD Catholic Chaplain made a second attempt to obtain adequate medical care, for Plaintiff's physical condition was visually growing worse. As with the first attempt on 8/15/95, he again failed to obtain the needed medical care for Plaintiff's serious medical needs from the HCSD-MD. 11) On 11/6/95, Plaintiff was taken to the 1301 Facility Clinic to be interviewed by Defendant Dr. Luu. Plaintiff had been called by Dr. Luu in reference to a lab test that showed Plaintiff's blood to have low levels of the needed Seizure Disorder medications Dilatin (phenytoin) and Phenobarbital. (See 10/27/95 Lab results attached as Exhibit 25) Plaintiff referred Dr. Luu to the MAR sheets in his MR that on that date indicated onehundred and twenty-two (122) missed doses of these prescribed medications. (See MAR attached as Exhibit 33-43) Dr. Luu reviewed the MAR and then noted in Plaintiff's MR that his "review (of) records pt. (patient) missed his med. (medications)." Dr. Luu stated to Plaintiff that he could not make the HCSD-MD nurses consistently deliver Plaintiff's medications because this was an area out of his control. In a dangerous and highly illegal and unethical patchwork medical treatment plan, Dr. Luu said that the only medical procedure he could utilize to overcome the negligent and incompetent Med Cart Nurses not consistently dispensing A.M. and P.M. seizure disorder medications was to double the daily doses and perhaps the extra over-medication process would make up for the missed medications. Dr. Luu then doubled the Phenobarbital to an A.M. and P.M. delivery and added and extra 200mg. of Dilantin in the P.M. to the existing 300mg. A.M. dosage. (See 11/6/95 MR entry attached as Exhibit 12) This practice was extremely dangerous for the Plaintiff then found himself at times overmedicated. Overmedication can, like undermedication, trigger seizure activity. With Dr. Luu's unethical treatment plan, Plaintiff found

himself on a "Roller-coaster ride" of under, normal, and overmedicated days that lasted from 11/6/95 to 7/12/96. 12) On or about 12/1/95, Plaintiff having been denied medical treatment by having missed six (6) doctors appointments at the HCSD-MD 1301 Facility Clinic (See medical records entries at: 4/12/95 attached as Exhibit 4; 4/14/95 attached as Exhibit 5; 6/19/95 attached as Exhibit 7; 6/20/95 attached as Exhibit 8; 11/3/95 attached as Exhibit 12; 12/01/95 attached as Exhibit 13) through incompetent scheduling and follow-up by HCSD-MD personnel then filed grievance #95-1083 against J. Lewis, W.C. (ward clerk), HCSD-MD, who in the presence of Plaintiff deliberately cancelled the 12/01/95 scheduled doctor's appointment and then misled the Plaintiff by saying that she would recall him to the 1301 Facility Clinic later that date to see the doctor. The recall appointment was not forthcoming and this was a deliberate pattern and practice of the HCSD MD of denying Plaintiff adequate medical care as demonstrated by the five (5) previous recall appointments of 4/12/95 thru 11/03/95 that also were not forthcoming as is documented in Plaintiff's MR. 13) On 3/13/96, U.S. Marshall Lisa Griffis sent a fax of a Government Memorandum to Major M.W. Quinn and Linda Parker, HCSD-MD, requesting them to look into complaints concerning Plaintiff's medications. (See 3/13/96 memorandum attached as Exhibit 70) Six (6) days later on 3/19/96 Plaintiff was seen by Dr. Guice who makes no entry in Plaintiff's MR about missed seizure disorder medications. (See 3/19/96 MR entry attached as Exhibit 21) The MAR in Plaintiff's MR indicated that one-hundred and eighty (180) separate doses of seizure disorder medications had been missed by the Med Cart Nurses in approximately one year. 14) On 4/15/96, in answer to Plaintiff's attorney's letter of 4/08/96, Major K.W. Berry directed a letter to Plaintiff's attorney that stated " This office will have an immediate review....medical needs.... if there is a need...make special arrangements.....due to medical reasons." (See 4/15/96 Berry letter attached as Exhibit 75) Service copy was sent to Major M. W. Quinn-Hospital Administrator, HCSD-MD. The Plaintiff's MR demonstrates the ill will and deliberate indifference of Berry and Quinn had towards the disabled Plaintiff and his serious medical needs in this systematic, arbitrary and capricious denial of medical attention, in that the next entry in Plaintiff's MR is 5/24/96, and that for a blood test wherein he did not see a HCSD-MD Physician. Had Major Berry or Major Quinn reviewed Plaintiff's MR on 4/15/96, as the Berry letter suggests, they would have found that the disabled Plaintiff was being made to wear

the medically restricted leg irons, that a number of M.D. appointments had been scheduled and not kept, and that the MAR indicated over one-hundred and eighty (180) missed doses of seizure disorder medication in Plaintiff's case. 15) On 4/17/96, Plaintiff's attorney sent a second letter to U.S. Marshal, Al Solis in support of his first letter of 4/08/95 citing Plaintiff's declining health and his epileptic condition. (See 4/8/96 and 4/17/96 Bevans letters attached as Exhibits 73, 74) Neither the U.S. Marshal's service nor the HCSD gave any kind of response of relief to Plaintiff's serious medical needs as a disabled person. 16) On 6/4/96, Plaintiff was taken to the 1301 Facility Clinic wherein the Plaintiff spoke at two separate interviews with Defendants Dr. M. Seale and Dr. A. Phi, concerning his low blood levels of Phenobarbital and Phenytoin. At each interview the Plaintiff showed both doctors in the MAR that he had missed about ninety (90) days and onehundred and eighty (180) doses of the seizure medications and not being able to consistently receive the seizure medications prescribed pursuant to the SNTP on seizure disorders was the probable cause for the blood tests to regularly show low levels of these medications. Dr. Seale nor Dr. Phi made any suggestions or offered any remedies how this medical problem of not receiving the prescribed seizure medications from the Med Cart Nurses could be solved. (See 6/4/96 affidavit attached as Exhibit 76) 17) The foregoing sixteen (16) references portray Plaintiff, and others acting on the behalf of Plaintiff, making persistent and reasonable efforts to obtain his needed seizure disorder medication for sixteen (16) months. It is remarkable that the Defendants themselves documented into Plaintiff's MR eleven (11) entries pertaining to where Plaintiff either spoke with HCSD-MD doctors and nurses; wrote letters; had administrative replies placed in the MR; or U. S. Marshal's sent fax messages. Outside the MR is Plaintiff's grievance #95-1083 and Plaintiff's attorney's two letters of 4/8/96 and 4/17/96 and the two personal attempts by Fr. Ron Cloutier. All these concerted efforts to break through the medical neglect and deliberate indifference to the serious medical needs of the Plaintiff by the HCSD-MD that resulted in the suffering and wanton infliction of pain and callous disregard for the health and well being of the Plaintiff.

## V. LEGAL CLAIMS

(A) The facts related above disclose a concerted and systematic effort by the Defendants and their agents to deprive Plaintiff of constitutionally guaranteed rights, privileges and immunities, including, but not limited to, those enumerated in the succeeding paragraphs;

#### VI.

#### FIRST CAUSE OF ACTION

**(A)** The Defendants T. Thomas, Berry and M. Thomas, and each of them, breached their legal duty, under color of law, that is owed to the Plaintiff, a disabled person, by unqualified and incompetent security personnel being allowed to work in the HCSD Classification Section and by the maintaining of inadequate security measures and prodecures to ensure that proper Classification and Medical Screening policy is followed in the intake process on new prisoners to the HCSD Jail Division, thereby subjecting Plaintiff, or causing him to be subjected to an unfit and dangerous living environment and conditions of confinement for seventeen (17) months in deliberate indifference to Plaintiff's serious medical needs as a disabled person in that the Defendants classified Plaintiff into Administrative Detention and made no accomodations for Plaintiff's mental and physical disabilities such as classification of Plaintiff to a hospital section and/or medical cellblock of the HCSD Jail Division. This deliberate indifference in the classification of the Plaintiff caused him needless mental duress, suffering, physical illness and wanton infliction of pain and injury in not being seen by proper mental health personnel, and resulted in extended and untreated depression; and by not being housed in a hospital section or medical cellblock having then to suffer excessive seizure activity; and the further denial of due process rights and discrimination against a disabled person by Plaintiff being compelled to stand criminal trial in the case styled, the United States vs. Robert Arthur Hall, Cause No. H-95-201, on November 29, 1995, in the Honorable Ewing Werlein's Federal District Court of the Southern District of Texas, while Plaintiff was in this diminished mental and debilitative state, in violation of his rights secured by the Fifth, Sixth, Eighth and Fourteenth Amendments to the United States Constitution, 42 United States Code, Section 1983 and 42 United States Code, Section 12132.

#### VП

### SECOND CAUSE OF ACTION

(B) The Defendant's, T. Thomas, Berry, Seale, Quinn, Trinh, Guice, Phi, Luu, and Wilson, and each of them, breached their legal duty, under color of law, owed the Plaintiff, a disabled peson, by deliberate indifference to his serious medical needs by subjecting Plaintiff, or causing him to be subjected to, needless mental duress, suffering, physical illness and wanton infliction of pain and injury by not adequately treating Plaintiff's chronic kidney disorder for seventeen (17) months which resulted in a critical diminishment of Plaintiff's overall physical and mental health amounting to a denial of equal protectio of the law and the further denial of due process rights and discrimination against a disabled person by Plaintiff being compelled to stand criminal trial in the case styled, the United States vs. Robert Arthur Hall, Cause No. H-95-201, on November 29, 1995, in the Honorable Ewing Werlein's Federal District Court of the Southern District of Texas, while Plaintiff was in this diminished mental and debilitative state, in violation of his rights secured by the Fifth, Sixth, Eighth and Fourteenth Amendments to the United States Constitution, 42 United States Code, Section 1983 and 42 United States Code, Section 12132.

### VIII

## THIRD CAUSE OF ACTION

(C) The Defendants, T. Thomas, Berry, Quinn, Seale, Trinh, Chassay, Guice, Howard, Phi and Luu, and each of them, breached their legal duty, under color of law, owed to Plaintiff, a disabled person, by deliberate indifference to his serious medical needs by subjecting Plaintiff, or causing him to be subjected to, needless mental duress, suffering, physical illness and wanton infliction of pain and injury by compelling Plaintiff to wear leg irons for fifteen (15) months and that said use of leg irons had been medically restricted due to Plaintiff's orthopedic disability. The use of leg irons by the Defendants prevented Plaintiff from the free exercise of his religion in not being able to attand religious services and the exercise of his due process rights in having meaningful access to the courts by not being able to attend law library periods and by further denial of due process rights and discrimination against a disabled person by Plaintiff being compelled to stand criminal trial in the case styled, the United States vs. Robert Arthur Hall,

Cause No. H-95-201, on November 29, 1995, in the Honorable Ewing Werlein's Federal District Court of the Southern District of Texas, while wearing the medically restricted leg irons in violation of Plaintiff's rights secured under the First, Fifth, Sixth and Fourteenth Amendments to the United States Constitution, 42 United States Code, Section 1983 and 42 United States Code, Section 12132.

#### IX

### FOURTH CAUSE OF ACTION

The Defendants, T. Thomas, Berry, Quinn, Seale, Trinh, Chassay, Guice, Howard, **(D)** Phi and Luu, and each of them, breached their legal duty, under color of law, owed to Plaintiff, a disabled person, by deliberate indifference to his serious medical needs by subjecting Plaintiff, or causing him to be subjected to, needless mental duress, suffering, physical illness and wanton infliction of pain and injury by not adequately following the established HCSD-MD Special Needs Treatment Plan for Seizure Disorders for seventeen (17) months which resulted in excessive seizure activity that the Plaintiff as a disabled person was forced to endure and which kept the Plaintiff in a disoriented, lethargic and depressed state during said seventeen months amounting to a denial of due process rights, cruel and unusual punishment, and equal protection of the law and the further denial of due process rights and discrimination of a disabled person by Plaintiff being compelled to stand trial in the case styled, the United States vs. Robert Arthur Hall, Cause No. H-95-201, on November 29, 1995, in the Honorable Ewing Werlein's Federal District Court of the Southern District of Texas, while Plaintiff was in this diminished mental and debilitative state, in violation of his rights secured by the Fifth, Sixth, Eighth and Fourteenth Amendments to the United States Constitution, 42 United States Code, Section 1983 and 42 United States Code, Section 12132.

## X

#### FIFTH CAUSE OF ACTION

(E) The Defendants, T. Thomas, Berry, Seale, Quinn, Trinh, Chassay, Guice, Howard, Phi, Luu and Wilson, and each of them, breached their legal duty, under color of law, owed to Plaintiff, a disabled person, by deliberate indifference to his serious medical needs by subjecting

Plaintiff, or causing him to be subjected to, needless mental duress, suffering, physical illness and wanton infliction of pain and injury by not rendering adequate medical treatment including diagnosing and performing follow-up diagnostic tests to correctly identify Plaintiff's out of control diabetes, which resulted in the partial loss of vision, having to use a cane when he walks and being kept in a diminished mental and physical state for ten (10) months amounting to a denial of due process rights, cruel and unusual punishment, and a denial of equal protection of the law and the further denial of due process rights and discrimination against a disabled person by Plaintiff being compelled to stand trial in the case styled, the United States vs. Robert Arthur Hall, Cause No. H-95-201, on November 29, 1995, in the Honorable Ewing Werlein's Federal District Court of the Southern District of Texas, while Plaintiff was in this diminished mental and debilitative state, in violation of his rights secured by the Fifth, Sixth, Eighth and Fourteenth Amendments to the United States Constitution, 42 United States Code, Section 1983 and 42 United States Code, Section 12132.

