MEDICAL RECORD — CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
12NOV03	Needs Tegaderm (b)(6)-2
	14 NOV - pt. rec. med - (b)(6)-2
	15 NOV - pt rec. med -
	16 Nov - pt rec. meds
17 NOV	(b)(6)-2
18 NOV	
19 Nov	(b)(6)-2
20 NOV	(b)(6)-2
21 NOV	
22 NOV	

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPARTMENT/SERVICE	RECORD MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: (Print name in inverted order, grade: Adams - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade) | REGISTER NO. | WARD NO.

ISN: (b)(6)-4

Compound/cell:

1A-49

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1
USAPA V2.00

MEDICAL RECORD — CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
12NOV03	Pt. c/o back pain + Sciadica as well as left testicle pain. Pt is referred to Iraqi Clinic (b)(6)-2

HOSPITAL OR MEDICAL FACILITY | STATUS | DEPART. SERVICE | RECORDS MAINTAINED AT

SPONSOR'S NAME | SSN/ID NO. | RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)

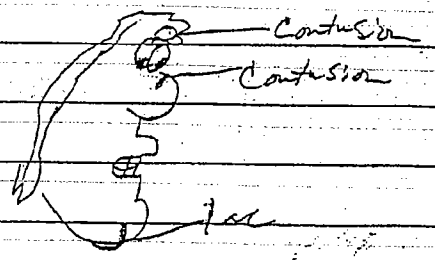
ISN: (b)(6)-2

REGISTER NO. | WARD NO.

Compound/cell: 14-35

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1
USAPA V2.00

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING OR IZATION (Sign each entry)
14NOV03	Medic was called down to Tier 1 for a prisoner that hit his head. Pt. had blood down front of clothes & sandbag over head. When cleaned pt. had Contusion over (R) eyes & contusion on nose. Pt. had lac to (R) side of chin about 1½ to 2" in length. Pt. was sutured c 3-0 sutures.



A - Pt. had injuries sustained during apprehension.

P - Sutures in (R) chin numbering in 8.
Pt. Cleaned & ointment & bandage.

SGT (b)(6)-2 9/2

STANDARD FORM 600 (REV. 6-97) BACK

USAPA V2.00

1A (b)(6)-4

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD — CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
17 NOV 03	Pt. was seen in hardcell for medical screening.
BP 122/94	
P 111	
R 99%	O— Pt. has small contusions to bilat. wrists from flexi cuffs. Pt. states he takes "Thyroxine" otherw. o known medical hx. Pt's pupils are equal + reactive
	A: Healthy pt. takes Thyroxine. (b)(6)-2 -SW
	P: Pt. needs S/W (b)(6)-2
18 Nov 03 1130	Addn'l Hx: 100mg/day 200mg next day, 4-5 days & meds (tired feeling now) USA - Synthroid or Levothyroid or Levoxyl
	P: Will give 200 mcg Synthroid Today, 150 Tomorrow, as per pt's dosage schedule. Follow for assure pt. does well. (b)(6)-2 LTC H.
19 Nov 03 1530	S: Pt. on quest. says he is feeling well (@ 200 mcg Synthr yesterday).
	O: Alert, communicative.
	A: Back on Thyroid repl. Therapy, follow
	P: 150 mcg Synthroid given Today, 200 planned tomorrow (b)(6)-2

HOSPITAL OR MEDICAL FACILITY | STATUS | REPORT SERVICE

SPONSOR'S NAME | SSN/ID NO. | RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - Last, First, Middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.) (b)(6)-4

REGISTER NO. | WARD NO.

1A-19

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1 USAPA V2.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD	CHRONOLOGICAL RECORD OF MEDICAL CARE
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

17 NOV 03 Pt. was seen in holdcell for medical screening

BP 132/92
P 112
98%

O – Pt. has minimal lac. to (L) wrist & some redness to same wrist from flexicuffs. Pt. also has small contusion (L) hairline. Pt. has no known medical hx. Pt. states he does take Rx. Treatment for HB. Pt's pupils are equal & reactive

A: healthy Pt. (b)(6)-2 SGT, 91W

P: requires no f/u (b)(3)-1

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPARTMENT/SERVICE	PRISONER IS RETAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No. or SSN; Sex; Date of Birth; Rank/Grade.)
(b)(6)-4

REGISTER NO. | WARD NO.

