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DATE Date		NATURE Signature	-(6)			7			n Trecords

Patient DETAINEE, ISN(b)(7)(E)
Facility WBH6B1

Date 23 Jul 2009 1807 GST Clinic TF 115 (BUCCA) Appt Type ROUTN Provider (b)(3):10 U.S.C.

AutoCites Refreshed by @ 23 Jul 2009 1852 GST

Problems

visit for: examination
Patient Education - Dietary
HYPERTENSION (SYSTEMIC)
Blood Pressure Isolated Elevated
DIABETES MELLITUS
visit for: screening exam hypertension

REFRACTIVE ERROR - HYPERMETROPIA ASTIGMATISM PRESBYOPIA

NORMAL EXAMINATION

Active Medications

No Active Medications Found

Allergies

Patient has no known allergies

Screening Written by (b)(3):10 U.S. @ 23 Jul 2009 1852 GST

Appointment Reason For Visit; being unresponsive to human contact;

Selected Reason(s) For Visit:

being unresponsive to human contact (New) Comments

SIO Note Written by (b)(3):10 U.S.C. @: 23 Jul 2009 1838 GST

History of present illness

The Patient is a 29 year old male

* Encounter Background Information: 44yo M found unresponsive in bunk by fellow detainees, request for ambulance at 1621 approximately 10 minutes after being found, compound medics initiated CPR, ambulance crew reported AED did not recommend shock, arrival at hospital at 1627 CPR in progress.

Past medical/surgical history

Reported History:

Past medical history review of meds-glucophage, zocor, lopid, atenalol, lisinopril

Personal history

Social history unknown

Family history

Family medical history unknown

Physical findings

Vital signs:

Vital signs

General appearance:

General appearance: A-acheic B-no respiratory effort. C-pulseless, asystole on monitor: D-no spontaneous signs of life, pupils fixed and midrange. E-no obvious injuries on exposure.

Head:

. Head, small non-bleeding cut on scalp.

Eyes:

General/bilateral

· Eyes mid-range ditated and fixed

Lungs:

* Normal after intubation, equal BS with bagging

Cardiovascular system:

Name:D	ETAINEE, ISN (b)(7)(E)		
	the state of the s	Sex M	Sponsor DETAINEE, ISN(b)(7)(E)
EMP SSN	20 ^{(b)(6)}	Tel H	Rank
DOB	01 Jan 1980	Tel W	Unit
PCat	K78 FOREIGN NATIONAL-POW/INTERNEE	CS:	Outpt Rec. Rm.
MC Status	50 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	WS	PCM
	No	THE RESERVED OF THE PARTY OF TH	Tel PCM

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICMR FIRMR (41 CFR) 201-45 505

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ACLU-RDI 5858 p.3

000040

23 Jul 2009 1807

Clinic: TF 115 (BUCCA) Facility: WBH6B1

Provider: (b)(3):10 U.S.C.

Cardiovascular system: initial rhythm asystole on monitor, good pulses with CPR.

A/P Written by (b)(3):10 U.S.C. 23 Jul 2009 1840 GST 1. CARDIAC ARREST

Comments

Disposition Written by (b)(3):10 U.S.C. @ 23 Jul 2009 1840 GST

Injury & Illness: Not Work Related. Not Battle Related, Category: All Other, Medical/Surgical Cause: Non-Battle Illness

Appointment Class: Outpatient

E&M Code: 99212 - Estab Outpatient Focused H&P - Straightforward Decisions

Note Written by U.S.C. 130(b) (@ 23 Jul 2009 1852 GST Nursing Note

1627- Pt brought into ER via ambulance unresponsive and in asystole CPR and ACLS started, see CPR flow sheet. Pt remained pulseless throughout code. Pt cronounced dead at 1703 -- (b)(3):10