### XI

### RELIEF

WHEREFORE, Plaintiff prays that this Court enter a judgment granting him:

- (a) A Declaratory Judgment that the Defendants' acts, policies, practices, and omissions described and complained of herein violated Plaintiff's rights, privileges and immunities guaranteed under the Constitution, 42 United States Code, Section 1983 and 42 United States Code, Section 12132;
- (b) A Preliminary and Permanent Injunction and Restraining Order prohibiting the Defendants, their agents, employees and other persons in active concert with them, from punishing, threatening, harassing, intimidating, discrminating or retaliating against Plaintiff because Plaintiff filed this action, or against any person or persons that assist Plaintiff in prosecuting this action, or against any person or persons who offer evidence favorable to the Plaintiff in this action;
- (c) A Preliminary Injunction and Order that Plaintiff as a federal prisoner be placed in the immediate custody of the Sheriff of Montgomery County, Texas to be housed in the federal

holding facility of the Montgomery County Jail for protective custody purposes during the litigation of this civil complaint;

(d) Compensatory Damages in the amount of Fifty-Thousand Dollars (\$50,000.00) against Defendant Sheriff Tommy B. Thomas, in his individual capacity; a separate but equal amount against Defendant Major K.W. Berry in his individual capacity; a separate but equal amount against Deputy Marcorif Thomas in his individual capacity; a separate but equal amount against Defendant Dr. Mike Seale in his individual capacity; a separate but equal amount against Defendant Major M.W. Quinn in his individual capacity; a separate but equal amount against Defendant Dr. C. Trinh in his individual capacity; a separate but equal amount against Dr. D. Klein in his individual capacity; a separate but equal amount against Defendant Dr. Mark Chassay in his individual capacity; a separate but equal amount against Defendant Dr. M. Guice in his individual capacity; a separate but equal amount against Defendant Dr. A. Phi in his individual capacity; a separate but equal amount against Defendant Dr. A. Phi in his individual capacity; and a separate but equal amount against Defendant Dr. Kham Luu in his individual capacity; and a separate but equal amount against Defendant Dr. Pamela Wilson in her individual capacity;

Compensatory Damages in the amount of One Hundred and Fifty Thousand Dollars (\$150,000.00) against Defendant Sheriff Tommy B. Thomas in his official capacity; a separate but equal amount against Defendant Major K.W. Berry in his official capacity; a separate but equal amount against Deputy Marcorif Thomas in his official capacity; a separate but equal amount against Defendant Dr. Mike Seale in his official capacity; a separate but equal amount against Defendant Major M.W. Quinn in his official capacity; a separate but equal amount against Defendant Dr. C. Trinh in his official capacity; a separate but equal amount against Dr. D. Klein in his official capacity; a separate but equal amount against Defendant Dr. Mark Chassay in his official capacity; a separate but equal amount against Defendant Dr. M. Guice in his official capacity; a separate but equal amount against Defendant Dr. M. Guice in his official capacity; a separate but equal amount against Defendant Dr. A. Phi in his official capacity; a separate but equal amount against Defendant Dr. Kham Luu in his official capacity; and a separate but equal amount against Defendant Dr. Pamela Wilson in her official capacity;

For a total Compensatory Damage amount of Two Million Six Hundred Thousand Dollars (\$2,600,000.00) from the above named Defendants.

(e) Punitive Damages in the amount of Twenty Thousand Dollars (\$20,000.00) against Defendant Sheriff Tommy B. Thomas, in his individual capacity; a separate but equal amount against Defendant Major K.W. Berry in his individual capacity; a separate but equal amount against Deputy Marcorif Thomas in his individual capacity; a separate but equal amount against Defendant Dr. Mike Seale in his individual capacity; a separate but equal amount against Defendant Major M.W. Quinn in his individual capacity; a separate but equal amount against Defendant Dr. C. Trinh in his individual capacity; a separate but equal amount against Dr. D. Klein in his individual capacity; a separate but equal amount against Defendant Dr. Mark Chassay in his individual capacity; a separate but equal amount against Defendant Dr. M. Guice in his individual capacity; a separate but equal amount against Defendant Dr. A. Phi in his individual capacity; a separate but equal amount against Defendant Dr. A. Phi in his individual capacity; and a separate but equal amount against Defendant Dr. Kham Luu in his individual capacity; and a separate but equal amount against Defendant Dr. Pamela Wilson in her individual capacity;

Punitive Damages in the amount of Thirty Thousand Dollars (\$30,000.00) against Defendant Sheriff Tommy B. Thomas in his official capacity; a separate but equal amount against Defendant Major K.W. Berry in his official capacity; a separate but equal amount against Deputy Marcorif Thomas in his official capacity; a separate but equal amount against Defendant Dr. Mike Seale in his official capacity; a separate but equal amount against Defendant Major M.W. Quinn in his official capacity; a separate but equal amount against Defendant Dr. C. Trinh in his official capacity; a separate but equal amount against Defendant Dr. Mark Chassay in his official capacity; a separate but equal amount against Defendant Nurse K. Howard in her official capacity; a separate but equal amount against Defendant Dr. M. Guice in his official capacity; a separate but equal amount against Defendant Dr. A. Phi in his official capacity; a separate but equal amount against Defendant Dr. Kham Luu in his official capacity; and a separate but equal amount against Defendant Dr. Pamela Wilson in her official capacity;

For a total Punitive Damage amount of Six Hundred Fifty Thousand Dollars

(\$650,000.00);

- (f) Reasonable attorney fees from the Defendants to the Plaintiff under the Civil Rights Attorneys Fees Award Act of 1976 as codified in 42 United States Code, Section 1988 and United States code, Section 794(a);
- (g) Trial by jury on all issues triable by jury; Plaintiff costs of this suit and for other general and special relief as this court deems just, proper and equitable.

Signed this 18th day of March, 1998

Respectfully submitted,

Thomas J. Bevans

Attorney for Plaintiff

Federal ID #6624

16000 Memorial Drive, Suite 230

Houston, Texas 77079

Phone (281) 497-7701

Fax (281) 597-9483

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8041045	not help
	0: 135/88 P: 87 T: 98' States Sorres Worse
	& Minura - Ixam diferred - meds
	Ordered 4/3/95 & oney 2 pills lift
	a'alt in comport
	Pireler to mp - Whewand W. LEWIS, LVN
	Here be senital leaves treated for Lerges
	i Amelour x 9 dans Drelish of cx's, Ithe
	la drainage + pain.
	has avainage + parm.
	the land of the land of the second of the se
	- (t) chance - like leavin on base of penis (dine-size) painful, (8) (1) injunil adenopathy of prin
	paniful, (b) (c) injunit animoparty c pun
	120 0 1-11 de 1/10/
	Alp: Probable chancroid 4-14-95 1418 33923EES 400 QID XID A Ay noted LiParchemer LiParchem LUW
	- The following the first - Tarchen
	110 m + Du Low Low Low
4-149	(TRINK ())
12 20/8cg/	appl 4-21-95 d/u Thys/WC 3.FT I.i., WC
0 00/8-9	·
	diana anna
	NAME OF THE LAND
16 160 PPT 4 400	$\frac{015184}{914148}$
M-160 REV. 4/93	MILA SPN DATE OF BIRTH

PLAINTIFF'S EXHIBIT

DATE	
TIME LOCATION	$\mathcal{A}$
4.19.95	255 5'10" 97. 148/82 78 OSWII amy/ap
19:57	5. Need- Levothproise o Molien
804	r Nobarin Hor Not had
	Robaris resembed From bunbelle
	d: William Bring
	mildhrumy book
	Hvin le sion oppear unelongs
•	A. Men becom 2MISPain 340042
	fr D Lewoth proxime O. I my + rugel x 36l
	Renewoble
	2) Slamprofen 40 mg Fi pu BDD X 15 4 34064
	Fon Same @ 2015 mt/ 340644
	3) Millow onol 34048 mile mi
	750Mg T pe BDD x 10 days Fan -done oro 20
,	mer onthus my
<del> </del>	Khalid fro/95
	Madry 15/5
	M. CALDERA LVN
5-1-95	Wernel - Delante 300m Po Orn)
0830 X4	PB 30m PO DAN /X301
	34388 60m R Om / www.
5-1-95 Rx No	TASS CONTRACTOR OF THE PARTY OF
J. Gr	humin (Mayyen) 115
	Hall, Rollard
·	NAME 615184 9-4-48
M-160 REV. 4/93	SPN DATE OF BIRTH

ClibPDF - www.fastio.com

24

PLAINTIFF'S **EXHIBIT DATE TIME** LOCATION Bobby D. Davis, R.N. 353070 300~ 3530 M. Richie, LVN SCALE NAME SPN DATE OF BIRTH M-160 REV. 4/93

PLAINTIFF'S
EXHIBIT
8

DATE TIME

LOCATION	
6/9/95	S- "seizure"
0800/585	0-8P127/76 P66 R20
<del></del>	Pt. found sitting up on head & salarin and
	month pt. hunt to chic in stutch, A+OX3,
	PEAKL outed, pinortiens
	A-attin onfit
	P- when to MD - WM. HELSON, LYM
	July 1000
· · · · · · · · · · · · · · · · · · ·	D- Reportedly 55
. <u> </u>	Jet stath buc
	test all med,
<u> </u>	k not ofting
<u> </u>	57 freds/x 3d
<u> </u>	PE A C V V
<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	Dono-noepæl
	96 (1) 52 d (0: 25405
	- Systewie 0,1 m De 30d
	- Diffautie 300 - Dognited Deludach 30 bis 1x30
	Pleendeut 30 - Bis X300
	16 p 355410
	2 1 1 / Meno
	Kxwtd 6/2/45 0815 Delh
	Name of the Contract of the Co
6-13-95	cust 6-20-95 en Mr. Senles (Salabofam)
12:1955	Ahmelle Hall, Robert
	NAME 184 9/4/48
<b>1-160 REV</b> . 4/93	SPN DATE OF BIRTH

PLAINTIFF'S EXHIBIT

DATE TIME

ClibPDF - www.fastio.com

LOCATION	
(0-14-55	S. A CIO not recieving PB3Dil
505	O', of has recieved all
1355	dopped of this med
	D'aux mean Lout
	p' notré réachtréevaident
	K Hapard un
7-691	Kreneval - Lewothyrouni Dilmi RODD ?
1030 5/35	$\mathbf{I}$
	307 B BID - and
	Die (Pro livel )
	R WILKER, M.O
7/4/95	ex noted — Moderce wir
allo 565	
7/18/95	BIP 134/114 P94 W+278 -H45/1911
2122/5Bb	FR. WASHINGTON, WC W ON STROW
	reports dronie holls from for which
	Re regnests pain meds + a extre
-	
	Nolley.
	1. extra Mother ordered.
	- Moture Moo alo Pril X 15 d
· · · · · · · · · · · · · · · · · · ·	366228
	7-19-95 KYnoted Hillistales Mit 19
07/24/85	JSNA-menttu
2/20	methers/smical nail, Robert
5BS	WHE MAN 615180 9-4-49
M-160 REV. 4/93	SPN DATE OF BIRTH
	$\frac{1}{2}$

1010

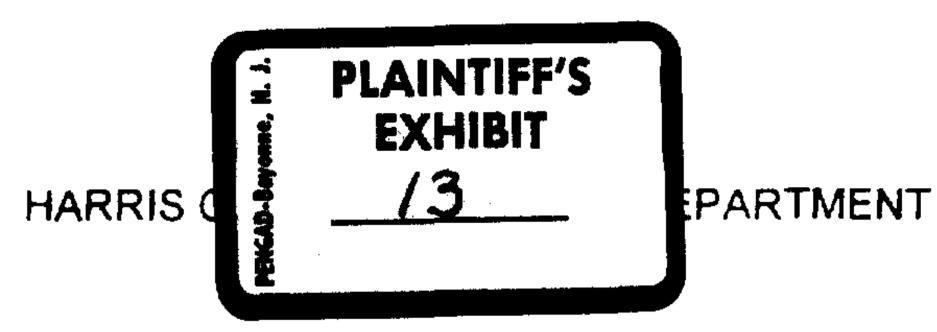
PLAINTIFF'S EXHIBIT DATE TIME LOCATION RX NOTED 8-1-95/12-15 Sparen S. RAMEY, LVN SPN

DATE 'IME	PLAINTIFF'S EXHIBIT  //
LOCATION 11364	Milwat man Sulfation
105	Devothyroune O. Ing 10 gd ?
5h	Alliante 300 mg por 0384392
	1965 3000 fu 319 1384247 13001
	R. H.
	Hotel Blom Phillip D1710
9.26-95	015- On apph this afternoon for
	re-evaluation - Hmart
Q 11 Q=	5/H 01 5 1111100 - 1271-1100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7267-5 5R5	265 5"91.0 127/92 Lewisk Works
19:44	Pt & mollen (2) testide, m. open
	ores on (5) scrotal sacily asom.
	open gores, perioral, notvidence of
	infection applar 2º modaus cal
	Alon-lidination
	Phonom DST 100810 X 300 384809
i/m	De Cion Oxychine 1000 po Chulder
<del>- 1, <u>-</u> , -</del> ,	Renoted 9-27-55 C. Koehler, LVN
	Jall Jobert
	NAME 184 9-4-48
M-160 REV. 4/93	SPN DATE OF BIRTH

1 PLAINTIFF'S
EXHIBIT
/2 HARRIS C PARTMENT

DATE

LOCATION	CLINIC NOTE
10/23/95	Rt remed - Delante 300m 10 QM 341704
0130533	PB 30my PO BID 391705 X30R
	34/10 Levothyman oung Po DD Java
	Pul/PB/ thypored Ponel Level (800)
	CX voim 10-2345/1322
	Mr. S. RAMEY, LVN
10-31-95	aut 11-3-95 sen De Seel See John Jam)
2:45/535	AMILIC JACKIE FRYER, W.C.
11-3-95	Called 3x noshow RSD 11-6-95 J. Leush
11-10-95	7984 BIP 149 190 PBOWX 259 510"
101/5BS	Wahnte
	It was cont bere become
	Dilantin 4.59 and phenohactice 3.73.
<del></del>	Blood level 10/27/05. Rousew
	recorde pt missed his med
	204 rafizaran 2 doises ne 12+ mo
<del></del>	Complaint
	EX A/P
	Deizur · Milantin 300m ad and
	Thoubarhored 35 min Syntherapeur
	Subthe winner:
	395403 (Para Dilanhin 300m aan 1 700mapa
	345+04 7 Shew Maihitel 30 1 2/26, p=min
	V Dilantin (avil × 11/13/11)
	Re vor ed 71-7-91/1220 ((U)
···	S. RAMEY, LVN
	NAME 615124 9-4-48
M-5 (6/95)	SPN DATE OF BIRTH



DATE TIME **CLINIC NOTE** LOCATION 1 no show was DD+. Openina 5B5 MEDICAL RECURSE NAME

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**SPN** 

DATE OF BIRTH

PLAINTIFF'S
EXHIBIT

4

DATE **IME** LOCATION change L'PARCHEM, LVN 14 of Kidney SY M-160 REV. 4/93 DATE OF BIRTH



DATE TIME **CLINIC NOTE** LOCATION NAME

SPN

DATE OF BIRTH



DATE TIME **CLINIC NOTE** LOCATION **3** u 2/11/95 1 0 AM rome 128-2016 am = 189 ('Mronge 185 - 242 à avre = 2017 NTOTMAT étitiques note W. 510" Ain DBW range = 182 las I 107, 14270 DBW. 21 NiDOM - Neds withou 3/Cal needson netters = BEEX1.3-500028= 2417 Cas May 615184

NKNA

DATE OF BIRTH



DATE TIME LOCATION

12/19/55	Dietitians note costs
1505m	A:4) Curent House DB diete aporox, 2000cal play
565	P' Reu add I Even mach sand should love
	agnet 1 h lbs. / week
	2) Pt, your DB educational literature -
	Cuillos uslavia maino pono
	C. NICHOLO, M.D. Smith, of
,71 gr	7/2/11/95 10/1
12/20/9	Henewa. 4012 Solvale
1916	Levothelloline O. Inc mo ind 1300
535	745
	115
20/05/96	WFSHlunarer BIN I 0310+ 150
2215	hom 01/16-09/15 FS noted 1-6-96 2230 Mithilla
5B5	as MDapp't three me on UI/10/15
410925	3 Shopeque × 10 mg. To BID × 300, Penewske And Lower one
410926	3) Vilantin 100mg - Tit pul Sound 9 Am A
	Trpu(200mg) g PM x 30 de. Penewable.
4 10927	
46	
R+ M/M	1965; Serum Phenyton + Thenobouchtal line
C FINNEY,	on 01/20 (96 (1 me)
	2 M Lyane Emy
1-5-96	apple will De Buce 1-10-96 Meleusaper Malles
ME 1535/535	
2235	Hall Robert
	NAME (2/5)(2)(9/2)(1/9)
M-160 REV. 4/93	SPN DATE OF BIRTH
0	