Cell 1A-22

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1
USAPA V2.00

MEDICAL RECORD | CHRONOLOGICAL RECORD OF [illegible] ICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
16 NOV 03	chest pain two days B/P 130/98 says he
	Needs meds - was seen two days ago.
17 NOV 03	42 y/o ♂ with Hx chronic LBP and HTN. Was Seen
	in the CSH for Heart, and back problems.
B/P 176/125	Was found to have a Normal EKG and
HR 90	Suffering from HTN.
SpO_2 98%.	
	Exam: Healthy adult ♂ NAD
Allergies:	Ø Acute Sx's
Meds: Atenolol 100mg	EOM's Normal PERRLA
Valium 5mg	Normocephalic s̄ deformity/injury
	Lungs CTA (B) Ø wheezes, rales, cough
	Heart RRR found to have NSR
PMHx: HTN	at CSH Ø arrythmias
LBP (chronic)	Ø JVD or apical impulse
MVA 9 yrs ago	Abd Soft NT ND Ø organomegally
	Ø masses
	A/P Hypertensive Iraqi male on atenolol
	100mg qd - Continue s̄ B/P ✓ q
	(b)(6)-2 LLTSD

NAME OF MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT

SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.) | REGISTER NO. | WARD NO.

(b)(6)-4 -(E) 1A-29

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1
USAPA V2.00

AUTHORIZED FOR LOCAL REPRODUCTION

MEDICAL RECORD | CHRONOLOGICAL RECORD OF [MED]ICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
17 NOV 03	C/O Swollen Testicle. NAD. (R) ↓ clinic Meds: tylenol

HOSPITAL OR MEDICAL FACILITY | STATUS | DEPART./SERVICE | RECORDS MAINTAINED AT

SPONSOR'S NAME | SSN/ID NO. | RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.) | REGISTER NO. | WARD NO.

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1
USAPA V2.00

(b)(6)-4

1B - 47

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING OR IZATION (Sign each entry)
18 Nov 03	Summary:
1700 hrs	This detainee is an adult male originally
BP: 130/80	arrested on suspicion of home invasion. He
P: [illegible]	has been noted by his guards to have been
R: 16	exhibiting unusual behavior since his
T: 99.0F°	incarceration. This behavior consists of the
pO_2: 93	detainee collecting his own feces and using
	this material to decorate his cell by smearing
	it on the walls and by making sculptures
	of animals. He has been noted to also
	smear fecal material on himself, to consume
	this material, and to drink his own urine.
	He has been noted to attempt to eat paint
	chips and fragments of concrete he chips
	from his cell. He has been seen to insert
	a cucumber and a tomato into his rectum.
	At present the detainee is limited in his
	aberrant behavior with restraints. He shows
	no evidence of gastrointestinal disturbances
	or of dehydration, and rests quietly when
	restrained and answers questions cooperatively.
	Psychiatric evaluation is requested now.
	(b)(6)-2 LTC MC

SN # (b)(6)-4

STANDARD FORM 600 (REV. 6-97) BACK

USAPA V2.00

MEDCOM - 1099

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
18 Nov 03	Summary:
1700 hrs.	This is a middle-aged male originally arrested on suspicion of murder. He has been noted since his incarceration to exhibit disruptive and pointless behavior during most of his waking hours. This behavior is characterized by wailing, gasping loudly, beating his chest or making motions as if to bring more air onto his face with his hands, and rocking back and forth. He is noted to talk constantly without seeming to make much sense. He often states that he is having a heart attack, although on physical examination no abnormalities of his pulse, heart sounds, blood pressure, or chest sounds are noted.
BP: 130/90	On examination today, the detainee appeared calm for the first time since I have seen him. He converses and answers questions today, and states that he is not crazy. Psychiatric evaluation is requested please.
P: 83	
R: 28	
T: 98.2	
pO_2: 99	

(b)(6)-2

LTC MC

(b)(6)-4

STANDARD FORM 600 (REV. 8-97) BACK

USAPA V2.0

MEDCOM - 1100

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
18 Nov 03	Summary:
1700 hrs	This detainee is a young adult female, slight in size. She was detained one day ago, and since that time has been noted to nearly constantly, and without cessation be singing and reciting Arabic poetry. She states on questioning that she usually takes a medication called Ativan, and that she would like to be given this medication (This medication is not available readily for her at this time in her present location). She also states that she has breast cancer, that she has heart disease, and that she hears noise inside her head. She has been noted during the day to state that she is an ambassador, an Arab American, and also that she is a three-star general. Psychiatric evaluation is requested please
BP: 160/80	
P: 122	
R: 44	
T: 97	
pO_2: 100	
	(b)(6)-2
	LTC MC

SN # (b)(6)-4

STANDARD FORM 600 (REV. 6-97) BACK

USAPA V2.00

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
18 Nov. 03 1200	This detainee is an adult male originally detained for a curfew violation. Since his arrest he has been noted to exhibit unusual behavior, consisting of regular efforts to flood his cell with water, and he is stopped from this effort only by the shutting off of water service to his cell. Additionally, he is noted by the guards to hold conversations with imaginary people who he believes are with him in his cell. He has been noted also to prefer collecting small piles of garbage and trash from his meals and to strew these around his cell, also wetting these piles down with water when he has it. Psychiatric evaluation is requested please.
Summary:	
BP: 140/80	
P: 107	
R: 16	
T: 97.2F	
pO_2: 97	