(b)(3):10 U.S.C. Note Written by 130(b) (b)(6) @ 23 Jul 2009 1840 GST

ED course

pt arrived by ambulance CPR in progress at 1627 and taken directly to trauma room--CPR continued, 2 IV lines initiated, pt placed on defibrillator/monitor(asystole), intubated by DL X 1 with 8.0 ETT, confirmed by equal pagged BS with no sounds over abdomen, ET CO2 detector + for 10 breath, secures at 23cm at teeth. Given total 5 doses of 1mg epi, 1mg stropine, 1 amp of bicarbinate, 1 amp calcrum chloride, 300mg arniodorone---pt responded with intermittant fine V-fib that was defibrillated each time to asystole Also had intermittant very wide complex sinusoidal non-perfusing rhythm that suggested hyperkalamia, but did not respond bicarb or calcium. After more that 35 minutes of code time, and 50 minutes "down time", pt never had perfusing rhythm, bedside US with no pericardial effusion, minimal cardiac wall motion. Pronounced dead at 1703.

Signed By (b)(3):10 U.S.C. @ 23 Jul 2009 1907 GST (b)(3):10 U.S.C. 130(WAHER1

CHANGE HISTORY

(b)(3):10 U.S.C. The following Screening Note Was Overwritten by 130(h) (h)(R) 23 Jul 2009 1852 GST Screening Written by (b)(3):10 U.S.C. @ 23 Jul 2009 1807 GST

Appointment Reason For Visit: being unresponsive to human contact:

Selected Reason(s) For Visit:

being unresponsive to human contact (New) Comments:

Name: D	ETAINEE, ISN (b)(7)(E)			
EMP/SSN		Sex. M Tel H	Spensor DETAINEE ISN (b)(7)(E) Rank	
DOB PCat	01 Jan 1980 K78 FOREIGN NATIONAL-POW/INTERNEE	Tel W CS	Unit: Outpt Rec. Rm	
MC Status Insurance	No	WS	PCM: Tet PCM:	

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescriped by GSA and ICMR FIRMR (41 CFR) 201-45.505

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Patient DETAINEE, ISN(b)(7)(E)

Facility: WBH6B1

Date: 23 Jul 2009 1737 GST

Clinic: TF 115 (BUCCA)

Appt Type: ROUTN

Provider (b)(3):10 U.S.C. 130

AutoCites Refreshed by @ 24 Jul 2009 1322 GST

Problems CARDIAC ARREST visit for examination Patient Education - Dietary HYPERTENSION (SYSTEMIC) Blood Pressure Isolated Elevated DIABETES MELLITUS visit for screening exam hypertension REFRACTIVE ERROR - HYPERMETROPIA ASTIGMATISM PRESBYOPIA

Active Medications

No Active Medications Found

NORMAL EXAMINATION

Allergies

Patient has no known allergies

Screening Written b (b)(3):10

@ 23 Jul 2009 1737 GST

Appointment Reason For Visit: patient was found unresponsive:

Selected Reason(s) For Visit:

patient was found unresponsive (New) Comments:

Vitals Written by (b)(3):10 U.S. @ 23 Jul 2009 1737 GST

HR: 0. RR: 0. O2: 0, Tobacco Use: No, Alcohol Use: No, Pain Scale: 0 Pain Free

Comments: pt was found unresponsive not breathing and having no radial or carotid pulse. Pt is on Atendiol, Lisinoprit. Metaformin, Glucophage, Simayastin,

A/P Written by (b)(3):10 U.S. @ 23 Jul 2009 1749 GST

1. CARDIAC ARREST

Comments: 17D2

S: 44 y/o pl found unresponsive in caravan.