PLAINTIFF'S
EXHIBIT

/8
PARTMENT

DATE	
TIME LOCATION	5/4 CLINIC NOTE Dasiter Kn
1-10-96	264 5'0" 97.5 18688 J. Lewis/E J. Lewis/E
<u>565</u>	5. Mil Dapresser
17:34	U. FJHuira 01/67-09/96
	Am norm 92.97 à ant 95
	PM roma 68-132 à voir 109
	N- fored deficils
	Dia Excellent ment with NITOM
	E diet tordouvet
	Pru RTC pur C
	¿ (ortanie med)
	I Toffwire non
1-1996	Krement - Lewothyroine O. Ing B DD x 30l
0820 JB	1441 Mess
	pr noted i-14.90/1218 M
	S. RAMEY, LVN
1119196	I B+ Phenyloun levels = 872 + 4.32 regrettinely
2220	P. Wheet levels on 01/23/56/1m
5B5	11,77Af merenn
2-1-96	Renewal - Colipside VI 10m (BB10) - Tevoren
0930 935	Delante 1300m Po GAM
	417188 2 won porm 1430d
	PB 60mg RO BIO 41-1100
	* Watch For Compliance * Printer, 11
	The State of the s
	FITZGERALD, T LW
	Hall Robert
	NAME ) 615134 904/48
www fastio com	SPN DATE OF BIRTH

PLAINTIFF'S EXHIBIT HARRIS CO ARTMENT

DATE	
TIME	
TOCA	TTONE

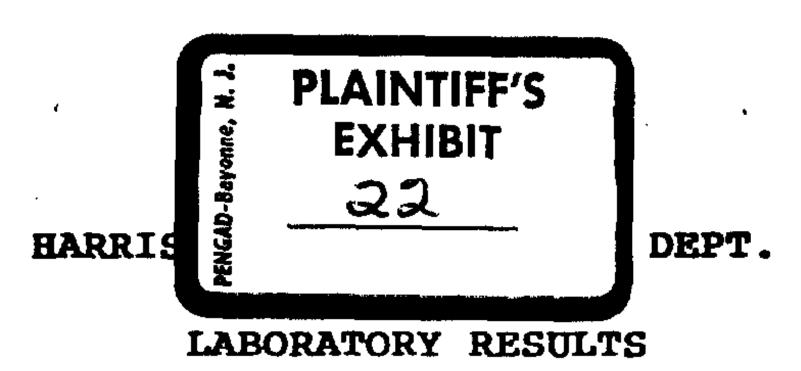
LOCATION	CLINIC NOTE
2-8-96	wt. 2691/2 19/82 T973 P78 R 20 HL(Stated) 5'10"
07:10/5B51	m Colu Lin M. Richie, LVN
	S. 47 40. W/M The Sergue D/O-
	had pherobents i delain lembs cheeked in 1/2018
	to check compliance to meds. Leat cerem achili.
	Grand-mal-5mths ago, but pebbe mal- almost golang
	D-AA+0×3- afebrile-
	HENT PERRIA Cardin 222- Resp. BRS CTA
	Abd & kneler- G1- & pathology.
<u></u>	Dilanto level 5.6
	Them bouts 1 end 11.6 / 1/30/96.
	A- Druge leus 1
	P & Continue meds as ordered - and
	Observe for compliance
	Q RTC SRN.
	Ville Johnen Rn Frit
	No mobile
	a- high deser of
	2 ontrouvels of already 75
	No D's for no
	Hall Cohert
	NAME 6:5184 9-4-48
M-5 (6/95)	SPN DATE OF BIRTH

PLAINTIFF'S
EXHIBIT
HARRIS CO
ARTMENT

DATE	HARRIS CO
TIME LOCATION	CLINIC NOTE
2/16/96	Remail - Lewothywan Dily R Op x 30. 1 - Zum
J630 575	
	KK what Fanch Theorethat, 1900
·	Q-1071 140 FITZGERALD, T. LVN
2/29/96	14 remail - Glympide XL 10mg 10 B.D X 30 of 42559
0945 5 85	Dilanti / 300 m B OAn
	425592 (200m B Opn ) x30d
	PB 60m, BB1D 425593
	15
2/29/96	Rx Noted — MSpence un
810 SBS	
3-14-96	Rt removal - Lewolthywar 0,1 p B Op X30l
UN 35 5/36	Then I have
W. Matel	My 1995, Mills (800)
int//	5-14-13-4-5
3-18-96	APPT MADE C Dr. GUICE ON 3-19-96/ ROTHWISTON WC
	Hall Robert
	Hall Robert  NAME  NIST 84 9-4-48
	SPN DATE OF BIRTH

	<u> </u>
	## PLAINTIFF'S  EXHIBIT  HARRIS CO 2 2/ ARTMENT
DATE	TARRIS COLLAR MARINENT
TIME	5/4 CLINIC NOTE FUTERIL S
3-19-96	218 5'0" 96,3 122/83 72 S.Lewis/
5B5	melbeher until renleman 05/17/96
21:12	cc=burning c2 feel
	Rédos hille.
	Phosphoraise buen to a will
	Chimic poor circulation
	Colium deposit til domer les
	Request come ha réjusation
	Det of bil of ochilles ander
	restour - 1975
	D'ibre Lucles Srans
	A'. Of in Neuropolly a multiple in Jaquine
	P. Och (Smi)
	Amtiptyline 25 mg. The (5 cmg)  Gran & 30 days Rinewolks
	(). 1 ) ( out ) !
<u>, , , , , , , , , , , , , , , , , , , </u>	
	Hall, Robert NAME
	615194 9-4-45
M-5 (6/95)	SPN DATE OF BIRTH

34



15711572

/		LAB#:	B#:	
NAME: +A1/ Kaber	<u>t</u>	DATE:	3-30-95	
SPN#: 615184	_ 8C4	TIME:		
LOCATION:		DOCTOR:	-A/5	
fas	tingra	ndon	_14 Day PA	
STD/OB PANEL	THERAPEUTIC DRUG	CHEMI	ISTRIES	
RPR:	CARBAMAZEPINE:	AMYLASE		
GC SMEAR:	4-10	30-170		
GC CULTURE:	PHENOBARBITAL S	65-11		
CHLAMYDIA:	PHENYTOIN: 5.4	25/20/		
BHCG:	10-20	1/2/1	<u> </u>	
RUBELLA IgG:	THEOPHYLLINE:	3/3(1) Defin	-40 m	
TOXO IgG:			15m	
	<del>-</del>			
HEPATITIS SURVEY		UA MICE	ROSCOPIC	
	•	Sp. Gravity(1.025		
HEPATITIS A ACUTE IgM:		рн (6.0):		
HEPATITIS A VIRAL TOTAL AB:				
HEPATITIS B SURFACE ANTIGEN:	RECEIVE	O Protein:		
HEPATITIS B CORE IgG:	APR 1 2 1995	Glucose:		
HEPATITIS B SURFACE ANTIBODY:	·	Ketone:	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
HEPATITIS C ANTIBODY:		Bilirubin:	·	
HETERITATIO C WHITTHOUT.	<del></del>	Blood:	· · · · · · · · · · · · · · · · · · ·	
		Nitrite:		
MICROBIOLOGY source:		Urobilinogen:		
STREP A:		Leukocytes:		
AMPICILLIN: PENICIL	LIN:	WBC:	/HPF	
CEPHALOTHIN: TETRACY	CLINE:	RBC:	/HPF	
ERYTHROMYCIN: TRIMETHO	, į			
NITROFURANTOIN:SULFAME!	THOXAZOLE	CRYSTALS:	40	
	]	EPITHELIAL CELLS:	/HPF	

H155 (2/91)

	3128
LAB#	3129
DATE:	7-7-95
TIME:	
DOCTOR:_	52A/S
	14 Day PA

	TRANSUL S	3129
NAME: HALL COBER	<u>*</u>	DATE: 7-7-95
SPN#: 6/5/84	RECEIVE	TIME: DOCTOR: SAA
fas	JUL 12 1995 tandon	14 Day PA
STD/OB PANEL	THERAPEUTIC DRUGS	CHEMISTRIES
RPR:	CARBAMAZEPINE:	AMYLASE:
GC SMEAR:	4-10	30-170
GC CULTURE:	PHENOBARBITAL 7.26	GLUCOSE:65-115
CHLAMYDIA:	PHENYTOIN: $2.57$	De /ml.
BHCG:	10-20	
RUBELLA IgG:	THEOPHYLLINE:	- 11/55 to W.
TOXO IgG:	APP 09 1348 HIII	my pe Jus
HEPATITIS SURVEY		UA MICROSCOPIC
HEPATITIS A ACUTE IgM:	Sı	p. Gravity(1.025):
HEPATITIS A VIRAL TOTAL AB:	pl	H (6.0):
HEPATITIS B SURFACE ANTIGEN:	P	rotein:
	G.	Lucose:
HEPATITIS B CORE IGG:	Ke	etone:
HEPATITIS B SURFACE ANTIBODY:		ilirubin:
HEPATITIS C ANTIBODY:		lood:
······································	N	itrite:
MICROBIOLOGY source:	Uı	obilinogen:
STREP A:	Le	ukocytes:
AMPICILLIN: PENICI:	LLIN:WE	BC:/HPF
CEPHALOTHIN: TETRAC		BC:
ERYTHROMYCIN: TRIMETI	HOPRIM:BA	CTERIA:

SULFAMETHOXAZOLE

NITROFURANTOIN: 155 (2/91)

CRYSTALS: EPITHELIAL CELLS:

### HARRIS COUNTY SHERIFF'S DEPARTMENT DETENTION BUREAU MEDICAL DIVISION

1. Hall Robert , SPN. Number 6/5/89
Date of Birth $\frac{5-4-49}{}$ hereby authorize
the Medical Division of the Harris County Sheriff's Depart-
ment to release copies of medical records as requested or
upon transfer to medical or other Detention facilities for
the purpose of determining medical needs or continuity of
care.
I may revoke this consent at any time except to the extent
that action has been taken in reliance there on.
3/8/95.
Inmate Signature Date
Der'u





	ABORATORY RESULTS	LAB#:	2565 2566 6-2-95-
SPN#:	·	TIME: DOCTOR: random	S-A/w  14 Day 1
STD/OB PANEL	THERAPEUTIC DRI	<b>UGS</b>	CHEMISTRIES
RPR:	CARBAMAZEPINE:	in a la comunicación de la comun	MYLASE: 30-170
GC SMEAR:GC CULTURE:	~PHENOBARBITAL:	9.24/ml, G	LUCOSE:
CHLAMYDIA:	PHENYTOIN:	3.1 ml.	
BHCG:	10-20 THEOPHYLLINE:		7/55 m
RUBELLA IgG:	8-20		Je do
TOXO IgG:	<del></del>		TWO I
HEPATITIS SURVEY		<u>a</u>	A MICROSCOPIC
HEPATITIS A ACUTE IGM:	·	Sp. Gravity	(1.025):
HEPATITIS A VIRAL TOTAL AB:	, '	pH (6.0):	<del></del>
HEPATITIS B SURFACE ANTIGEN:_	·	Protein:	<del></del>
HEPATITIS B CORE IgG:	<del></del>	Glucose: Ketone:	·
HEPATITIS B SURFACE ANTIBODY:		Bilirubin:	<del></del>
HEPATITIS C ANTIBODY:		Blood:	`
	<del></del>	Nitrite:	*
MICROBIOLOGY source:	<del></del>	Urobilinogen	l <b>:</b>
STREP A:		Leukocytes:_	
AMPICILLIN: PENIC:	ILLIN:	WBC:	<b>.</b>
			/H
CEPHALOTHIN: TETRAC	CYCLINE:	RBC:	
ERYTHROMYCIN: TRIMET	CYCLINE: THOPRIM: METHOXAZOLE	RBC:BACTERIA:	/H?



### HARRIS COUNTY SHERIFF'S DEPARTMENT Medical Division

4938 4939

### LABORATORY RESULTS

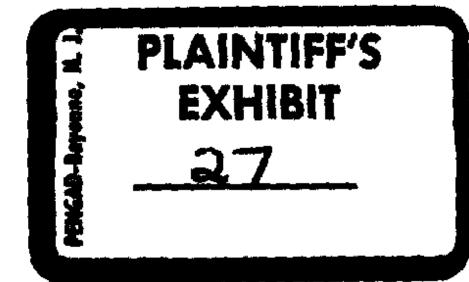
		LADOIGIO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\ □ #·
DATE: 10-27	2-95			·	\B #:
TIME:	<del>,</del>				<i>1</i>
LOCATION: 58	<u>-</u>			PHYSICIAN:	521/0
	Fasting	Random	14 C	Day HA	
STD/OB PANEL		THERAPEUTIC C	RUGS	CHEMISTRIE	<u>E</u> S
RPR:	CARE	AMAZEPINE (10-20	):	AMYLA	SE (30-170):
CHLAMYDIA:	PHEN	IOBARBITAL (15-40	): 4.89	July SLUCI	OSE (65-115):
BHCG:	PHEN	NYTOIN (10-20):	3.77	Jef ml-	
RUBELLA IgG:		PHYLLINE (8-20):_		•	
TOXO IgG:	<del></del>	• 		STREP	A:
HEPATITIS SURVEY					
HEPATITIS A ACUTE	lgM:	·	HEPATITI	S A VIRAL TOT	AL AB:
HEPATITIS B SURFA	CE ANTIGEN:		HEPATITI	S B CORE IgG:	
HEPATITIS B SURFA	CE ANTIBODY:_		HEPATITI	S C ANTIBODY	
UA MICROSCOPIC					0/m2/55
Sp. Gravity (1.025):		WE	3C:	/HPF	101 Jen
pH (6.0):		RB	C:	/HPF	1 July
Protein:	,	Bac	teria:		
Glucose:	<del></del>	Сгу	stals:		
Ketone:		Epit	helial Cells:	/HPF	
Bilirubin:					
Blood:					
Nitrite:				HAIL	Robert
Urobilinogen:	<del></del>		N	AME	
Leukocytes:			SI	Co / 5 /	DATE OF BIRTH

M-1 (6/95)

