

Case Nos. 19-35017 and 19-35019

UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT

ADREE EDMO,
Plaintiff-Appellee,
v.
IDAHO DEPARTMENT OF CORRECTIONS, ET AL.,
Defendants-Appellants.

On Appeal from Orders of the United States District Court
For the District of Idaho
(No. 1:17-cv-00151-BLW)

EXCERPTS OF RECORD
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Dated: March 6, 2019

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Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
02/27/2018	17:58(MT)	1.00	Patient Specific	Administered	
02/26/2018	17:07(MT)	1.00	Patient Specific	Administered	
02/25/2018	17:18(MT)	1.00	Patient Specific	Administered	
02/24/2018	17:33(MT)	1.00	Patient Specific	Administered	
02/23/2018	17:30(MT)	1.00	Patient Specific	Administered	
02/22/2018	17:55(MT)	1.00	Patient Specific	Administered	
02/21/2018	17:44(MT)	1.00	Patient Specific	Administered	
02/20/2018	17:32(MT)	1.00	Patient Specific	Administered	
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02/17/2018	17:34(MT)	1.00	Patient Specific	Administered	
02/16/2018	17:33(MT)	1.00	Patient Specific	Administered	
02/15/2018	18:05(MT)	1.00	Patient Specific	Administered	
02/14/2018	17:56(MT)	1.00	Patient Specific	Administered	
02/13/2018	18:41(MT)	1.00	Patient Specific	Administered	
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02/11/2018	17:16(MT)	1.00	Patient Specific	Administered	
02/10/2018	17:20(MT)	1.00	Patient Specific	Administered	
02/09/2018	17:31(MT)	1.00	Patient Specific	Administered	
02/08/2018	17:35(MT)	1.00	Patient Specific	Administered	
02/07/2018	17:21(MT)	1.00	Patient Specific	Administered	
02/06/2018	17:30(MT)	1.00	Patient Specific	Administered	
02/05/2018	18:55(MT)	0.00	Patient Specific	No Show	
02/04/2018	17:04(MT)	1.00	Patient Specific	Administered	
02/03/2018	17:11(MT)	1.00	Patient Specific	Administered	
02/02/2018	17:57(MT)	1.00	Patient Specific	Administered	
02/01/2018	17:29(MT)	1.00	Patient Specific	Administered	
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01/29/2018	21:12(MT)	0.00	Patient Specific	No Show	
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01/27/2018	17:23(MT)	1.00	Patient Specific	Administered	
01/26/2018	17:23(MT)	1.00	Patient Specific	Administered	
01/25/2018	18:15(MT)	1.00	Patient Specific	Administered	
01/24/2018	17:32(MT)	1.00	Patient Specific	Administered	
01/23/2018	17:23(MT)	1.00	Patient Specific	Administered	
01/22/2018	17:19(MT)	1.00	Patient Specific	Administered	
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01/11/2018	18:34(MT)	1.00	Patient Specific	Administered	
01/10/2018	18:29(MT)	1.00	Patient Specific	Administered	
01/09/2018	18:36(MT)	1.00	Patient Specific	Administered	
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01/03/2018	17:12(MT)	1.00	Patient Specific	Administered	
01/02/2018	17:45(MT)	1.00	Patient Specific	Administered	
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12/26/2017	17:24(MT)	1.00	Patient Specific	Administered	
12/25/2017	16:25(MT)	1.00	Patient Specific	Administered	
12/24/2017	17:17(MT)	1.00	Patient Specific	Administered	
12/23/2017	17:14(MT)	1.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
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12/18/2017	17:14(MT)	1.00	Patient Specific	Administered	
12/17/2017	17:29(MT)	1.00	Patient Specific	Administered	
12/16/2017	17:10(MT)	1.00	Patient Specific	Administered	
12/15/2017	17:07(MT)	1.00	Patient Specific	Administered	
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12/08/2017	17:19(MT)	1.00	Patient Specific	Administered	
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11/29/2017	17:07(MT)	1.00	Patient Specific	Administered	
11/28/2017	17:45(MT)	1.00	Patient Specific	Administered	
11/27/2017	17:10(MT)	1.00	Patient Specific	Administered	
11/26/2017	17:10(MT)	1.00	Patient Specific	Administered	
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11/23/2017	16:38(MT)	1.00	Patient Specific	Administered	
11/22/2017	17:18(MT)	1.00	Patient Specific	Administered	
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11/20/2017	17:33(MT)	1.00	Patient Specific	Administered	
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11/16/2017	17:54(MT)	1.00	Patient Specific	Administered	
11/15/2017	17:53(MT)	0.00	Patient Specific	No Show	
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11/13/2017	17:21(MT)	1.00	Patient Specific	Administered	
11/12/2017	21:32(MT)	1.00	Patient Specific	Administered	
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11/08/2017	18:07(MT)	1.00	Patient Specific	Administered	
11/07/2017	17:35(MT)	1.00	Patient Specific	Administered	
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11/04/2017	17:30(MT)	1.00	Patient Specific	Administered	
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11/02/2017	17:43(MT)	1.00	Patient Specific	Administered	
11/01/2017	17:21(MT)	1.00	Patient Specific	Administered	
10/31/2017	17:26(MT)	1.00	Clinic Stock	Administered	
10/30/2017	17:42(MT)	1.00	Clinic Stock	Administered	