(AVTVE)

O: Guards came to DMC and notified medics that other detainees said that pt was not moving, not breathing, and was dead Medics than went to caravan where pt was by the back of the caravan. Medics looked through back door and seen what appeared to be a pt not breathing. Medic told detainees to carry pt to front of caravan so that medic could get access to pt. Keys were retrieved and door opened all detainees were moved to reclyard so that medics could gain access to pt. Medics got to pt in which he appeared to be cool and clarimy, was not breathing. Medic put pulse ox on finger, but than checked pulse at the radial and coratid sight in which of did not have either. Medics than told guards to get detainee out of caravan, so that medics would have access to him. Medics called ER and told ER to send FLA STAT. Guards than carried detained from caravan to front of med shack on stretcher. Medic than thed to get stick missed, so than medic went to start compressions. As soon as compressions started FLA pulled up. Pt was than carried from front of DMC to Ambulance were CPR was continued and pt transported to ER

A Cardiac Arrest

P. Medics started compressions and released medical treatment to MED 1.

Name:D	PETAINEE, ISN(O)(7)(E)	Sex:	M	Sponsor	DETAINED ISN (b)(7)(E)
EMP/SSN	20(b)(6)	Tel H		Rank	
DOB	01 Jan 1980	Tel W		Unit	
PCat.	K78 FOREIGN NATIONAL-POWINTERNEL	CS		Outpt Rec Rm	
MC Status		WS		PCM:	
Insurance	No			Tel PCM:	

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICMR FIRMR (41 CFR) 201-45.505

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ACLU-RDI 5858 p.5

23 Jul 2009 1737

Facility: WBH6B1 Clinic: TF 115 (BUCCA)

Provider (b)(3):10 U.S.C. 130(

Disposition Written bi U.S.C. 130(b) (@ 23 Jul 2009 1749 GST Released Without Limitations

Follow up: as needed

Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding. Injury & Illness: Not Work Related, Not Battle Related, Category: All Other, Medical/Surgical Cause: Non-Battle Illness Appointment Class: Outoatient

E&M Code: 99212 - Estab Outpatient Focused H&P - Straightforward Decisions

10 minutes face-to-face/floor time >50% of appointment time spent counseling and/or coordinating care

Note Written by (b)(3):10 U.S.C. 2 24 Jul 2009 1320 GST

Pt was transfered to the ER with CPR in progress, code blue initiated.

Signed By (b)(3):10 U.S.C @ 24 Jul 2009 1323 GST (b)(3):10 U.S.C. 13 W8H6B1

Name:D	ETAINEE, ISN(b)(7)(E)	THE CONTRACT OF THE	
FMP/SSN	20 (b)(6)	Sex. M Tel H	Sponsor DETAINER_ISN (b)(7)(E) Rank
DOR PCat:	01 Jan 1980 K78 FORHIGN NATIONAL-POW/INTERNEE	Tet W CS	Unit: Outpt Rec. Rm:
MC Status Insurance	No	WS.	PCM. Tel PCM

CHRONOLOGICAL RECORD OF MEDICAL CARE

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Patient: DETAINEE, ISN(b)(7)(E)

Facility WBHSB1

Date: 20 Mar 2009 2059 GST Clinic: TF 115 (BUCCA)

Appt Type: ROUTN Provider (b)(3):10 U.S.C. 130(b),(b) (6)

(b)(3):10 U.S.C. 130(b), AutoCites Refreshed by (b)(6) 及 22 Mar 2009 1914 GS

Problems

visit for examination Patient Education - Dietary HYPERTENSION (SYSTEMIC) Blood Pressure Isolated Elevated

DIABETES MELLITUS

Active Medications

No Active Medications Found.

Altergies

No Allergies Found

Screening Written by (b)(3):10 U.S.C. 130

@ 20 Mar 2009 2059 GST

Appointment Reason For Visit: visit for: screening exam hypertension:

Selected Reason(s) For Visit

visit for screening exam hypertension (New) Comments:

Vitels Written by (b) (3):10 U.S.C. 130 BP: 156/118, HR: 85,

@ 20 Mar 2009 2100 GST

Comments: Right Arm, Standing

Vitals Written by (b)(3):10 U.S.C @ 21 Mar 2009 1913 GST

BP: 150/106

Vitals Written by (b)(3):10 U.S.C @ 22 Mar 2009 1913 GST

A/P Written by (b)(3):10 U.S.C. 130(b @ 20 Mar 2009 2101 GST

visit for: screening exam hypertension

Comments: Cmp 30B

3 Day BP for RN

Disposition Written by (b)(3):10 U.S.C. 130(b) 20 Mar 2009 2101 GST

Released Without Limitations

Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding Injury & Illness: Not Work Related; Not Battle Related; Category: Misc/Administration/Follow-Up Cause: Non-Battle Illness Appointment Class: Outpatient