PLAINTIFF'S EXHIBIT

### HARRIS COUNTY SHERIFF'S DEPARTMENT Medical Division

	LABORATORY RESULTS	5132
DATE: 11-08-9		* · <del></del>
TIME:		
LOCATION:585	PHYSICIAN:	<u>Luu</u>
Fa	asting Random 14 Day HA	·
STD/OB PANEL	THERAPEUTIC DRUGS CHEMISTRIES	
RPR:	CARBAMAZEPINE (10-20): AMYLASE	(30-170):
CHLAMYDIA:	PHENOBARBITAL (15-40): 5-9/ MOLUCOSE  PHENYTOIN (10-20): 1-93 Mg/m/	E (65-115):
BHCG:	PHENYTOIN (10-20): 1:93 Mg/m/	
RUBELLA IgG:		
TOXO lgG:	_ STREP A :	<del></del>
HEPATITIS SURVEY		
HEPATITIS A ACUTE IgM	1: HEPATITIS A VIRAL TOTAL	AB:
HEPATITIS B SURFACE	ANTIGEN: HEPATITIS B CORE IgG:	
HEPATITIS B SURFACE	ANTIBODY: HEPATITIS C ANTIBODY:	
	·M	EDICAL RECORDS
UA MICROSCOPIC		VOV 1 0 1995
Sp. Gravity (1.025):	/HPF	
pH (6.0):	RBC:/HPF	
Protein:	Bacteria:	
Glucose:	Crystals:	
Ketone:	Epithelial Cells:/HPF	
Bilirubin:		
Blood:	**************************************	
Nitrite:	fall.	Robert
Jrobilinogen:	NAME	
_eukocvtes:	SPN	DATE OF BIRTH



### HARRIS COUNTY SHERIFF'S DEPARTMENT Medical Division

184

	_		LABORATORY RE	ESULTS	LAB#:	185
	DATE: 0 - 10	) - 96			LAD #	<del></del>
	TIME:	-				
	LOCATION: 5B5			PHYS	SICIAN:	<u>nice</u>
		Fasting	Random	_ 14 Day HA	·	
	STD/OB PANEL		THERAPEUTIC DRUG	S CHEN	AISTRIES	
	RPR:	CARBAN	MAZEPINE (10-20):		AMYLASE (30-17	•
1	CHLAMYDIA:	PHENOI	BARBITAL (15-40):	7.72 Mill	GLUCOSE (65-1	15):
	BHCG:	CPHENY	TOIN (10-20):	32 Maln	N	
	RUBELLA IgG:	THEOP	HYLLINE (8-20):			
	TOXO lgG:	<del></del>		•	STREP A :	<del></del>
	HEPATITIS SURVEY					
	HEPATITIS A ACUTE	IgM:	HEF	PATITIS A VIRA	AL TOTAL AB:	
	HEPATITIS B SURFAC	CE ANTIGEN:			RE IgG:	
	HEPATITIS B SURFAC				IBODY:	
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	UA MICROSCOPIC					
	Sp. Gravity (1.025):		WBC:	/	/HPF	
	pH (6.0):		RBC:	/1	HPF	
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	Glucose:	-	Crystals:_			
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	Bilirubin:	<del></del>				
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	Leukocytes:	,— <u> </u>	20-1	SPN	<u>94</u>	DATE OF BIRTH

## PLAINTIFF'S EXHIBIT

### HARRIS COUNTY SHERIFF'S DEPARTMENT Medical Division

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	LABORATORY RESULTS	041
DATE: 01-30-9	LAB #:	; <del></del>
TIME:		
LOCATION: SB	PHYSICIAN: TWO	2
Fas	sting Random 14 Day HA	
STD/OB PANEL	THERAPEUTIC DRUGS CHEMISTRIES	
RPR:	CARBAMAZEPINE (10-20): / AMYLASE (30-170):	
CHLAMYDIA:	PHENOBARBITAL (15-40): 1 6 1 GLUCOSE (65-115):	· <del></del> -
BHCG:	PHENYTOIN (10-20): 5-65 Mg/ind.	
RUBELLA IgG:	THEOPHYLLINE (8-20):	
TOXO IgG:	STREP A :	<del></del>
HEPATITIS SURVEY		
HEPATITIS A ACUTE IgM:	HEPATITIS A VIRAL TOTAL AB:	<del></del>
HEPATITIS B SURFACE AI	NTIGEN: HEPATITIS B CORE IgG:	<del></del>
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UA MICROSCOPIC		
Sp. Gravity (1.025):		
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Protein:	Bacteria:	
Glucose:	Crystals:	
Ketone:		
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Blood:		<del></del>
Nitrite:	Lesets Robert Hal	
Urobilinogen:	- NAME - 615/84	
Leukocytes:	SPN DATE	OF BIRTH

1 (6/05)

### PLAINTIFF'S EXHIBIT

HJ403033-6 PAGE (5743/ DAMON/METWEST a CORNING Clinical Laboratory 8300 Esters Blvd. Suite 900 615184 HALL, ROBERT 75063-2201 Irving, Texas 03790358-0 M Fst NG Harris County Jail 1310 Franklin 89080 GUICE F.O. 0322321 Final Rep 12/06/95, Houston, TX 77002-0000 Basic Chem: Glucose mg/dL 60-110 Uric Acid mg/dL 3.8-8.7 3.9 8-22 BUN mg/dL 0.5 - 1.7mg/dL Creatinine 0.8 mEq/L 135-145 141 Sodium 3.5-5.3 mEq/L Potassium 94-108 Chloride 104 mEq/L mg/dL 8.5-10.7 Calcium **9.**6 mg/dL 2.5-4.6 Inorg. Phosphorus 3.3 Total Protein 6.4-8.4 7.7 gm/dL 3.0-5.5 Albumin 4.4 g/dL 1.9-4.0 Globulin 3.3 gm/dL A/G Ratio 1.3 1.1-2.3 Total Bilirubin 0.8 mg/dL 0.3-1.6 82 <136 Alk. Phosphatase U/L SGOT (AST) 32 U/L **(49** SGPT (ALT) U/L 44 452 GGT 146 H U/L **466** LD (LDH) U/L 157 ⟨231 Iron 129 ug/dL 45-180 Thislynnaid

Triglycerides	289 H	mg/dL	0-150
Cholesterol	176	mg/dL	120-199
CEC wDiff:			
WEC	5.6	K/uL	3.9-10.6
RBC	5.02	M/uL	4.5-5.9
Hgb	16.1	gm/dL	13.5-17.5
Het	44.9	×	40.0-52.0
MCV	90	fL	80-101
MCH	MEDICAL RECORDS 32	рg	27-34
MCHC	MEDITURE MEDITING 36	gm/dL	31-36
RDW	12.4	<del></del>	11.5-14.5
MPV	DEC U U DES 9.0	fL	7.4-10.4
Platelets	155	K/uL	150-450
Neutrophils	54.1	*	46.0-77.0
Lymphocytes	35.3	×	16.0-43.0
Monocytes	€.4	*	0.0-10.0
Eosinophils	3.2	*	0.0-6.0
Basophils	1.0	<b>%</b>	0.0-2.0
Neutrophils-Abs.	2.90	K/uL	1.8-7.3
Lymphocytes-Abs.	2.00	K/uL	1.2-4.0
Monocytes-Abs.	0.40	K/uL	0.00-0.95
Eosinophils-Abs.	0.20	K/uL	0.00-0.35
Basophils-Abs.	0.10	K/uL	0.00-0.15

Tests Ordered: BC+CBC

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End of Report ( HALL, ROBERT - 03790358-0

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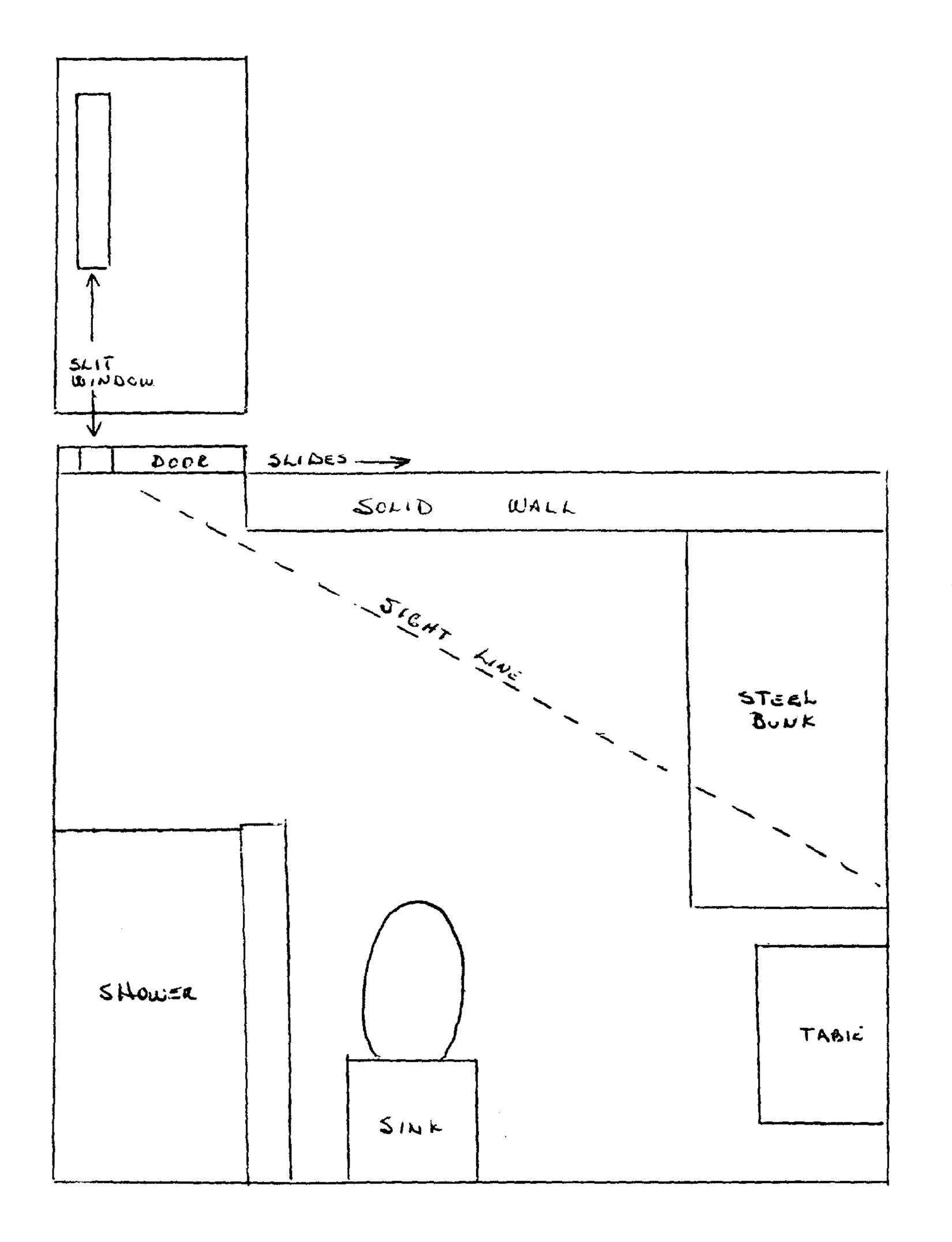
### HARRIS COUNTY SHERIFF'S DEPARTMENT GLUCOSE TESTING / INSULIN ADMINISTRATION RECORD

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Case 4:97-cv-00874 Document 1 Filed in TXSD on 03/18/97 Page 73 of 129

PERCENTIFF'S EXHIBIT 32

HARRIS COUNTY JAIL CEIL 5B5-01 OVERVIEW



Call is fitted with Willo Sliding Solid Security Door with 5" Slit Security Window, which is only way Deputies can observe inmate. The drawback of the design is blindspot created by wall. Sick, injured or inmate having serzure could not be seen if he is laying on bunk or into that part of Call.

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HARRIS COUNTY SHERIFF'S DEPARTMENT MEDICATION ADMINI PATION RECORD JAN. | FEB. | MAR. | APRIL | MAY | | JUNE | | JULY | AUG. | SEPT. | OCT. | NOV. | DEC. MEDICATION 5 6 7 8 9 10 11 12 13 14 15 4/9/45 PB 30 mg bid x 30 days

1/8/45

6/9/95 Dilantin 300 mg po

1/8/95 QPM x 30 dup

1/8/95 QPM x 30 dup AM Sa Sa Se Se en EN **DIAGNOSIS ALLERGIES NURSING ALERTS** 

SPN NO.

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PATIENT NAME

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HARRIS COUNTY S' ERIFF'S DEPARTMENT

MEDICATION ADI ISTRATION RECORD

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HARRIS COUNTY SHFRIFF'S DEPARTMENT MEDICATION ADMI STRATION RECORD

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HARRIS COUNTY SHEP'FF'S DEPARTMENT

MEDICATION ADMINIS ATION RECORD

APRIL MAY JUNE JULY AUG. SEPT. 00 DATE MEDICATION 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 HOUR Dilantin 300mg Po

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HARRIS COUNTY SHE IFF'S DEPARTMENT MEDICATION ADMIN RATION RECORD DATE 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 MEDICATION Dilantin 160 mg Tit

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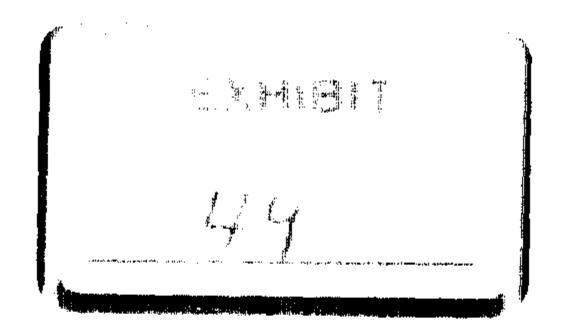
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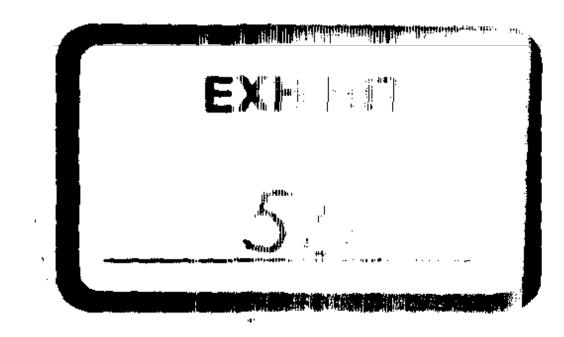
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12: PREUTOUSLY IN HARRIS CO JAIL... KYESE LAST PELEASE DATE: 05181988

11: SUICIDAL IDEATION......... <NO>







## Harris County Sheriff's Department Medical Division

#### Consultation Request

Name: 1tall Robert	aka ( if known):
SPN#: 615184	Harris County Hospital District #:
Location: Atacosita 301 701 (301) (circl	le one)  Cell Block: NH 585
Consulting Physician:	Date of Request: $\frac{2/22/95}{}$
	Destination
Ben Taub clinic: Neurosurgery Brae	ce Shop Ortho OT Other
Baylor Radiotherapy Her	rmann Eye M.D. Anderson Cancer Ctr.
LBJGH clinic:	ER) WOLOGY
HCSD clinic: HIV General Surgery Pla	astic Surgery OB/GYN Dental Forensic Psychiatry
in the past, 5/1/ removal of	pron Une dip : Trace blood, smill
	of care, copies of the original clinical notes or ER face sheet,

- In our effort to provide greater continuity of care, copies of the original clinical notes or ER face sheet, with the results of any laboratory or radiologic tests, are required PRIOR to the inmate's return transportation. We also ask that consultants do not write prescriptions, providing only their written suggested medications on the return documents.
- The copies of the requested medical data to be returned with the immate is considered confidential; therefore, these materials are to be given only to the returning transportation deputies. Deputies will not transport the patient back to the Harris County Sheriff's Department without the required paperwork.
- Please contact the HCSD office of the Medical Director [755-6541] with any questions related to the care of the patient.