Ordered Date: 10/30/2017 Time: 09:46:36 AM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Order Number: 0161729 Rx Number: 38974626
 Ordering Practitioner*: Haggard, Rebekah Sequence Number: 01

Prescription
 Diagnosis Code*: Nurse Override
 Formulary Non-Formulary
 Drug Type: SPIRONOLACTONE TABS 100 Mg Tabs
 National NDC Code*:
 RxNorm: 198222 - Spironolactone 100 MG Oral Tablet;
 Effective Date: 10/30/2017
 Generic Acceptable
 Profile Only:
 Dosage*: 1
 Strength*: 100 Mg
 Frequency*: BID-TWICE DAILY
 for*: 365 days (Total duration)
 Route of Administration*: PO-By Mouth Method*: Normal Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: No Expiration: 10/29/2018
 Delivery Trn Frame*: Routine Drug on hold until: 01/23/2018

Order Information
 Pharmacy Indicated # Refills: 11 # Refills Issued: 4
 Received From Pharmacy: 01/18/2018
 Status*: Discontinued - Other As of Date*: 01/30/2018
 Authorized By*: Eldredge, Summer

Pharmacy Medication Substitution
 Name= Same As Above

Comments
 At 01/31/2018 12:04:43 a prescription order message from the Pharmacy, with a status of "Order Discontinued at Pharmacy Vendor (DR)", was not processed because the prescription status in eOMIS was "Discontinued - Other" at the time the pharmacy message was received.
 cc med renewal
 HOLD ALDACTONE THRU 1/22/18 PER Eldredge.
 TimeStamp: 18 January 2018 05:10:44 (MT) --- User: Lyndsey Brown (BROLY01)
 HOLD ALDACTONE THRU 1/29/18 PER WELLNESS CENTER
 TimeStamp: 23 January 2018 07:40:37 (MT) --- User: Lyndsey Brown (BROLY01)
hold Aldactone thru AM pill call on 1/30/18 per Wellness Center will evaluate after labs.
 TimeStamp: 29 January 2018 12:33:58 (MT) --- User: Lyndsey Brown (BROLY01)