E&M Code: 99213 - Estab Outpatient Expanded H&P - Low Complexity Decisions

20 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care

Signed B√(b)(3):10 U.S.C. 130(b) @ 22 Mar 2009 1915 GST

(b)(3):10 U.S.C. 130(b).(

WBH6B1 Co-Signed By (b)(3):10 U.S.C. 23 Mar 2009 0734 GST

(b)(3):10 U.S.C.

WBH6B1

Note Written by (b)(3):10 U.S 23 Mar 2009 1507 GST

(Added after encounter was signed.)

Pt seen and examined in clinic. Pt states that he started having a mild headache starting an hour ago. Pt appears calm and in no

Name: DETAINEE, ISN (b)(7)(E)

FMP/SSN: 20(6)(6)

01 Jan 1980

K78 FOREIGN NATIONAL-POW/INTERNEE

MC Status Insurance

DOB:

Pr. at

Sex M Tel H: Tel W CS

WS:

Sponsor: Rank:

Unit Outpt Rec. Rm.

PCM: Tel PCM

CHRONOLOGICAL RECORD OF MEDICAL CARE

DETAINEE, ISN(b)(7)(E)

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICMR FIRMR (41 CFR) 201-45,505

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ACLU-RDI 5858 p.7

c: TF 115 (BUCCA) Provider (b)(3):10 U.S.C. 130(b),

000044

20 Mar 2009 2059

Facility: WBH681 Clinic: TF 115 (BUCCA)

distress, denies vision changes, cp. sob. Pt states he is taking 3 meds. When produced he still has 18 tablets of 20mg Lisinopril from rx that was filled on 23FE3 (one month ago). Pt also taking Metformin 850mg daily and ASA 81mg daily. VS: in clinic today initially 125/36 then 152/108 upon repeat, HR-83, RR-18, T-98.1

WDWN, NAD, using complete sentences, PEARRL, EOMI

CV: RRR no m/r/g Pulm: CTAB no m/r/g CN II-XII grossty intact

A/P, well appearing Male with long h/o HTN with recent non-compliance with current medication (lisinopril 20mg), however with how elevated pressures are will plan to increase Lisinopril to 40mg daily and recheck in 2 days for change. Stressed with patient the importance of taking his medication as directed.

Note Written by (b)(3):10 U.S @ 23 Mar 2009 0728 GST

(Added after encounter was signed.)

Will see in clinic for med eval for uncontrolled hypertension. (b)

Note Written by (b)(3):10 U.S.C. 13 @ 25 Mar 2009 1103 GST

(Added after encounter was signed.)

NCM HTN

Average for 3 Day BP Trial = 156/109

Name:D	ETAINEE, ISN(b)(7)(E)	Sex A	M C	Sponsor	DETAINEE ISS(b)(7)(E)
EMP/SSN	20 (b)(6)	Tel II.	P	Rank:	475 (1781 SELECTO) (278 N=7
DOB.	01 Jan 1980	Tel Wi-		Unit	
PCat:	K78 FOREIGN NATIONAL-POW/INTERNEE	CZ		Outpt Rec Rm	
MC Status		WS		PCM	
Insurance	No		- XX	Tel PCM	

CHRONOLOGICAL RECORD OF MEDICAL CARE

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Patient DETAINEE, ISI(b)(7)(E)

Facility: WBH6B1

Date: 23 Feb 2009 1657 GST Clinic: TF 115 (BUCCA)

Appt Type: ROUTN Provider (b)(3):10 U.S.C. 13

AutoCites Refreshed by @ 23 Feb 2009 1658 GST

Problems

visit for: examination Patient Education - Dietary HYPERTENSION (SYSTEMIC) Blood Pressure Isolated Elevaled

Active Medications

No Active Medications Found

Allergies

No Allergies Found

Screening Written by (b)(3):10 U.S.C. @ 23 Feb 2009 1657 GST

Appointment Reason For Visit: HYPERTENSION (SYSTEMIC):

Selected Reason(s) For Visit

HYPERTENSION (SYSTEMIC) (Follow-Up) Comments

S/O Note Written by (b)(3):10 U.S.C. 130(b).(b)(6) @ 23 Feb 2009 1701 GST

History of present illness

The Patient is a 29 year old male

Encounter Background Information: Has elevated BP on BP checks. Also has DM. ON lisinopril.