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HARRIS COUNTY HOSPITAL DISTRICT
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PATIENT ID

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HALL. ROBERT ARTHUR JR

CS/C4/48

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M-154 Rev. 06/91

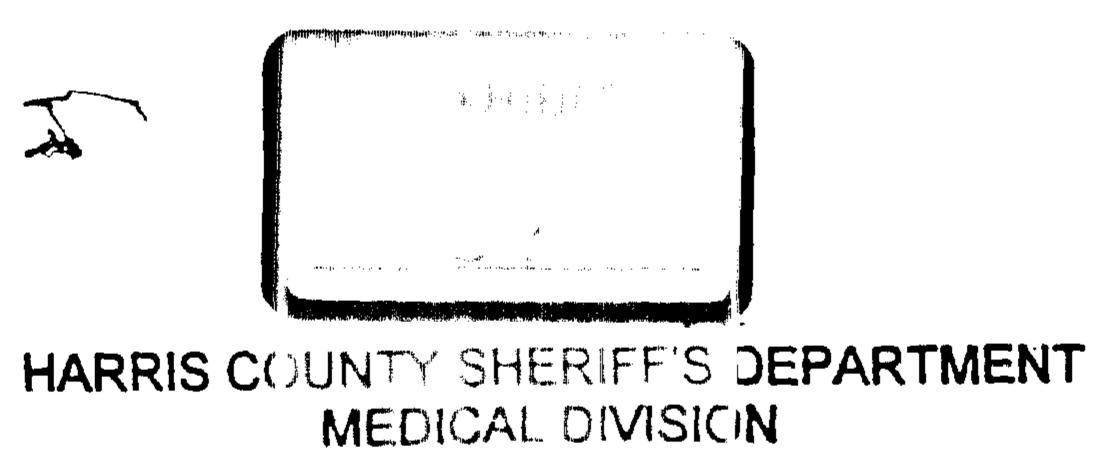
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MASTER PROBLEM LIST

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DATE OF BIRTH

Case 4:97-cv-00874 Document 1 Filed in TXSD on 03/18/97 Page 95 of 129



#### SPECIAL NEEDS TREATMENT PLAN

#### SEIZURE DISORDER

#### SHORT AND LONG TERM GOALS:

Inmate to remain as seizure free as possible.

MEDICATION (S):

Dilantin Phenebarbital, Tegretol, Depakote.

DIET:

Regular.

EXCERCISE:

As tolerated.

TYPE AND FREQUENCY OF DIAGNOSTIC TESTING:

Blood test every three (3) months for Dilantin/Phenobarbital/ Depakote/Tegretol levels.

FREQUENCY OF FOLLOW-UP MEDICAL EVALUATION AND ADJUSTMENT OF TREATMENT MODALITY:

Every three (3) months for evaluation of effectiveness of medications and possible adjustment to plan.

Qualified Health Practitioner

Hall, Robert 615184 9-448

ATE: 02/23/95

## HEALTH OHESTIONMATER HEALTH OHESTIONNATER

TIME: OR:37

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10.	STONS OF MENTAL DISORDER <no></no>	ماه المال
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324	PREVIOUSLY IN HARRIS CO JAIL <yes> (</yes>	AST PELEASE DATE: 05181988

HARRIS COUNTY SHERIFF'S DEPARTM	56	HISTORY & PH	IYSICAL EXA	MINATION
MEDICAL DIVISION		Location:	301 1301	701) Rehab
HALL Robert	ARTHUR 3/	$\frac{8}{95}$ 68 Cellbloc		5588 SPN#
ast Name First Name	WII D	ate Cellbloo	<b>A</b>	SEIN#
9-4-48 46 378	50.3543	h W	NKH	
Sirth Date Age Social Sec	curity No. Se		Allergies	
	esno_\\	arks	•	
Ear, nose or throat troubles  Sinusitis  Mental Problems (institutional care)  y	esno esno esno	on Sinth	roid	
3. Tuberculosis  4. Heart trouble  y	es no no es no	on Synth	• • • • • • • • • • • • • • • • • • •	•
12. Hernia 13. Operations (within last 6 mos) 14. Skin disease y	esno			
16. Venereal disease 17. Diabetes Mellitus y	es no es no Di	anting PB	•	
20. Change in menstrual pattern	esno esno			
Habits Alcohol	bacco MA	Drugs	119	
	rt Disease	Diabetes N Cancer	1. DAD	1 <i>A</i>
Chief Complaint Wat +0	See Ey	MD.		

Height 5 10 Weight 228 Temp 982 Resp 18 Pulse 64 BP 1/2/72

N = Normal Findings	A	bnormai Findings		NA .	plicable		
Appearance Medium	Skin	Eyes Conjunctivae		Pupils		Ears Discharges	<u>N</u>
Obese	Turgor	Red	,	Unequal		Infected	,
Thin	Lesions	Pale		Non-reactive	<del></del>	Other lesions	
	Rash	Scierae		Other lesions	<del></del>		
Ambulatory/		Icteric			**************************************		•
Wheelchair	Other		<del></del>				h /
Nose	Throat	Neck	$\Delta$	Mouth		Chest	
Deviated	Inflamed	Stiff		Caries		Breasts	
Mucosai edema	Tonsils	Thyroid		Gingivae	<del></del>	Discharge	
Other lesions	Other lesions	Lymph nodes		Teeth	<del></del>	Mass	
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Heart	Lungs	Abdomen				Extremities	
Murmur	Rales	Tender	-7	Enlarged liver		Edema	- <del> </del>
	Wheezes	Hard		Mass		Varicosities	The last district of the last
Irregular		Bowel sounds		Other	<del></del>	Range of motion	n
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b. Neat	_ <del>_</del>	yes no					/
c. Eye Contact	goodpoo	<u> </u>	8. Thoug	ht Process	loose (disor	rganized) coh	erent
C. Lyc Condition	5				<b>\</b>	racing: yes_	- Aller - Alle
2. Attention di	stractable pre-occupi	ed OK					
2. Audition of	pro-occupi	\	9 Thoug	ht Content			
3. Unusual Behavior		yes no		u hear voices?		yes	no c
	•	mbative	•	cople out to get y	0117	yes	
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bizarre, yes,	specify		~	u want to hurt of		yes	
	- <b>1</b>		u. Do yo	u want to hunt of	ncie;	yes	no
4. Consciousness	alert_	drowsy	10.0	•			
	/		10. Sensor				<u> </u>
5. Attitude	cooperativeun	cooperative	a. Oriente		person	n place i	time
			b. Confus	sed		yes	<u>ن</u> 00 _
6. Speech	productiveur	aproductive	c. Clear			yes	o
	mute rap	oidsoft	c. Memor	гy		OK decre	eased
	ME	NTAL RETARDAT	ION SCRE	ENING		•	•
1. Did you finish element	ary school?	yes_no_	4. Can yo	ou read?		yes $ u$	no
if no, last grade			5. Can yo			yes -	
2. Did you finish interme	·— · · — · ·—	yes no	-	you in special cla	sses		
_		,	-	you ever been cal		yes	_ 10
if no, last grade			7. Mave )	TOU EVEL DEEL CAL	ica stom :	yes	_ 40
3. Did you finish high sel if no, last grade		yes no					
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		<del>}</del>	<del></del>	RN D	ATE.	MD F	ATE

S. CINEAL

Case 4:97-cv-00874 Document 1 Filed in TXSD on 03/18/97 Page 99 of 12

EXHIBIT

57

## HARRIS COUNTY SHERIFF'S DEPARTMENT DETENTION BUREAU MEDICAL DIVISION

SPECIAL NEEDS ADVISEMENT

WATCH COMMANDER	
Inmate Holl, Robert, SPN # 6/5/84 has a medical/psychiatric problem which will require	
has a medical/psychiatric problem which will require	
An extra Nathers.	

This medical/psychiatric problem will be re-evaluated as needed but no later than thirty (30) days from the above date.

Please adhere with this request and notify the Medical Division immediately of any concerns.

Physician

U.S D. partment of Justice United States Parole Commission 10220 North Executive Hills Boulevard North Pointe Tower, Suite 700 Kansas City. MO 64153 Notice of Action

58

EXHIBIT

SERIE PUBLIC DEFENDER

HAY 3"0 1995

HOUSTON, TEXAS

HOUSTON, TEXAS

Name: HALL, Robert Arthur

Register Number: 38261-079 Institution: Local, Houston, TX

In the case of the above-named parole action was ordered:

Revoke Parole. Time spent from date of release until February 3, 1995 shall be credited. Continue to expiration with the Special Drug, Mental Health and Alcohol Aftercare Conditions. You shall participate as instructed by your U.S. Probation Officer in a program approved by the Parole Commission for the treatment of narcotic addiction or drug and/or alcohol dependency, which may include testing and examination to determine if you have reverted to the use of drugs or alcohol. You shall also abstain from the use of alcohol and/or all other intoxicants during and after the course of treatment. You shall participate in an in-patient or an out-patient mental health program as directed by your U.S. Probation Officer.

cc: Dola Young

Federal Public Defender

P.O. Box 61508 Houston, TX 77208

#### FINDINGS OF FACT:

The Commission finds as a fact that you violated conditions of release as charged as indicated below:

Charge No. 2 - FAILURE TO SUBMIT SUPERVISION REPORTS.

Basis: Testimony provided by USPO Flanagan and information contained in his letter dated 2-17-95.

Charge No. 3 - FAILURE TO REPORT CHANGE IN RESIDENCE.

Basis:

Testimony provided by USPO Flanagan and his letter dated February 17, 1995.

Appeals Procedure:

The above decision is appealable to the National Appeals Board under 28 C.F.R. 2.26:

May 23, 1995

North Central Region Commissioner: Carol Pavilack Getty

Docket Clerk: cew

A presumptive parole date is conditioned upon your maintaining good institutional conduct and the development of a suitable release plan. Prior to release your case will be subject to review to ascertain that these conditions have been fulfilled.

You may obtain appeal forms from your caseworker and they must be filed with the Commission within thirty days of the date this Notice was sent. Copies of this Notice are sent to your institution and/or your probation officer. In certain cases copies may also he sent to the sentencing court. You are responsible for advising any others, if you so wish.

#### SALIENT FACTOR SCORE (SFS-81)

#### ITEM A. PRIOR CONVICTIONS/ADJUDICATIONS (ADULT OR JUVENILE)

None = 3; One = 2; Two or three = 1; Four or more = 0

#### ITEM B. PRIOR COMMITMENTS OF MORE THAN THIRTY DAYS (ADULT OR JUVENILE)

None = 2; One or two = 1; Three or more = 0

### ITEM C. AGE AT COMMENCEMENT OF THE CURRENT OFFENSE/PRIOR COMMITMENTS OF MORE THAN THIRTY DAYS (ADULT OR JUVENILE)

Age at commencement of the current offense: 26 years of age or more =  $2^{***}$ ; 20-25 years of age =  $1^{***}$ ; 19 years of age or less = 0

\*\*\* EXCEPTION: If five or more prior commitments of more than thirty days, (adult or juvenile), place an 'x' here ( ) and score this item... = 0

#### ITEM D. RECENT COMMITMENT FREE PERIOD (THREE YEARS)

No prior commitment of more than thirty days (adult or juvenile), or released to the community from last such commitment at least three years prior to the commencement of the current offense = 1; Otherwise = 0

#### ITEM E. PROBATION/PAROLE/CONFINEMENT/ESCAPE STATUS VIOLATOR THIS TIME

Neither on probation, parole, confinement, or escape status at the time of the current offense; nor committed as a probation, parole, confinement, or escape status violator this time = 1; Otherwise = 0

#### ITEM F. HISTORY OF HEROIN/OPIATE DEPENDENCE

No history of heroin or opiate dependence = 1; Otherwise = 0

#### MOST FREQUENT SPECIAL CONDITIONS

#### Special Drug Aftercare Condition:

You shall participate as instructed by your probation officer in a program approved by the Parole Commission for treatment of narcotic addiction or drug dependency, which may include testing and examination to determine if you have reverted to the use of drugs.

#### Special Alcohol Aftercare Condition:

You shall participate in a community based program for the treatment of alcoholism as directed by your probation officer.

#### Special Mental Health Aftercare Condition:

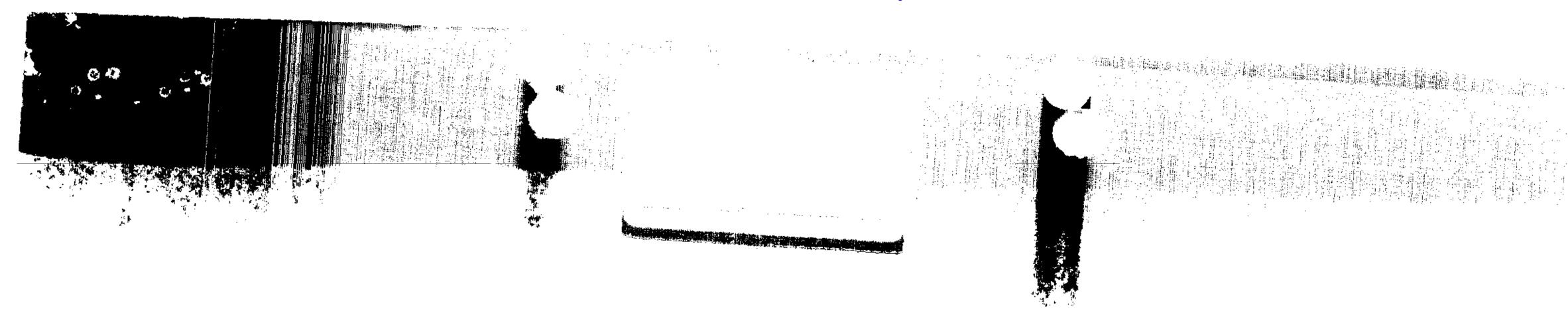
You shall participate in an in-patient or an out-patient mental health program as directed by your probation officer.

#### Special Community Treatment Center Condition:

You shall reside in and participate in a program of the Community Corrections Center as instructed until discharge by the Center Director, but no later than 120 days from admission.