Medication Administration Record (1 of 183)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
01/30/2018	07:10(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/29/2018	07:51(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/29/2018	07:28(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/28/2018	06:27(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/28/2018	06:26(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/27/2018	08:07(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/27/2018	08:06(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/26/2018	17:23(MT)	1.00	Patient Specific	Administered	
01/26/2018	07:02(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/25/2018	07:36(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/25/2018	07:04(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/24/2018	07:19(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/24/2018	07:17(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/23/2018	07:39(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/23/2018	07:12(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/22/2018	06:08(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/22/2018	06:07(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/21/2018	17:25(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/21/2018	06:17(MT)	0.00	Patient Specific	Held per Practitioner Order	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
01/20/2018	05:53(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/20/2018	05:53(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/19/2018	05:07(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/19/2018	05:07(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/18/2018	05:09(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/18/2018	05:08(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/17/2018	14:02(MT)	0.00	Patient Specific	Held per Practitioner Order	
01/17/2018	08:17(MT)	1.00	Patient Specific	Administered	
01/16/2018	20:10(MT)	1.00	Patient Specific	Administered	
01/16/2018	08:40(MT)	1.00	Patient Specific	Administered	
01/15/2018	20:42(MT)	1.00	Patient Specific	Administered	
01/15/2018	08:14(MT)	1.00	Patient Specific	Administered	
01/14/2018	19:10(MT)	1.00	Patient Specific	Administered	
01/14/2018	08:31(MT)	1.00	Patient Specific	Administered	
01/13/2018	18:56(MT)	1.00	Patient Specific	Administered	
01/13/2018	08:08(MT)	1.00	Patient Specific	Administered	
01/12/2018	21:21(MT)	1.00	Patient Specific	Administered	
01/12/2018	08:42(MT)	1.00	Patient Specific	Administered	
01/11/2018	18:34(MT)	1.00	Patient Specific	Administered	
01/11/2018	08:50(MT)	1.00	Patient Specific	Administered	
01/10/2018	18:29(MT)	1.00	Patient Specific	Administered	
01/10/2018	08:27(MT)	1.00	Patient Specific	Administered	
01/09/2018	18:36(MT)	1.00	Patient Specific	Administered	
01/09/2018	08:41(MT)	1.00	Patient Specific	Administered	
01/08/2018	21:31(MT)	1.00	Patient Specific	Administered	
01/08/2018	10:43(MT)	1.00	Patient Specific	Administered	
01/07/2018	17:24(MT)	1.00	Patient Specific	Administered	
01/07/2018	10:13(MT)	1.00	Patient Specific	Administered	
01/06/2018	18:02(MT)	1.00	Patient Specific	Administered	
01/06/2018	09:37(MT)	1.00	Patient Specific	Administered	
01/05/2018	17:31(MT)	1.00	Patient Specific	Administered	
01/05/2018	07:36(MT)	1.00	Patient Specific	Administered	
01/04/2018	17:49(MT)	1.00	Patient Specific	Administered	
01/04/2018	07:21(MT)	1.00	Patient Specific	Administered	
01/03/2018	17:12(MT)	1.00	Patient Specific	Administered	
01/03/2018	07:15(MT)	1.00	Patient Specific	Administered	
01/02/2018	17:45(MT)	1.00	Patient Specific	Administered	
01/02/2018	07:40(MT)	1.00	Patient Specific	Administered	