Physical findings

Vital signs:

Vital signs. Exam normal as is BP 120/76 althought BP was elevated 5 straight days.

A/P Written b (b)(3):10 U.S.C. @ 23 Feb 2009 1702 GST

1. HYPERTENSION (SYSTEMIC)

Comments: Increase lisinoprii to 20mg

Disposition Written by (b)(3):10 U.S.C. @ 23 Feb 2009 1703 GST

Released Without Limitations

Injury & Illness: Not Work Related; Not Battle Related; Category: All Other, Medical/Surgical Cause: Non-Battle Illness

Appointment Class: Outpatient

E&M Code: 99212 - Estab Outpatient Focused H&P - Straightforward Decisions

Signed By (b)(3):10 U.S.C. @ 23 Feb 2009 1704 GST (b)(3):10 U.S.C. 1

WBH6B1

Name: DETAINEE, ISN(b)(7)(E)

+MPSSN 20((b)(6) 01 Jan 1980

K78 FOREIGN NATIONAL-POWINTERNEE

MC Status Insurance.

DOB

PCat

Sex M Tel 11

Tel W CS

WS

Sponsor

Unit Outpt Rec Rm

PCM: Tel. PCM

CHRONOLOGICAL RECORD OF MEDICAL CARE

DETAINEE, ISN (b)(7)(E)

STANDARD FORM 600 (REV. 5) Prescribed by GNA and ICMR FIRMR (#1 CFR) 201-45.505

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ACLU-RDI 5858 p.9

Patient: DETAINEE, ISN (b)(7)(E)
Facility: WBH6B1

Date: 20 Feb 2009 1002 GST Clinic: TF 115 (BUCCA) Appt Type: ROUTN Provider. (b)(3):10 U.S.C. Co-signer 130(b),(b)(6)

AutoCites Refreshed by(b)(3):10
Problems
visit for examination
Patient Education - Dietary
HYPERTENSION (SYSTEMIC

Active Medications No Active Medications Found Allergies No Allergies Found.

Screening Written by (b)(3):10 U.S. @ 20 Feb 2009 1002 GST

Appointment Reason For Visit: reported blood pressure check was abnormal;

Selected Reason(s) For Visit:

reported blood pressure check was abnormal (New) Comments.

Vitals Written bi(b)(3):10 U.S.C @ 20 Feb 2009 1003 GST BP: 170/100, HR: 88, RR: 20, T: 98.0 °F, O2: 98, Tobacco Use: No, Alcohol Use: No, Comments: 14 FEB 09

Vitals Written by (b)(3):10 U.S.C. 1 20 Feb 2009 1006 GST

BP 144/100, HR: 80, RR: 20, T 98.1 *F, O2 98, Tobacco Use No, Alcohol Use No, Comments: 15 FEB 09

Vitals Written by (b)(3):10 U.S. ⊚ 20 Feb 2009 1008 GST

BP 140/100, HR 80, RR 18, T 98.0 °F, O2:98, Tobacco Use No, Alcohol Use; No, Comments: 16 FEB 09

Vitals Written by U.S.C. 130/b) / @ 20 Feb 2009 1012 GST BP 150/90, HR 82, RR 20, T 98.7 °F, O2, 98, Tobacco Use, No, Alcohol Use, No, Comments: 17 FEB 09

Vitals Written by (b)(3):10 U.S.C @ 20 Feb 2009 1017 GST

BP 146/90, HR 82, RR: 20, T 98 0 *F, O2: 98, Tobacco Use: No, Alcohol Use: No, Comments: 18 FEB 09

Vitals Written by (b)(3):10 U.S.C at 20 Feb 2009 1020 GST

BP 179/110, HR 78, RR 20, T 98.4 F, O2: 100, Tobacco Use: No, Alcohol Use: No, Comments: 15 FEB 09

S/O Note Written by (b)(3):10 U.S.C @ 20 Feb 2009 1029 GST

PATIENT AMBULATORY, WC. WN. NAD. PATIENTS BP IS ELEVATED.