(b)(6)-2

(b)(6)-4

STANDARD FORM 600 (REV. 6-97) BACK

USAPA V2.01

MEDCOM - 1102

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORG	TION (Sign each entry)

18 Nov 03 Summary:

This detainee is an adult male originally arrested on suspicion of simple assault. He exhibited disruptive activity by throwing rocks at guards and was transferred to solitary confinement during approximately the last week in October. At that time he began to refuse to eat or drink. He also began to state that all of the prison personnel were enemies, the interpreters were spies, and that Saddam Hussein would return to kill everyone. Because of a daily state of dehydration caused by no oral water intake, the detainee was treated with nearly daily intravenous fluid administration, ranging from four to six liters of fluid per day to maintain his hydration.

BP: 110/60
P: 108
R: 16
T: 99.2F°
pO_2: 99

At present, the detainee takes small amounts of food and water on an irregular basis but not enough to ensure adequate health. He remains delusional, and mildly combative despite a weakened condition. He has lost considerable weight. Psychiatric evaluation requested please. (b)(6)-2 - LTC MC

(b)(6)-4

STANDARD FORM 600 (REV. 8-97) BACK

USAPA V2.00

1B 57

MEDCOM - 1103

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING O[illegible]ATION (Sign each entry)
18 NOV 03	Called to hard Site for an Inmate who apparently was having having a seizure. Prior to the Seizure the Inmate was found to have a lge amount of Contraband including Cash, Hygroblaa and letters. As the Inmate was being brought to Isolation he began having an apparent Seizure. No previous medical history was available at the time of exam. No known Hx of Seizure disorder. Otherwise he had a (L) leg Cast.
B/P 132/72	
HR 72	
SPO2 98%	
Allergies: Unknown	
Meds: Unknown	
Hx: Fx (L) leg	
Reflexes	
	Exam: Unresponsive adult male
	Vital Signs normal.
	Limbs have normal muscle tone.
	- Pt alternates B/w rigid muscle contraction and flaccid, passive control.
	Pupils & Corneal Reflexes
	Responds to painful Stimuli
	Intermittently lifts/s with movements voluntarily.
	Seizure has lasted > 40 min at this time.
	A/P ① False Seizure - Patient Isolation for 2° gain i.e. avoid punishment.
	② Patient was left alone and over →

STANDARD FORM 600 (REV. 6-97) BACK

USAPA V2.0

(b)(6)-4

18 –

MEDCOM - 1104

Cont Symptoms resolved since action & hangover or 2° Symptoms reported or witnessed.

(b)(6)-2 LCSP

30 NOV 03

Recheck on Inmate (b)(6)-4 During time of 2° Symptomology. Appears to have recovered from his supposed Seizure and has not suffered any more Symptoms.

(b)(6)-2 LCSP

MEDICAL RECORD | **CHRONOLOGICAL RECORD OF [illegible]ICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION *(Sign each entry)*
23NOV	S: Interpreter informs me Ø inmates ~~had~~ has a bad HA, ABD cramps
2198	nausea/ dry heaving (currently) ~~and~~ X1 earlier small amounts X2 of clear vomit
	Informed also ABD cramps on palpation are a 7-8/10. Ø diarrhea
BP 116/64	or constipation. Interpreter also states inmate has been drinking little
P 108	since end of fasting.
R 20-24	O: Inmate lying on side guarding his ABD + side, currently appears
T 97[8]	to be dry heaving. Inmate in obvious discomfort, weak/fatigued.
	Inmate ~~is~~ slightly dizzy when getting up off the floor to lay down.
MEDS: Tylenol 325mg #iii	
ē Benadryl 10mg	A: VS appear to be stable although slight tachycardic Ø fever
25mg Phenergan IM	ABD tender + painful to palpation
	Unable to detect ~~BS [illegible]~~ BS x4
	P: - Have MP's monitor if any vomiting episodes
	- Informed interpreter to tell inmate to drink small sips of H_2O p̄ 15 mins. + if no N/V
	- Gave meds listed
	(b)(6)-2

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO:	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade) | REGISTER NO. | WARD NO.

(b)(6)-4

1A

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRMR (41 CFR) 201-9.202-1
USAPA V2.00

MEDCOM - 1106

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING OR[GANIZA]TION. *(Sign each entry)*
27 NOV 03	PXO painful pins
	Pins [illegible] Red [illegible] c̄ small sores
	② to Clinic

STANDARD FORM 600 (REV. 6-97)

USAPA V2.00

(b)(6)-4

1B 65