01/01/2018	17:48(MT)	1.00	Patient Specific	Administered	
01/01/2018	07:35(MT)	1.00	Patient Specific	Administered	
12/31/2017	17:58(MT)	1.00	Patient Specific	Administered	
12/31/2017	08:19(MT)	1.00	Patient Specific	Administered	
12/30/2017	17:15(MT)	1.00	Patient Specific	Administered	
12/30/2017	08:27(MT)	1.00	Patient Specific	Administered	
12/29/2017	17:44(MT)	0.00	Patient Specific	No Show	
12/29/2017	06:57(MT)	1.00	Patient Specific	Administered	
12/28/2017	17:52(MT)	1.00	Patient Specific	Administered	
12/28/2017	09:38(MT)	1.00	Patient Specific	Administered	
12/27/2017	17:06(MT)	1.00	Patient Specific	Administered	
12/27/2017	07:10(MT)	1.00	Patient Specific	Administered	
12/26/2017	17:24(MT)	1.00	Patient Specific	Administered	
12/26/2017	07:58(MT)	1.00	Patient Specific	Administered	
12/25/2017	16:25(MT)	1.00	Patient Specific	Administered	
12/25/2017	08:09(MT)	1.00	Patient Specific	Administered	
12/24/2017	17:17(MT)	1.00	Patient Specific	Administered	
12/24/2017	08:05(MT)	1.00	Patient Specific	Administered	
12/23/2017	17:14(MT)	1.00	Patient Specific	Administered	
12/23/2017	08:11(MT)	1.00	Patient Specific	Administered	
12/22/2017	17:32(MT)	1.00	Patient Specific	Administered	
12/22/2017	07:10(MT)	1.00	Patient Specific	Administered	
12/21/2017	18:28(MT)	0.00	Patient Specific	No Show	
12/21/2017	07:13(MT)	1.00	Patient Specific	Administered	
12/20/2017	17:48(MT)	1.00	Patient Specific	Administered	
12/20/2017	07:19(MT)	1.00	Patient Specific	Administered	
12/19/2017	17:11(MT)	1.00	Patient Specific	Administered	
12/19/2017	07:16(MT)	1.00	Patient Specific	Administered	
12/18/2017	17:14(MT)	1.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
12/18/2017	07:19(MT)	1.00	Patient Specific	Administered	
12/17/2017	17:29(MT)	1.00	Patient Specific	Administered	
12/17/2017	08:07(MT)	1.00	Patient Specific	Administered	
12/16/2017	17:30(MT)	1.00	Patient Specific	Administered	
12/16/2017	08:00(MT)	1.00	Patient Specific	Administered	
12/15/2017	17:07(MT)	1.00	Patient Specific	Administered	
12/15/2017	07:04(MT)	1.00	Patient Specific	Administered	
12/14/2017	17:15(MT)	1.00	Patient Specific	Administered	
12/14/2017	08:21(MT)	0.00	Patient Specific	No Show	12/14/2017 07:26:37 Cleveland, Penny No Show Late Entry for 12-13-2017
12/14/2017	07:11(MT)	1.00	Patient Specific	Administered	
12/13/2017	17:02(MT)	1.00	Patient Specific	Administered	
12/12/2017	17:19(MT)	1.00	Patient Specific	Administered	
12/12/2017	07:02(MT)	1.00	Patient Specific	Administered	
12/11/2017	18:06(MT)	0.00	Patient Specific	No Show	
12/11/2017	07:30(MT)	0.00	Patient Specific	No Show	
12/10/2017	17:05(MT)	1.00	Patient Specific	Administered	
12/10/2017	08:06(MT)	1.00	Patient Specific	Administered	
12/09/2017	17:26(MT)	1.00	Patient Specific	Administered	
12/09/2017	08:12(MT)	1.00	Patient Specific	Administered	
12/08/2017	17:19(MT)	1.00	Patient Specific	Administered	
12/08/2017	07:14(MT)	1.00	Patient Specific	Administered	
12/07/2017	17:49(MT)	1.00	Patient Specific	Administered	
12/07/2017	07:39(MT)	1.00	Patient Specific	Administered	
12/06/2017	18:17(MT)	1.00	Patient Specific	Administered	
12/06/2017	06:53(MT)	1.00	Patient Specific	Administered	
12/05/2017	17:15(MT)	1.00	Patient Specific	Administered	
12/05/2017	07:00(MT)	1.00	Patient Specific	Administered	
12/04/2017	17:31(MT)	1.00	Patient Specific	Administered	
12/04/2017	07:09(MT)	1.00	Patient Specific	Administered	
12/03/2017	17:19(MT)	1.00	Patient Specific	Administered	
12/03/2017	08:05(MT)	1.00	Patient Specific	Administered	
12/02/2017	17:08(MT)	1.00	Patient Specific	Administered	
12/02/2017	08:08(MT)	1.00	Patient Specific	Administered	
12/01/2017	17:19(MT)	1.00	Patient Specific	Administered	