A/P Written by (b)(3):10 U.S.C. 20 Feb 2009 1031 GST Name: DETAINEE, ISNI(b)(7)(E) DETAINEE ISN (b)(7)(E) Sex M Sponsor. FMP SSN 20/(b)(6) Tel H Rank DOB 01 Jan 1980 Tel W PL 21 K78 FOREIGN CS Outpt Rec Rm NATIONAL-POW/INTERNEE PCM MC Status WS insurance Tel. PCM

CHRONOLOGICAL RECORD OF MEDICAL CARE

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ACLU-RDI 5858 p.10

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20 Fcb 2009 1002

Facility: WBH6B1 Clinic: TF 115 (BUCCA) Provider:(b)(3):10 U.S.C. 1120/h) /h)/6)

1. Blood Pressure Isolated Elevated

Comments: REFER TO PROVIDER FOR FURTHER EVALUATION

Disposition Written by U.S.C. 130(h) (© 20 Feb 2009 1033 GST Released Without Limitations

Follow up: with PCM. - Comments: ENCOURAGED PATIENT TO NOTIFY GUARD/MEDICS AS SOON AS SYMPTOMS WORSEN

Injury & Illness: Not Work Related; Not Battle Related; Category: All Other, Medical/Surgical Cause. Non-Battle Illness Appointment Class. Outpatient

E&M Code: 99211 - Established Outpatient Minimal Service

Note Written by (b)(3):10 U.S. @ 20 Feb 2009 1033 GST

REFER TO PROVIDER

Signed By(b)(3):10 U.S. |@ 20 Feb 2009 1042 GST (b)(3):10 U.S.C. 130(

Co-Signed By (b)(3):10 U.S.C. 21 Feb 2009 1300 GST

(b)(3):10 U.S.C. 130

W8H6B1

Note Written by (b)(3):10 U.S.C. @ 21 Feb 2009 1259 GST

(Added after encounter was signed.)

Will see in provider sick call. AC

Name:D	ETAINEE, ISN (b)(7)(E)		-		-
		Sev	М	Sponsor DETAINEE, ISN (b)(7)(E)	
EMP/SSN.	20/(b)(6)	Tel H		Rank	
DOB	01 Jan 1980	Tel W		Unit	
PC at	K78 FOREIGN NATIONAL- *OW/INTERNEE	CS.		Outpt Rec. Rm.	
MC Status		WS		PCM	
Insurance	No			fel. PCM:	

CHRONOLOGICAL RECORD OF MEDICAL CARE

Prescribed by GSA and ICMR FIRMR (41 CFR) 201-45.505

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW. VIOLATORS WILL BE PROSECUTED

Patient DETAINEE, ISN(b)(7)(E)

Facility WEH681

Date 19 Feb 2009 1453 GST Clinic TF 115 (BUCCA)

Appl Type: ROUTN Provider (b)(3):10 U.S.C. 130 (b),(b)(6)

AutoCites Refreshed by (b)(3):10 U.S.C. @ 19 Feb 2009 1453 GST 130(h) (h)(6)

visit for examination Patient Education - Dietary

Active Medications

No Active Medications Found

Altergies

No Allergies Found

Screening Written by (b)(3):10

@ 19 Feb 2009 1453 GST

Appointment Reason For Visit: Combined Systolic And Diastolic Elevation;

Selected Reason(s) For Visit:

Combined Systolic And Diastolic Elevation (New) Comments

Vitals Written by (b)(3):10

BF 150/110 HF 30 RR 16, T 98 °F Tobacco Use No, Alcohol Use No.