1/2	119A		<b>(</b> 2000)	EXHIBIT	ر ا
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EMERGENCY SERVICE TREATMENT SHEET



#### TEXAS DEPARTMENT OF CORRECTIONS

#### Medical Department

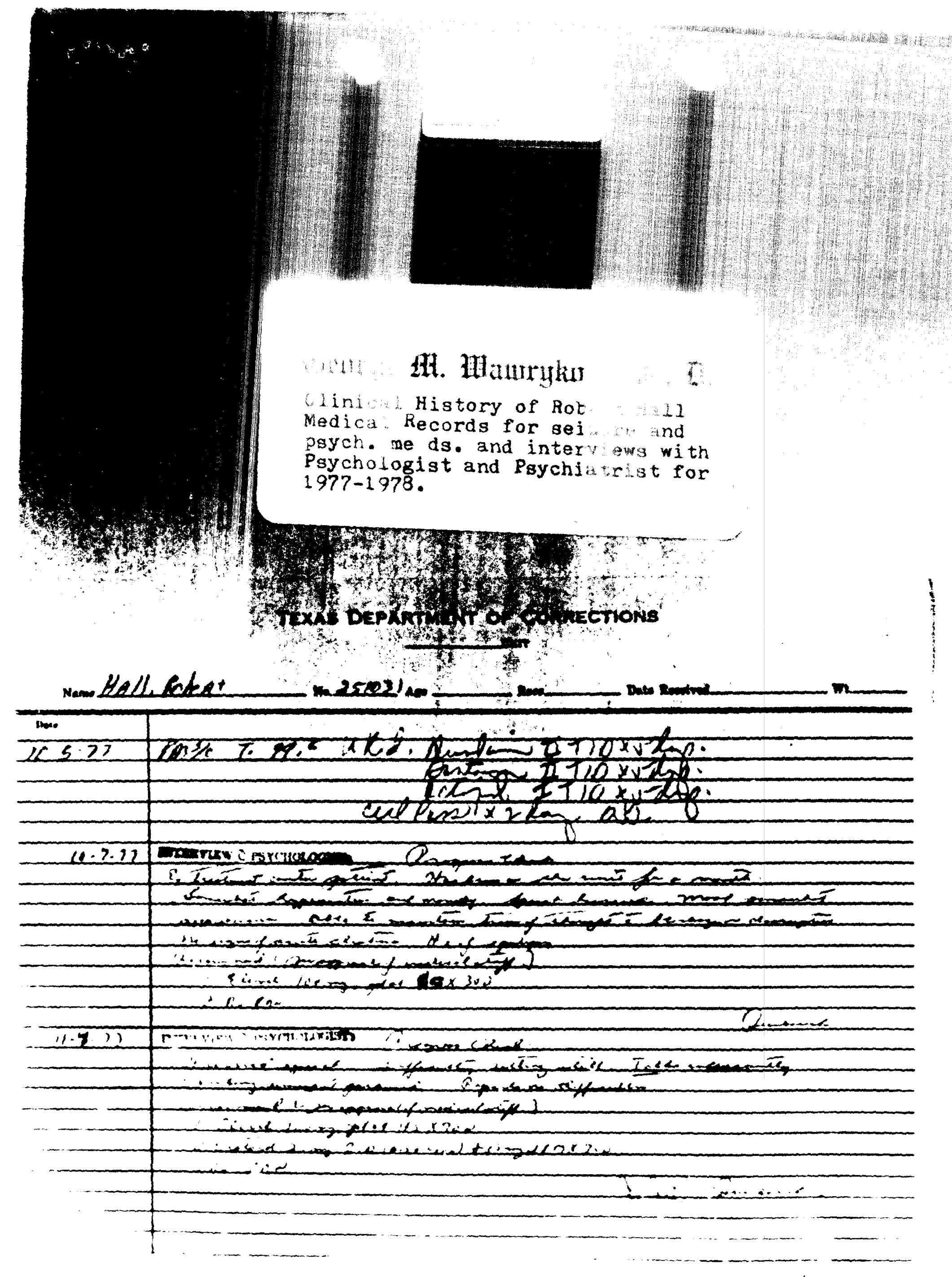
#### REPORT OF PHYSICAL EXAMINATION

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26



Doctor's Progress No:
1-25-82 of L.A. Nelso soft
Staff Psychitrist note soft
neurological signs...some
delusional thinking...possible
organic problems...

ne is some soft neurolo
past but the laboratory

atient continues to complain

it is felt that this is largely

question is raised to an organic problem with this

reel we should refer him for neurological work up and

set a CAT scan on this patient.

L.A. NELSON, M.D. Staff Psychiatrist

DOCTOR'S PROGRESS NOTES

104

PAGE NO .

### PROGRESS REPORT (continued)

63

"NAME: Hall, Robert

**REG. NO.:** 38261-079

I ATE: 10-29-91

#### H. Physical\Mental Health:

The Medical Department of the institution has reported Mr. Hall can be assigned to regular duty with the medical restriction of a psychiatric disorder and no food service work. At the present time, he is being prescribed the psychotropic medication Xanax.

#### I. Financial Responsibility:

The Judgment and Commitment Order from the Southern District of Texas, dated January 7, 1988, indicates Mr. Hall is to pay an assessment of \$50.00. An active participant in the Inmate Financial Responsibility Program, Mr. Hall completed his financial obligation to the court on October 17, 1991.

#### RELEASE PLANNING

Prior to his release from confinement, Mr. Hall would desire a relocation of parole supervision from the Southern District of Texas to the Eastern District of Wisconsin, as he plans on becoming a religious brother at a monastery in Wisconsin. In addition, his father's permanent address is in Antigo, Wisconsin.

A. RESIDENCE:

Priest and Brothers of the Sacred Heart Monastery

The same of the

Post Office Box 206

Hales Corner, Wisconsin 53130-0206

B. EMPLOYMENT:

Religious Brother

C. USPO:

Sentencing District Louis G. Brewster, Chief

U.S. Probation Officer

1205 U.S. Courthouse and Federal Building

515 Rusk Avenue

Houston, Texas 77002

District of Proposed Relocation

Trudy A. Schmitt, Chief U.S. Probation Officer 620 Federal Building

517 East Wisconsin Avenue

Milwaukee, Wisconsin 53202-4502

## MENTAL HEALTH MENTAL RETARDATION AUTHORITY OF HARRIS COUNTY

## MASTER SERVICE PLAN INDIVIDUAL PROBLEM SHEET

<u>64</u>

_	
Consumer's	11
i nacimar c	Name
	TAGILIE:

Robert Hall

Case #: 153747

PROBLEM # PROBLEM NAME

Pl9 Major Depression

PROBLEM

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This consumer identifies with the symptoms associated with Major Depression as listed in the DSMIII-R including depressed mood. This consumer has experienced depressed mood concurrently with at least four other depressive symptoms for at least a two week period.

Consumer's strengths, support systems, and resources related to treatment goals/objectives

This consumer has expressed willingness to comply with treatment plan by attending scheduled appointments and taking prescribed medication.

GOAL STATEMENT	Cons
(A general statement about the expected or desired change)	Initials
This consumer will be free of all depressive	e symptoms within one year.

OBJECTIVES (What the consumer expects to achieve in behavioral & measurable terms)	Start Date	Stop	Respon. Staff	Cons. Initials
This consumer will be free of all depressive symptoms associated with Major Depression (crying spells, insomnia and hypersomnia, suicidal ideations, lack of interest in daily activities, significant weight loss or weight gain when not dieting, psychomotor agitation, fatigue or loss of energy nearly every day, feelings of worthlessness, diminished ability to think or concentrate, and recurrent thoughts of death) within one year.	9/1/44		B	

TRATEGIES/INTERVENTIONS nclude what, where, when frequency, and duration)	Date		Respon. Staff	Cons.
Consumer will attend a minimum of one medication follow-up appointment with Jim Joiner, M.D. every three months at the Humble MH Clinic.	9/1/94		SB	
		•		

0.P				
Mental Mental	Health Mental	Retardation		
Author	ity of Harris Co	ounty		
	11	$\mathcal{O}$	/	

PROGRESS NOTES

65

CONSUMER NAME: HALL, ROBERT CASE #: 1537 4 UNIT NAME: 14 mble

			·	EACH ENTRY REQUIRES AUTHENTICATION WITH SIGNATU E/TITLE
DATE	TIME	KEY	CODE	NOTES
1/6/94	292		101	dient resented seller Clinia des intarba, Willia
	300			ressent Son - Elambar with
	300		227	Intake take drawn at Olinic - Shanle water
1920/94	28/1		844	The to cet's residence From Handle
	1	sin	1	Plinie to schedule Re-assessment
				appt. Message left an answering
				Machine to contact TPC Stant
		   		magg Cwll Cwll
				Addadum Sast seen on 9/6/94 with
	<del></del>		7	thirty-day supply RTC at 10/6/94.
10/24/24	2:00	0,0	105	1 Sentimalist
10/2944	3.00	110	103	Consumer called to say he had gotten a job at a Mall as Maintenance Supervisor.
	- <del>-</del>			Consumer says he is 100% better and wants to
			1	advised consumer to see M.D. before making
	<del> </del>		1	decision, but consumer said he would inform
	3:07			us if he had any problems. John Bragg CWIII
1/10/45	~7.23		105	TCto C- 10 answer: W. Doleand aw II 1/10/195
1/1/95	1105	P18	105	Called Consum - Nansum - W. Doles CWII 11/95
1/12/95	* *			Toto C - No one at home. Will send letter cout 1/12/90
1495	1205	PIS	105	hette sut de C Copy in bock of file. W. Doles CWT 1/12/95
2/13/95			105	No nespora dolette. Cosado be closed DSAP
3/17/95	40	PB	844	"That cloud and deschine summing analital. Rund to be
MHM	<b>₽</b> #77.	.022 (R	evised :	51999 to Medial recomment of code source cose Many Chilles Milles

#### EXHIBIT

66

To Clinic 701 N. SAN JACINTO

3/12/95

MRS. O'NEAL,

I'm that fellow you interviewed on 3/8/95 from the 701 Saw Jacobo

Signing Ation Unit 681-J.

The fellow with "Boen Losers" IN A big tattoo on my back and the some one that told you that I got these many injuries from that bomb

going off in my CAR.

ONE of these intrevers I showed you was my ANKES WHERE they were operated on and Repaired in Surgery with what is called bi-lateral

Achilles Tendow. I believe I even spoke with your M.D. About it.

Dayway you what in my Chart " Not to use leg irons and that

WAS All WELL AND FINE AND I APPRECIACE YOUR CONCERN.

HOWEVER I was moved back to Segregation at 1301 Franklin and I told the Depth (Lewellen) that you'd whote that in the Chart. He took me to the Clinic in leg-irous (because they did not give me seizure medication over here for three days (3) and he asked them to check and they said "No" you did not do that. Busically they say I'm lying at what you said and I've been treated pretty meanly about the whole thing and caused a lot of pain. Could you call the 5th Floor Depth, or Seperusor here at 1301 tranklin and tell them the truth about this matter.

Robert HAII #615184 585-09 1301 Franklin EXHIBIT

67

Robert HAII #615184 5B5-01 F=d=ANI PRISON=R #38261-079 1301 FRANKIN HOUSTON, T=XAS 77002

HOSSIVAI ADMINISTRATION - HOSD 1301 FRANKLIN HOUSIUN, TEXAS 77002

Nugust 33, 1995

Dear Administratod:

Having Sent Multiple Requests for Medical Attention for
thypoid and Kidney problems I saw a Doctor about a month
back and he wrote into the Medical Record to Cleck these
things. Since then there has been no follow-up or any other
treatment Concerning these conditions.

I have become increasingly ill while your department has een indifferent to my valid NEEDS. HIS A federal prisoner by only Recourse is to the U.S. Marshals Office to Ask them to intercede and take me out of this Jail to A ederal prison hospital Decause of the Harris County Sheaits' Department Nedical Department's Refusal to treat me.

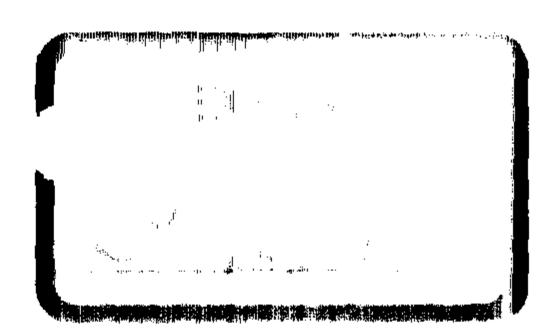
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Saint their

C. U.S. MANSHA/ RAy BRIGHT

COMPLAINT REPL	-2	
INMATE NAME: Robert Mail	DATE RECEIVED: 8-	25-95
SPN#: 615184		EXHIBIT
LOCATION:		
COMPLAINT: CARE RECEIVED	FINDING:	<u>68</u>
Chart Review: 4-19-95 ordered meds, see	n MD. 6-1-95 Lab order	<u>d</u>
Chart Review: 4-19-95 ordered meds, see missed GIPT 6-20-95. Inmate has rece	rved care consistent ?	Sjecial_
needs freatment plans server Dis		MUST
Submit sir for medical complaints	>	the 10-22
3-25-95 Keviewed No EXCht		
3/25/95 Reviewed; agree uit	nabore Mase	<u> </u>
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Robert Hall

#615184 585-01

HARRIS County JAII

1301 FRANKIN

Houston, IX 77002

Musted States Manshals Service U.S. Mashal Tay Daight 515 Rush Street Howston, TX 77002

September 20, 1995

DEAR Mashal Bright:

I Am petitioning your office with AN EMERGENCY Medical Reguest. The Medical Division of the Harris County Sheath's Department is deliberately Returning Medical treatment to my serious Medical needs.

On August 29, 1995, I spoke with you in person about this ougoing deliberate indifference by the Medical Division here and told you that my tamily was becoming concerned by Callous indifference of the Medical Staff here at the Jail which has Resulted in months of pain and wanton infliction of suffering on a federal prisoner.

I have kept a Running Record of all people that I have talked to or written Concerning my Medical Needs AND present below a short warrative of Those efforts:

# EXHIBIT 69 Agé 2

1-13-95 "In. t. al Request for Medical Attention for A Number of Medical Needs. There was AN interview with A DR. Trink AND he said he wanted to order some tests. Medical staff failed to follow his oxders in full.

i-23.95 After A mouth of Not hearing from Medical Staff, I salked with S.R. Ramey, L.V.N. AND Deputy Lewallen. At their instructions I gave Deputy Lewallen Another "Immate Request" for Medical Needs, dated 5-23-95. This Request was Never Answered

5-26-95 Another "Innate Request" for Medical Attention AND this one too was Never Answered.

1-1-95 Wrote "Grievance" About the About three Proposts
to Hospital Doministrator Don Nichols. He Never Answered and
a few weeks later I was informed he had been fired from
the Medical Division because he was not a fit Administrator.

1-9-95 Madé farth "Inmaté Request" for Médical Attention. Was eventually Called to Hospital but told they were too busy to Sée me AND NOULU Réschedule. Néver heard from them Again.

7-1-95 Wrote Second "Grievance" to New Mospital Administrator about the About AND Never HEARD BACK ON this ONE Either.

## EXHIBIT 69 PAGE 3

7-14-95 At the unging of Depty David David David I whote A fifth "INMATE REQUEST" to the Medical Division And Deputy Davis CALLECT Them AS WELL. To date No Response.