12/01/2017	07:13(MT)	1.00	Patient Specific	Administered	
11/30/2017	17:07(MT)	1.00	Patient Specific	Administered	
11/30/2017	07:02(MT)	1.00	Patient Specific	Administered	
11/29/2017	17:07(MT)	1.00	Patient Specific	Administered	
11/29/2017	06:55(MT)	1.00	Patient Specific	Administered	
11/28/2017	17:45(MT)	1.00	Patient Specific	Administered	
11/28/2017	07:05(MT)	1.00	Patient Specific	Administered	
11/27/2017	17:10(MT)	1.00	Patient Specific	Administered	
11/27/2017	07:09(MT)	1.00	Patient Specific	Administered	
11/26/2017	17:10(MT)	1.00	Patient Specific	Administered	
11/26/2017	08:12(MT)	1.00	Patient Specific	Administered	
11/25/2017	17:11(MT)	1.00	Patient Specific	Administered	
11/25/2017	08:14(MT)	1.00	Patient Specific	Administered	
11/24/2017	17:16(MT)	1.00	Patient Specific	Administered	
11/24/2017	07:10(MT)	1.00	Patient Specific	Administered	
11/23/2017	16:38(MT)	1.00	Patient Specific	Administered	
11/23/2017	08:16(MT)	1.00	Patient Specific	Administered	
11/22/2017	17:18(MT)	1.00	Patient Specific	Administered	
11/22/2017	07:17(MT)	1.00	Patient Specific	Administered	
11/21/2017	17:19(MT)	1.00	Patient Specific	Administered	
11/21/2017	07:06(MT)	1.00	Patient Specific	Administered	
11/20/2017	17:33(MT)	1.00	Patient Specific	Administered	
11/20/2017	07:11(MT)	1.00	Patient Specific	Administered	
11/19/2017	17:06(MT)	1.00	Patient Specific	Administered	
11/19/2017	08:15(MT)	1.00	Patient Specific	Administered	
11/18/2017	17:17(MT)	1.00	Patient Specific	Administered	
11/18/2017	08:10(MT)	1.00	Patient Specific	Administered	
11/17/2017	18:03(MT)	0.00	Patient Specific	No Show	
11/17/2017	07:08(MT)	1.00	Patient Specific	Administered	
11/16/2017	17:54(MT)	1.00	Patient Specific	Administered	
11/16/2017	07:03(MT)	1.00	Patient Specific	Administered	
11/15/2017	17:53(MT)	0.00	Patient Specific	No Show	
11/15/2017	07:23(MT)	0.00	Patient Specific	No Show	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
11/14/2017	17:04(MT)	1.00	Patient Specific	Administered	
11/14/2017	07:34(MT)	1.00	Patient Specific	Administered	
11/14/2017	07:06(MT)	1.00	Patient Specific	Administered	
11/13/2017	17:21(MT)	1.00	Patient Specific	Administered	
11/13/2017	07:17(MT)	1.00	Patient Specific	Administered	
11/12/2017	21:32(MT)	1.00	Patient Specific	Administered	
11/11/2017	17:08(MT)	1.00	Patient Specific	Administered	
11/11/2017	08:13(MT)	1.00	Patient Specific	Administered	
11/10/2017	17:09(MT)	1.00	Patient Specific	Administered	
11/10/2017	07:10(MT)	1.00	Patient Specific	Administered	
11/09/2017	16:59(MT)	1.00	Patient Specific	Administered	
11/09/2017	07:08(MT)	1.00	Patient Specific	Administered	
11/08/2017	18:07(MT)	1.00	Patient Specific	Administered	
11/08/2017	07:05(MT)	1.00	Patient Specific	Administered	
11/07/2017	17:35(MT)	1.00	Patient Specific	Administered	
11/07/2017	07:11(MT)	1.00	Patient Specific	Administered	
11/06/2017	17:21(MT)	1.00	Patient Specific	Administered	
11/06/2017	07:28(MT)	1.00	Patient Specific	Administered	
11/05/2017	17:28(MT)	1.00	Patient Specific	Administered	
11/05/2017	07:57(MT)	1.00	Patient Specific	Administered	
11/04/2017	17:30(MT)	1.00	Patient Specific	Administered	
11/04/2017	08:06(MT)	1.00	Patient Specific	Administered	
11/03/2017	17:40(MT)	0.00	Patient Specific	No Show	
11/03/2017	06:52(MT)	1.00	Patient Specific	Administered	
11/02/2017	17:43(MT)	1.00	Patient Specific	Administered	
11/02/2017	06:56(MT)	1.00	Patient Specific	Administered	
11/01/2017	17:21(MT)	1.00	Patient Specific	Administered	
11/01/2017	06:55(MT)	1.00	Clinic Stock	Administered	
10/31/2017	17:26(MT)	1.00	Clinic Stock	Administered	
10/31/2017	07:07(MT)	1.00	Clinic Stock	Administered	
10/30/2017	17:42(MT)	1.00	Clinic Stock	Administered	