S/O Note Written by (b)(3):10 U.S.C. @ 19 Feb 2009 1457 GST

History of present illness

The Patient is a 29 year old male.

* Encounter Background Information. Been feeling bad. Found to have elevated BP. Hx of DM on metformin. Hx of chest pain a few days ago. None now. No hx of heart disease.

Physical findings

Vital signs:

Vital signs: BP elevated otherwise unremarkable exam. Lungs clear, heart sounds normal. No distress.

(b)(3):10 U.S.C.

AP Written by sports (hyo) @ 19 Feb 2009 1459 GST

1. HYPERTENSION (SYSTEMIC)

Comments: Begin therapy with lisinopril; obtain an EKG and medical consult, cbc, chem 13. HgBAIC, and NTG prin.

Disposition Written by 130(b) (b)(3):10 U.S.C. @ 19 Feb 2009 1459 GST

Released Without Limitations

Injury & Illness: Not Work Related. Not Battle Related. Category. All Other, Medical/Surgical Cause: Non-Battle filness

Appointment Class: Outpatient

E&M Code: 99212 - Estab Outpatient Focused H&P - Straightforward Decisions

Signed By (b)(3):10 U.S.C. (a) 19 Feb 2009 1459 GST (b)(3):10 U.S.C. 130

WBH6B1

Note Written by (b)(3):10 U.S.C. @ 25 Feb 2009 1218 GST

(Added after encounter was signed.)

19 Feb 09 @ 1715 (Coll)

WBC

x10 3/uL

RBC CNT

4.93

(4.2-6.1)x10 6/uL (12-18)

HGB .

15.9

g/dL

Name: DETAINEE, ISN(b)(7)(E)

Sex M

(4.8 - 10.8)

Sponsor:

DETAINEE, ISM(b)(7)(E)

FAIP SSN 20/(b)(6) DOB 01 Jan 1980

insurance.

Tel H Tel W CS.

Rank

Unit: Outpt Rec 2m

Pt at K78 FOREIGN NATIONAL-POW/INTERNEE Mrt Status

WS-

PCM Tel PCM

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICNIR FIRMR (41 CFR) 201-45,505

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ACLU-RDI 5858 p.12

Page I of 2

HEALTH RECORD	CHRONOLOG	000049	
19 Feb 2009 1453	Facility: W 3H6H1 Clinic: TF 115 (BUCC)	Provider: (b)(3):10 U.S.C. 130	
HCT	45.6 (42-52) % 92.6 (80.0-99.9) fl		
MCH	32.3 H (27.0-31.0) pg		

```
(130-400) g/dL
   PLATELETS 175
                                             x 10(3)/uL
   AUTOMATED LYMPH
                                      (20-40)
   LYMPH#...
                    2.1
                                          x10 3/uL
 19 Feb 09 @ 1715 (Coll)
                                               SERUM
   GLUCOSE
                                 (75-110)
                                           mg/dl
   BUN
                                       mg/dL
                               (9-20)
   CREAT
                   1.2
                              (0.8-1.5)
                                         mg/dL
                  9.6
                             (6.4-10.2)
                                       mg/dL
   PROTEIN TOTAL .....
                                  (6.3-8.2) g/dL
                4.6
   ALBUMIN
                                (3.5-5.0)
                                         g/dL
   ALK PHOS.
                     79
                                 (38-126)
                                           U/L
                  37
                              (17-59)
                                       UIL
   ALT
             25
                              (21-72)
             0.3
   TBILL
                              (2-13)
                                       mg/dL
   AMYLASE
                                 (30-110)
                                           UIL
                . 6,3
. 24
                               (3.5-8.5)
                                          mg/dL
   GGT ...
19 Feb 09 @ 1715 (Coll)
HEMOG_OBIN A1C.
                                             BLOOD
                          5.3
```