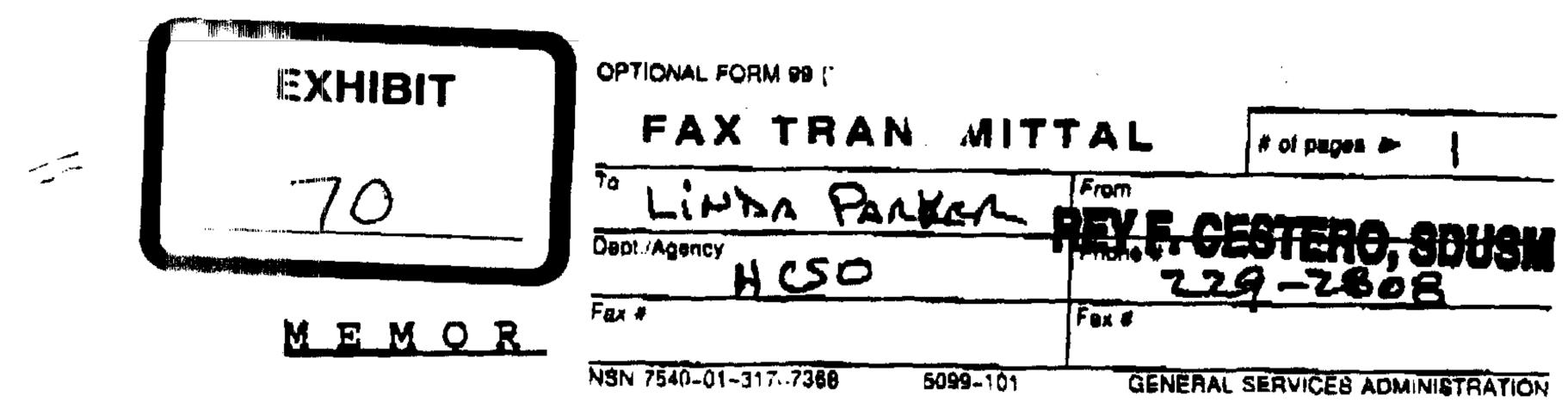
8-2-95 Sent third "Grievance" letter to Hospital Administrator ON All the Above AND Received no Action

nade me fill out my sixth "inmate Request" And he personally nanded it to the Tringe Nurses who were also standing in front of my Cell. He told me that for sure Now that he had seen the Request out in the nurses hands that I would get treated. To date there has been no Response to that Request Either.

1-20-95 NR. RAMEN, LV.N. Not believing that NO ONE had acted ON AMY of the foregoing had me fill out my seventh "inmate Request" AND give it to him personally so that he could take it down to the Jail Hoipital to see if he would get a Down to See Me. At this point No Results.

hater this Date a Chaptain, Fr. Ron Cloutier, CAME to my Cell AND SEEING my MEDICAL NEEDS took my NAME AND SPN HUNDER AND WENT to talk to the Medical Staff but At this point NO RESUlts As of yet.

Sincerely yours, Robert Hau



#### UNITED STATES GOVERNMENT

DATE: March 13, 1996

REPLY TO Gran Sale

ATTN OF: Lisa Griffis, Acting Chief Deputy

To: Major Quinn/Linda Parker

Subject: Federal Prisoner Robert Hall SPN 615184/Cell 5B5-01

I received a telephone call from Ann Barthlow, sister of R.HALL. She advised that HALL is a diabetic and is having problems with the lack of monitoring of his medication doses, and that he is losing circulation in his feet. Could you please look in to this complaint and let our office know of HALL's medical status?

MEMORANDUM OF CALL	Previous aditions usable
TO:	75a-
DOU WERE CALLED BY-	BOUNTED BY-
OF (Organization)	sent May
	Z-45 TJ DSN
WILL CALL AGAIN	IS WAITING TO SEE YOU
RETURNED YOUR CALL	WISHES AN APPOINTMENT
Dialetic our	mitigan litreus minima
wat with the	Robert Alall
- ( worked	ur you last brother
year-	re. Les brother- Robert Hall
RECEIVED BY	COS-13-96 127M
NEN 7540-00-634-4018 50861-112	OPTIONAL POPM BLS (Fig. 7-84) QUINTI BONIQUE ASTRINUMENT OFFICE: 1866-666-660

### HARRIS COUNTY SHERIFF'S DEPARTMENT DETENTION BUREAU INMATE GRIEVANCE FORM

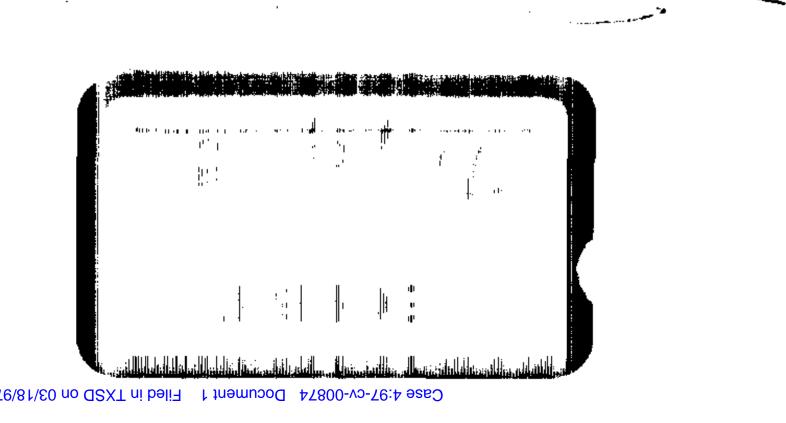
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71	PAGE /	n de

FORMA PARA QUEJAS DE LOS PRESOS

	Control #: 96-03
nmate Name: Robert ARthur HAII Nombre Del Preso	Inmate SPN # 6/5/84 Numero Del SPN Preso
Jail Facility: 1-301 FRANKIN	Housing Assignment: 585-01 Vivienda Asignada
Date of Incident: <u>3-6-96</u> Fecha De Incidente	Time of Incident: 10:00 A.M. Tiempo de incidente
Specify how and when informal resolution was attempted / Especifique como y  Deputy: David Davis Sergeant: Silving Complaint  Both officials State that the below Complaint  Control.	otde
STATE GRIEVANCE (Include documentation, name of any witnesses support Attach additional pages if necessary.) / ESPECIFIQUE LA QUEJA (Incluya documentifique su queja y fecha del incidente. Agregue paginas adicionales si es necessar each form. (Solamente se puede presentar un asunto en cada forma.)	nentacion, nombre de cualquier testigo que
Use of Administrative Segregation Cell-Block As Punitive Lock Down through Discrimin Privileges Without Due Process	s 5B5-5CY-5D5 Nation and Loss of
CC: 215 Distant Judge Europe Weighten	
CC: U.S. District Judge Ewing Weinlein U.S. Manshal Ray Bright Mn. JAMES ONEINGER-AHORNEY	•
ACTION REQUESTED / ACCION SOLICITADA: That inmates housed discriminated Against, and affolded the Same privile similarly situated inmates in the Harris County Jai That outrall conditions" be improved, that cell-ra Returned, the telephones fixed, be given access to real number of signature / Firma Del Preso Date / Fecha	ges And Rights As

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Over the past year and to date there have been A womber Administrative decisions made Against the "Class of prisoners" being held IN the 585-504-505 Administrative Segregation Cell-blocks, IN AN ARbitRARY AND CAPRICIOUS MANNER IN REGARds to the Civil Rights of SAID Class of prisoners And in Violation to Agreements Reached in Alberti V. Sharift of HAMPIS COUNTY (CITES-OM. HELD) AND the Arles AND guidelines of the EXHIBIT These collective puvitive decisions ARE The RADIOS IN All these Cell-blocks have been disconnected B) The ANTERNA System for the T.V. S WAS REMOVED AND NOT REPLACED; C) The T.V. Stands (AND OR MIK-GRATES) WERE REMOVED SO That the T.V. s had to be set on the table/desk in the CElls, thus depriving inmates of a place to Eat WEALS AND/OR WRITE ETERS ETE: D) The T.V.s this date (3-6-96) were ordered Removed From these C=11-blocks by Captain Alberts; E) FOR the most part of A YEAR ONLY ONE telephone of the original SIX telephones has worked often this phone is given to cell-blocks to USE whose phones are out of order (i.e. general population) F) The book-cast does not make Rounds to Ad. Sig. INNINTES IT AND when it does come to the floor ONCE About EVERY three (3) morths); G) The Newspaper for these AD. Seq. blocks often is given to the Open population Cell-blocks AND it it is given out in Ad. seg. it is often LEPT by UNE INMATE AND NOT PASSED ON" FOR foreteen (14) years it has been an established police of the Jail Administration to Attood the Ad. SEG. INMATES IN 505-504-505 with Call-RAdios, T.U.s, T.V. ANTENNA, telaphones & book & NEWS PAPER ACCESS. (See Attached pages)



tuit grant 300

To take All, on diminish, Any of the About privileges, places others winnstes in a powitive status without any wive process sateguards (See Woltz v. Montrises vi Drement, Cites-ouithed).
The there is the power of the process of the protist teom.

Frether, T.U.s and cables/artensis, etc. Are dechased by protits trom in mate County. This Raises the number Commission and to the County. This Raises the guestion of whether the Commission should be allowed to continue to make a protit trom inmake sales it the inmates are wet going to benefit by houry to benefit by though I.U.s, Radios and the nuterial sylvential standards is overfall condition the protocol that I may present coulding the protocol of the standards is overfall condition that

The Jail AWD prison litigation our of the standards is overall conditions as the prison of Reaching a decision when their state and/or teclieral

I and been violated.

Ane totality of depaination, that is the overall-coulitions, now contravers.

The U.S. Coustitetion, that is the overall-coulitions, now contravers.

The U.S. Coustitetions 1st, who has been discriminated against as a "Chur of prisoners" in that they have been discriminated against as a "Chur Tius, Tiu anternas, that here have been discriminated depained of madios, to the the desiral and access to the devices, not the device of madios, the ding material and access to the device inmates as the daily neuropaper, as is not the cust with general population inmates are other parts of the Jail.

Months, years to be state and retate suiting and a deprivation to work of deprivation in sands, destriminated to their physical and mental work out the procedures that well be ing. The Courts have been adamant on the procedures and that are used to be used to the discrimination to below the Courts standards.

#### **EXHIBIT**

71 page 4

Due Process Complaint

NHEMPTS to KESOLVE

ON this date (3-6-96) I spoke with Deputy David David Davis And Sqt.

T. Roshto-And Mieg both Stated that todays punitive Actions taken

Against the 5B5-5C4-5D5 inmates was beyond their Control.

Spoke with Ranking official AND he SAID that pursuing Relief by

Spoke with Ranking official AND he SAID that pursuing Relief by filing A /AUSUIT, OR getting the Albert: Court Re-interested in the Jail Again, would probably be the only Avenue of Relief that Could be Realized for this Complaint. To those ends I Am herein exhausting my State Remede Requirement which is a prelude for filing Action under 42 U.S.C. 1983 in Redress as A federal prisoner.

Special Note: This grievance addresses the overall conditions in SEARCH of Alministrative Relief. Each of the itemized (A-G) Complaints of Page 2 have been addressed by separate grievances that were Never Acknowledged or Premedied over the past year. Such in-action is construed as a denial for Relief And Such separate grievances are now Available under the Rules of procedure for Redress in Federal Court and this grievance serves as notice to that effect that I have exhausted the Available Administrative Remedies to those separate grievances.

SPN # 615184 585-01

04/18/96

To:

Hall, Robert

SPN: 615184

CLBK 5-B-5

From:

Inmate Grievance Board

Reference: Grievance #96-03, filed on 04/18/96

The Inmate Grievance Board met on the above date to review the grievance which you initiated. Upon the conclusion of the investigation, the

Board has found:

The Grievance is <u>SUSTAINED</u>

**EXHIBIT** 

APPROPRIATE

(I) The Grievance is SUSTAINEL

PEOPLE WILL BE

(I) The Grievance is UNFOUNDED

Housing Committee Housing C ( ) The Grievance is forwarded to the Inmate Housing Commander for review.

> Sgt. G. P. Hanka, Chairman

My signature below indicates that I have received a copy of this document.

If you wish to APPEAL the decision of the Inmate Grievance Board you may do so, in writing, within five (5) working days to:

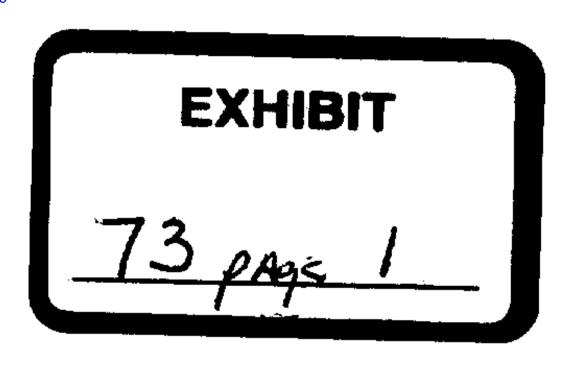
> Major K. Berry Detention Bureau Commander · 1301 Franklin Houston, Texas 77002

Your APPEAL should be mailed through the regular U.S. Mail to the Major.

IGB-004 (Rev. 04/91)

THOMAS J. BEVANS

ATTORNEY AT LAW 16000 MEMORIAL DRIVE, SUITE 230 HOUSTON, TEXAS 77079-4008 PHONE (713) 497-7701 FAX (713) 597-9483



PRACTICE LIMITED
TO FEDERAL PRACTICE

April 8, 1996

Mr. Al Solis U. S. Marshall 515 Rusk, 10th Floor Houston, Texas 77002

Re:

Robert A. Hall

CR H-95-201 My File #95-

Dear Mr. Solis:

I have been appointed by the Court to represent the interests of Mr. Robert A. Hall.

Mr. Hall is presently incarcerated in the Harris County Jail under Spin 00615184, USM#38261-079 and housed in Cell Block 5-B-5. Since Mr. Hall has been incarcerated he has developed diabetes, has developed problems with his feet and has been given a cane to walk because of swelling of his feet. Mr. Hall has also developed problems with his achilles tendon.

The purpose of this letter is to request that Mr. Hall's feet <u>not</u> be shackled while being transported by the U. S. Marshall service and/or within the Harris County Jail.

On each occasion that I have visited Mr. Hall in the Harris County Jail his feet have been shackled when moving from his cell to the area in which attorney visits are held.

Mr. Hall has an escaped attempt in the past, some 20 years ago. Mr. Hall is an "old con," "he knows the drill" and if we treat Mr. Hall with common courtesy and give him the respect due him, he will respond in kind. I do not believe Mr. Hall is an escape risk, therefore I believe the use of shackles are <u>not</u> necessary in the Harris County Jail and/or in transporting Mr. Hall. I request that feet shackles <u>not</u> be used on Mr. Hall and that your office convey this request to the proper authorities in the Harris County Sheriff's Office.

Thank you for your time and cooperation.

Yours,

THOMAS J BEVANS

Case 4:97-cv-00874 Document 1 Filed in TXSD on 03/18/97 Page 122 of 129

1cc: U. S. District Judge

Ewing Werlein, Jr.