CrossCheck - Drug Prescription Order

Ordered Date: 11/09/2017 Time: 07:53:04 AM (MT)
 Encounter Type: Nurse Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Order Number: 0165184 Rx Number: 39043221
 Ordering Practitioner*: Haggard, Rebekah Sequence Number: 01

Prescription

Diagnosis Code*: Nurse Override
 Formulary Non-Formulary
 Drug Type: FINASTERIDE (UD) TABS 5 Mg Tabs
 RxNorm: 310346 - FIN5C 5 MG Oral Tablet;
 Effective Date: 11/09/2017
 Generic Acceptable
 Profile Only:
 Dosage*: 1
 Strength*: 5 Mg
 Frequency*: QD-EVERY DAY
 for*: 90 days (Total duration)
 Route of Administration*: PO-By Mouth Method*: Normal Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: No Expiration: 02/06/2018
 Delivery Trn Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 2 # Refills Issued: 2
 Received From Pharmacy: 01/11/2018
 Status*: Discontinued - Other As of Date*: 01/25/2018
 Authorized By*: Eldredge, Summer

Pharmacy Medication Substitution

Name= Same As Above

Comments

At 01/26/2018 12:04:07 a prescription order message from the Pharmacy, with a status of "Order Discontinued at Pharmacy Vendor (DR)", was not processed because the prescription status in eOMIS was "Discontinued - Other" at the time the pharmacy message was received.
 TimeStamp: 9 November 2017 07:56:38 (MT) --- User: Nicholas Wise (WISNI01)