Name: DETAINEE, ISN (b)(7)(E) DETAINEE ISN(b)(7)(E) Sex. Sponsor FMP/SSN 20(b)(6) Tel H DOB: 01 Jan 1980 Tel W PC at K78 FOREIGN CS: Outpt Rec. Rm: NATIONAL-POW/INTERNEL MIC Status PCM. Insurance:

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICMR FIRMR (41 CFR) 201-45.505

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REC For us	1. Date (YYYYMMOD) 20090728		
2 Patient's Name an SN (b)(7)(E)	d SSN	3. Medical Treatment Fa	collity (Name and Location) OSPITAL
Reason for Reque The 89th Military Po Buoca, and have the r	ice Brigade and Task For	rce 134 are responsible for the care and ning files (to include the requested files	l custody of detainees at Camp s) related to all detainee deaths.
5 Private Medical Inf	ormation Sought (Specify	dates of hospitalization or clinic visits an	d diagnosis (f known)
ertaining to the deat	h and treatment related to	opy of 1) the death certificate for ISN(the cause of death, and/or 3) a summa d on 23 JUL 09, at Camp Bucca, Iraq.	
James I Care IV I	ie destiti. 1011 (OXI) (E	e on 13 301, 05, at comp Ducca, may,	
8.7%	-40		
U.S.C. 130(b),(b)(6)	(A)		
	d St	SN	
0 U.S.C. 130(b),(b)	LTC. 89th Military Police	e Brigade Deputy Brigade Commander	
	FOR USE OF	MEDICAL TREATMENT FACILITY OF	
Check applicable b		reason for disapproval)	
3 Approved	[Disabbioseo State	reescurior disapprovary	
Summary of Privat	e Medical Information Raie	ased	- 1
DA For	m 2669-i		
ertificat	e of Death	o Coverses al	
SF 600's	dated	(Cova seas)	
23 July			
23 July 20 Mar	09		
20 Mar	00		
23 Feb	09		
20 Feb 19 Feb	9		
3):10 U.S.C. 130(b),(b			10. Date (YYYYM(00)
			2009 0728

FROM: CDR, TF-134, Camp Victory, Iraq

THRU: CDR, MNF-I, Camp Victory, Iraq

TO: CDR, USCENTCOM

Subject: SIR 09-00130 add-on

1. Category: 2

2. Type of incident: Death of a Detainee

3. Date/time of incident: 231625CJUL09

4.Additional information: 232027CJUL09, CID reported that their preliminary investigation revealed that about 231600CJUL09, several Detainees began banging on the door of their MDHU. The Guard Force immediately inquired into the disturbance, and was informed that Detainee ISN(b)(7)(E) was not breathing. The Guard Force subsequently cleared out the MDHU and brought the Detainee to the TIF Medical Station, where CPR and life saving measures were begun. The Detainee was then evacuated to the TIF Hospital, where life saving measures continued unsuccessfully. The Detainee was pronounced dead at 231703CJUL09 by a Medical Doctor at the TIF Hospital. The Detainee was last seen alive by the Guard Force about 231500CJUL09, during a routine head count.

An examination of the Detainee revealed no outward signs of trauma or injury. The liver and rigor mortis were consistent with the Detainee expiring about the time of guard notification. The Detainee had previously been diagnosed with hypertension, diabetes and high cholesterol and was taking the following prescription medication: Gemisbrozil, Metormin-Glucophage, Simuvastatin, Atenold and Lisinopril. It was unknown if the Detainee had any conflicts with other Detainees within his MDHU.

A death scene examination revealed no indication of a struggle, trauma, or other signs of foul play.

At 251400CJUL09, the remains were moved to Tallil.

At 251859CJUL09, the remains had arrived at Tallil, from there; the remains will be shipped to Dover, DE by the Mortuary Affairs Team. Once the autopsy is complete, the remains will be returned to mortuary affairs. Mortuary Affairs, then has the responsibility of notifying the family and resolving the final disposition of the body. No further action is required of this unit.

- 5. Reporting Command: COL (b)(3):10 U.S.C. 89th MP BDE
- 7. Downgrading Instruction: None