515 Rusk

Houston, Texas 77002

1cc: Mr. Tommy Thomas

Sheriff Harris County Texas

1301 Franklin

Houston, Texas 77002

1cc: Mr. Robert Hall

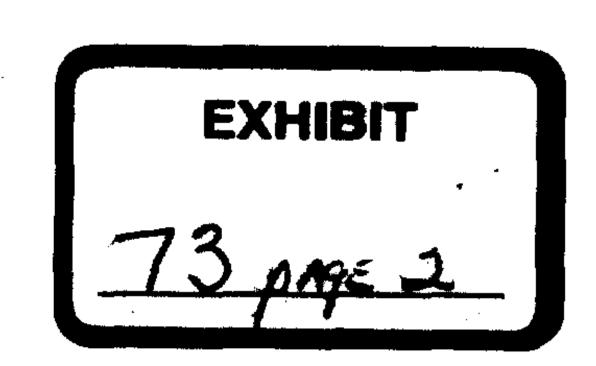
Spin 00615184

Cell 5-B-5

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1301 Franklin

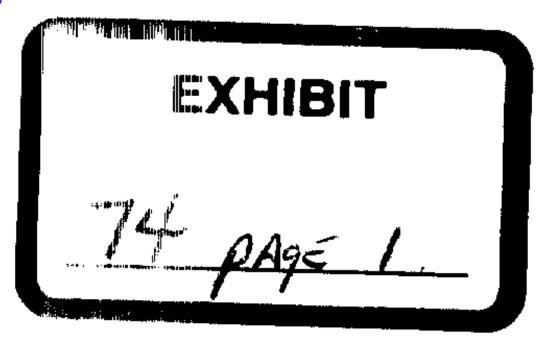
Houston, Texas 77002



Case 4:97-cv-00874 Document 1 Filed in TXSD on 03/18/97 Page 123 of 129

#### THOMAS J. BEVANS

ATTORNEY AT LAW 16000 MEMORIAL DRIVE, SUITE 230 HOUSTON, TEXAS 77079-4008 PHONE (713) 497-7701 FAX (713) 597-9483



PRACTICE LIMITED TO FEDERAL PRACTICE

April 17, 1996

Mr. Al Solis U. S. Marshall 515 Rusk, 10th Floor Houston, Texas 77002

Re:

Robert A. Hall

CR H-95-201 My File #95-

Dear Mr. Solis:

Please make reference to my letter of which a copy is attached.

On 4/15/96 I visited Mr. Hall at the Harris County Jail at which time his feet were again in shackles.

Mr. Hall entered the Harris County Jail on 2/22/95. On or about 12/5/95 after numerous complaints concerning his health Mr. Hall was diagnosed a diabetic. The diabetes is in addition to his seizure disorder and hyperthyroidism.

When Mr. Hall entered the Harris County Jail his weight was 228 pounds and his weight last recorded in his medical record on 3/19/96 was 278 pounds.

Mr. Hall does not look well to me. I am not a medical doctor but it is generally known that a diabetics blood sugar should be monitored on a regular basis, some diabetics blood sugar is monitored daily and some more than once daily. Since Mr. Hall was diagnosed a diabetic on 12/5/95 his medical record reflects that his blood sugar was monitored on two occasions.

Based on the fact that Mr. Hall is an epileptic, has hyperthyroidism and has been diagnosed a diabetic I don't belive he should be housed in an isolation cell 5-B-5-1 but should be housed on a medical floor and/or medical facility. Your office is responsible for the case of Mr. Hall and you have contracted this responsibility away to the Harris County Sheriff's Office. Mr. Hall is <u>not</u> receiving proper medical care in the Harris County Jail. If the Harris County Sheriff's Office cannot provide Mr. Hall proper medical care I ask that he be transferred to a Federal Medical facility.

Case 4:97-cv-00874 Document 1 Filed in TXSD on 03/18/97 Page 124 of 129

#### Page 2

EXHIBIT

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Thank you for your time and cooperation.

Yours,

Thomas BEVANS

TJB/bg enclosure

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1cc: U. S. District Judge

Ewing Werlein, Jr.

515 Rusk

Houston, Texas 77002

1cc:, Mr. Tommy Thomas

Sheriff Harris County Texas

1301 Franklin

Houston, Texas 77002

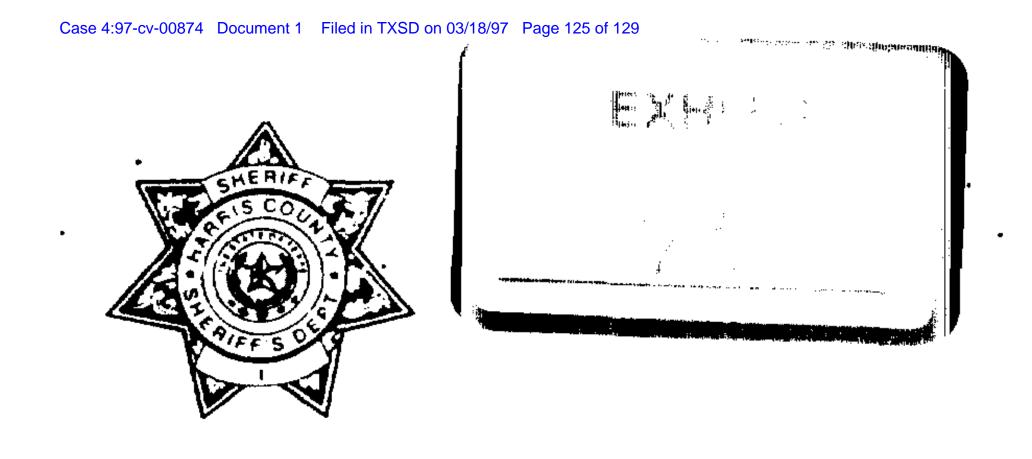
1cc: Mr. Robert Hall

Spin 00615184

Cell 5-B-5

1301 Franklin

Houston, Texas 77002



5.

#### TOMMY B. THOMAS

Sheriff of Harris Count / 1301 FRANKLIN HOUSTON, TEXAS 77002-1978

April 15, 1996

Thomas J. Bevans Attorney At Law 1600 Memorial Drive, Suite 230 Houston, Texas 77079-4008

> Robert A. Hall Re:

CR H-95-201

Dear Mr. Bevans:

This office is in receipt of your letter to Sheriff Thomas dated April 8, 1996, with regards to your client, Inmate Robert A. Hall who is presently incarcerated in the Harris County Jail.

It goes without saying that your concern for your client is appreciated by all responsible for his care and custody. In response to your concerns are as follows:

- 1. We have no jurisdictional control over your client when he is in U.S. Marshall's custody.
- 2. This office will have an immediate review of the classification and medical needs of your client to determine if there is a need to re-classify him or make special arrangements for him due to medical reasons.

In conclusion, you will be notified in writing once this reassessment is completed.

Kl.W. Berry, Major

Unmate Housing Bureau

KWB:ch

cc: Major M.W. Quinn Captain J.L. Albers Lieutenant G.L. Moore



#### TOMMY B. THOMAS

Sheriff of Harris County 1301 FRANKLIN HOUSTON, TEXAS 77002-1978

April 15, 1996

Thomas J. Bevans Attorney At Law 1600 Memorial Drive, Suite 230 Houston, Texas 77079-4008

Re: Robert A. Hall

CR H-95-201

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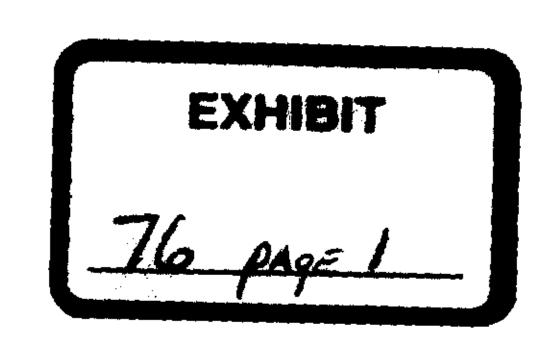
K.W. Berry, Major

Immate Housing Bureau

5.

KWB:ch

cc: Major M.W. Quinn Captain J.L. Albers Lieutenant G.L. Moore



THE STATE OF TEXAS

THE COUNTY OF HARRIS

#### **AFFIDAVIT**

COMES NOW, Robert Arthur Hall, hereinafter affiant, who now deposes and states the following:

Affiant is currently a federal prisoner housed in the ministerial custody of the Harris County Sheriff's Department (HCSD), Detention Bureau, Jail Division, under Sheriff Prisoner Number (SPN) 615184, and has been so confined continually from 2/22/95 to date.

Affiant is now, and has life-long been a handicapped person pursuant to 28 C.F.R. Section 39,103 definitions.

#### MEDICAL INTERVIEW

On June 4, 1996, affiant was taken from Administrative Segregation Cell block 5B5-01 to the HCSD-Medical Division clinic located on the second floor of the HCSD, 1301 Franklin Jail Facility (1301 Facility). Upon arrival at the clinic affiant was placed in a curtained inmate patient interview area in the main room of the clinic.

Standing nearby were, Dr. M. Seale, HCSD Medical Director, and Mr. Andrew Johnson, third year medical student - University of Texas. Dr. Seale and Mr. Johnson had affiant's medical record (MR) open and Dr. Seale was explaining to Mr. Johnson that affiant's last blood test, taken by C.D. Ware, LVN, on 5/24/96, had came back with phenobarbital and phenytoin (epilepsy seizure medications) below normal levels and near and in the panic value ranges. Since the low levels of this type test have been a sixteen month long problem, apparently Dr. Seale was going to have Mr. Johnson talk with affiant about this ongoing problem.

Affiant asked to talk with Dr. Seale that he might shed light on the source of the problem of the chronic low drug levels of seizure medications. Dr. Seale was shown by affiant that the Administrative Medical Records (AMR) in affiant's MR showed that the probable cause of the low test results was that in the previous year period that the HCSD-Medical Division Drug Cart Nurses, who dispense controlled medications, had <u>not</u> been delivered for approximately ninety (90) of those days and which represented approximately one-hundred and eighty (180) doses of seizure medication. After reviewing an AMR page, that confirmed the 90 day/180 dose scenario, Dr. Seale was at a loss to explain how the medical record supported affiant's claim, and made no suggestions or offered any remedies how the problem might be resolved by his office.

Affiant then related to Dr. Seale that on 3/8/95, Dr. D. Klein, M.D. had signed orders that affiant not be made by the HCSD to wear leg irons because of a bilateral achilles tendon operation



76 pagé 2

performed on affiant by Ben Ta ib Hospital in 1975. A fiant then related to Dr. Seale that after the written order Dr. Klein had forgot to follow up and fill out a "Special Needs Advisement." This resulted in affiant having the wear leg irons for the previous sixteen (16) months and which was a contributing factor in affiant having to walk with the assistance of a cane. Dr. Seale was at a loss to explain the reason Dr. Klein had failed to follow up with the Special Needs Advisement and which resulted in needless pain to affiant.

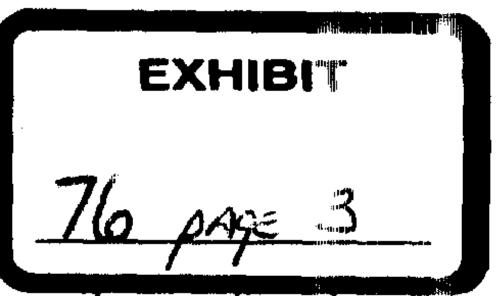
Affiant further explained to Dr. Seale that the MR documented for ten months affiant was erroneously treated for a "herpes" condition that was based solely on visual diagnosis with no supporting diagnostic testing. The misdiagnosed herpes condition could not be brought under control until by accident it was discovered that affiant was, and had been for the previous two years, suffering from diabetes. Dr. Seale was at a loss to explain why affiant had not received proper medical tests so as the HCSD Medical Division could have reached the correct diagnosis and have prevented needless pain and suffering to affiant.

Affiant finally stated to Dr. Seale that since the diagnosis of diabetes on 12/7/95 that a medically ordered diabetic diet had been ordered but the full benefits of the diet had not been realized as often diet trays were not delivered and/or scheduled sandwiches and milk were stolen by inmate floor workers and that the floor deputies were apathetic and did not intervene in such thefts. Dr. Seale asked affiant had he filed a grievance in the matter. Affiant produced a March 20, 1996 letter written to Ms. C. Nichols, R.D./L.D. and is referenced "Dietary needs not being met by HCSD." Dr. Seale said that the Nichols' letter had as of yet crossed his desk. Dr. Seale suggested to affiant to file a grievance on the matter for the preparation and delivery of diets was beyond his control.

Dr. Seale left and Mr. Johnson came over to talk to affiant concerning the low test results of seizure medications. Again affiant referred Mr. Johnson to the AMR and the 90 day/180 dose variable of missing seizure medications. Mr. Johnson candidly agreed that in his opinion that this would certainly be the cause for low blood levels of seizure medications in the test results.

Dr. Phi (pronounced Fee) came quickly over and took the interview away from Mr. Johnson. Dr. Phi was then shown the AMR with the 90 day/180 dose variable of missing medications. To drive the point home affiant produced a "Laboratory Results - Therapeutic Drugs" example page that give the average of five similar tests on blood levels for seizure medications dated 3/30/95 to 11/08/95 that all tested out for low blood levels of seizure medication due to the lack of affiant not receiving the prescribed medication. Dr. Phi was unable to expalin why affiant did not at times receive his legally prescribed medication while housed in 5B5-01 of the Harris County Jail.

Affiant explained to Dr. Phi that Dr. Luu had doubled the doses of seizure medication on 11/6/95, in an attempt to "break through" and overmedicate affiant enough to compensate for the irregularly delivered seizure medication. Dr. Phi pointed out that such a policy of overmedication brings on high toxitity that can bring on seizures and therefore can be as harmful as affiant not receiving enough medication. Dr. Phi inquired what affiants present daily seizure rate was that was being experienced. Affiant stated daily petite mol and irregular grand mol seizuires. Affiant



described to Dr. Phi and Mr. Johnson that in the administrative segregation cell he was in that he was primarily, because of the construction design and arrangement of the cell, out of view of all HCSD personnel and inmates, and therefore, was alone when he suffered seizures, and had to do for himself and make the best of a bad classification housing assignment.

Affiant summarized to Dr. Phi and Mr. Johnson that for over a year that he had not received seizure medication a large portion of the time while suffering from the undiagnosed and untreated diabetes and at that instant was not receiving his diabetic needs which had caused a serious bodily weight increase. The MR in their hands reflected that affiant had went from 228 pounds to 284 pounds that date. Dr. Phi indifferently told affiant that when medications were not given or diets not delivered to tell a floor Deputy Sheriff. Affiant told Dr. Phi and Mr. Johnson that he had tried that avenue of relief but the Deputies did not care and stated it was not their problem. Dr. Phi nodded his head that he understood and smiled knowingly and said that he was done with the interview.

Robert Arthur Hall

STATE OF TEXAS

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**COUNTY OF HARRIS** 

> Notary Public in and for the State of Texas

aagelelli