Medication Administration Record (1 - 77 of 77)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
01/25/2018	07:04(MT)	1.00	Patient Specific	Administered	
01/24/2018	07:19(MT)	1.00	Patient Specific	Administered	
01/23/2018	07:15(MT)	1.00	Patient Specific	Administered	
01/22/2018	07:31(MT)	1.00	Patient Specific	Administered	
01/21/2018	08:17(MT)	1.00	Patient Specific	Administered	
01/20/2018	08:20(MT)	1.00	Patient Specific	Administered	
01/19/2018	07:20(MT)	1.00	Patient Specific	Administered	
01/18/2018	08:21(MT)	1.00	Patient Specific	Administered	
01/17/2018	08:17(MT)	1.00	Patient Specific	Administered	
01/16/2018	08:40(MT)	1.00	Patient Specific	Administered	
01/15/2018	08:14(MT)	1.00	Patient Specific	Administered	
01/14/2018	08:31(MT)	1.00	Patient Specific	Administered	
01/13/2018	08:08(MT)	1.00	Patient Specific	Administered	
01/12/2018	08:42(MT)	1.00	Patient Specific	Administered	
01/11/2018	08:50(MT)	1.00	Patient Specific	Administered	
01/10/2018	08:27(MT)	1.00	Patient Specific	Administered	
01/09/2018	08:41(MT)	1.00	Patient Specific	Administered	
01/08/2018	10:43(MT)	1.00	Patient Specific	Administered	
01/07/2018	10:13(MT)	1.00	Patient Specific	Administered	
01/06/2018	09:37(MT)	1.00	Patient Specific	Administered	
01/05/2018	07:36(MT)	1.00	Patient Specific	Administered	
01/04/2018	07:21(MT)	1.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
01/03/2018	07:15(MT)	1.00	Patient Specific	Administered	
01/02/2018	07:40(MT)	1.00	Patient Specific	Administered	
01/01/2018	07:35(MT)	1.00	Patient Specific	Administered	
12/31/2017	08:19(MT)	1.00	Patient Specific	Administered	
12/30/2017	08:27(MT)	1.00	Patient Specific	Administered	
12/29/2017	06:57(MT)	1.00	Patient Specific	Administered	
12/28/2017	09:38(MT)	1.00	Patient Specific	Administered	
12/27/2017	07:10(MT)	1.00	Patient Specific	Administered	
12/26/2017	07:58(MT)	1.00	Patient Specific	Administered	
12/25/2017	08:09(MT)	1.00	Patient Specific	Administered	
12/24/2017	08:05(MT)	1.00	Patient Specific	Administered	
12/23/2017	08:11(MT)	1.00	Patient Specific	Administered	
12/22/2017	07:10(MT)	1.00	Patient Specific	Administered	
12/21/2017	07:13(MT)	1.00	Patient Specific	Administered	
12/20/2017	07:19(MT)	1.00	Patient Specific	Administered	
12/19/2017	07:16(MT)	1.00	Patient Specific	Administered	
12/18/2017	07:19(MT)	1.00	Patient Specific	Administered	
12/17/2017	08:07(MT)	1.00	Patient Specific	Administered	
12/16/2017	08:00(MT)	1.00	Patient Specific	Administered	
12/15/2017	07:04(MT)	1.00	Patient Specific	Administered	
12/14/2017	08:21(MT)	0.00	Patient Specific	No Show	12/14/2017 07:25:51 Cleveland, Penny No Show Late Entry for 12-13-2017
12/14/2017	07:11(MT)	1.00	Patient Specific	Administered	
12/12/2017	07:02(MT)	1.00	Patient Specific	Administered	
12/11/2017	07:30(MT)	0.00	Patient Specific	No Show	
12/10/2017	08:06(MT)	1.00	Patient Specific	Administered	
12/09/2017	08:12(MT)	1.00	Patient Specific	Administered	
12/08/2017	07:14(MT)	1.00	Patient Specific	Administered	
12/07/2017	07:39(MT)	1.00	Patient Specific	Administered	
12/06/2017	06:53(MT)	1.00	Patient Specific	Administered	
12/05/2017	07:00(MT)	1.00	Patient Specific	Administered	
12/04/2017	07:09(MT)	1.00	Patient Specific	Administered	
12/03/2017	08:05(MT)	1.00	Patient Specific	Administered	
12/02/2017	08:08(MT)	1.00	Patient Specific	Administered	
12/01/2017	07:13(MT)	1.00	Patient Specific	Administered	
11/30/2017	07:02(MT)	1.00	Patient Specific	Administered	
11/29/2017	06:55(MT)	1.00	Patient Specific	Administered	
11/28/2017	07:05(MT)	1.00	Patient Specific	Administered	
11/27/2017	07:09(MT)	1.00	Patient Specific	Administered	
11/26/2017	08:12(MT)	1.00	Patient Specific	Administered	
11/25/2017	08:14(MT)	1.00	Patient Specific	Administered	
11/24/2017	07:10(MT)	1.00	Patient Specific	Administered	
11/23/2017	08:16(MT)	1.00	Patient Specific	Administered	
11/22/2017	07:17(MT)	1.00	Patient Specific	Administered	
11/21/2017	07:06(MT)	1.00	Patient Specific	Administered	
11/20/2017	07:11(MT)	1.00	Patient Specific	Administered	
11/19/2017	08:15(MT)	1.00	Patient Specific	Administered	
11/18/2017	08:10(MT)	1.00	Patient Specific	Administered	
11/17/2017	07:08(MT)	1.00	Patient Specific	Administered	
11/16/2017	07:03(MT)	1.00	Patient Specific	Administered	
11/15/2017	07:23(MT)	0.00	Patient Specific	No Show	
11/14/2017	07:34(MT)	1.00	Patient Specific	Administered	
11/14/2017	07:06(MT)	1.00	Patient Specific	Administered	
11/13/2017	07:17(MT)	1.00	Patient Specific	Administered	
11/11/2017	08:13(MT)	1.00	Patient Specific	Administered	
11/10/2017	07:10(MT)	1.00	Clinic Stock	Administered	

CR530578 - Drug Prescription Order

Name: YIPPO, MASON D (Unit: 346/01)

Ordered Date: 01/04/2018 Time: 02:58:07 PM (MT)

Encounter Type: Nurse - Verbal/Telephone Orders

Location: Idaho State Correctional Institution [ISC]

Order Number: 0182831 Staff: Savell, Julie

Ordering Practitioner*: Haggard, Rebekah Rx Number: 39391408

Sequence Number: 00

Prescription

Diagnosis Code*: Nurse Override

Formulary Non-Formulary

Drug Type: ESTRADIOL TABS 2 Mg Tabs

National NIE Code(s)

RxNorm: 197659 - Estradiol 2 MG Oral Tablet;

Effective Date: 01/04/2018

Generic Acceptable

Profile Only:

Dosage*: 2

Strength*: 2 Mg

Frequency*: BID-TWICE DAILY

for*: 90 days (Total duration)

Route of Administration*: PO-By Mouth Method*: Normal Dose

Pill Call* AM: Noon: PM: Bed Time:

Keep on Person?: No Expiration: 04/03/2018

Delivery Trn Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 2 # Refills Issued: 2

Received From Pharmacy: 03/06/2018

Status*: Order Discontinued at Pharmacy Vendor (DR) As of Date*: 04/03/2018

Authorized By*:

Pharmacy Medication Substitution

Name= Same As Above

Comments

None

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Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
04/03/2018	17:13(MT)	2.00	Patient Specific	Administered	
04/03/2018	06:55(MT)	2.00	Patient Specific	Administered	
04/02/2018	17:28(MT)	2.00	Patient Specific	Administered	
04/02/2018	07:00(MT)	2.00	Patient Specific	Administered	
04/01/2018	17:27(MT)	2.00	Patient Specific	Administered	
04/01/2018	08:08(MT)	2.00	Patient Specific	Administered	
03/31/2018	17:22(MT)	2.00	Patient Specific	Administered	
03/31/2018	08:20(MT)	2.00	Patient Specific	Administered	
03/30/2018	17:37(MT)	2.00	Patient Specific	Administered	
03/30/2018	07:07(MT)	2.00	Patient Specific	Administered	
03/29/2018	17:35(MT)	2.00	Patient Specific	Administered	
03/29/2018	07:06(MT)	2.00	Patient Specific	Administered	
03/28/2018	18:33(MT)	2.00	Patient Specific	Administered	
03/28/2018	06:57(MT)	2.00	Patient Specific	Administered	
03/27/2018	17:18(MT)	2.00	Patient Specific	Administered	
03/27/2018	07:04(MT)	2.00	Patient Specific	Administered	
03/26/2018	17:13(MT)	2.00	Patient Specific	Administered	
03/26/2018	07:11(MT)	2.00	Patient Specific	Administered	
03/25/2018	17:54(MT)	2.00	Patient Specific	Administered	
03/25/2018	08:00(MT)	2.00	Patient Specific	Administered	
03/24/2018	17:24(MT)	2.00	Patient Specific	Administered	
03/24/2018	08:06(MT)	2.00	Patient Specific	Administered	
03/23/2018	17:35(MT)	2.00	Patient Specific	Administered	
03/23/2018	07:06(MT)	2.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
03/22/2018	17:43(MT)	2.00	Patient Specific	Administered	
03/22/2018	07:00(MT)	2.00	Patient Specific	Administered	
03/21/2018	17:14(MT)	2.00	Patient Specific	Administered	
03/21/2018	06:57(MT)	2.00	Patient Specific	Administered	
03/20/2018	17:25(MT)	2.00	Patient Specific	Administered	
03/20/2018	07:03(MT)	2.00	Patient Specific	Administered	
03/19/2018	17:05(MT)	2.00	Patient Specific	Administered	
03/19/2018	06:58(MT)	2.00	Patient Specific	Administered	
03/18/2018	18:03(MT)	0.00	Patient Specific	No Show	
03/18/2018	08:08(MT)	2.00	Patient Specific	Administered	
03/17/2018	17:55(MT)	2.00	Patient Specific	Administered	
03/17/2018	08:08(MT)	2.00	Patient Specific	Administered	
03/16/2018	18:26(MT)	0.00	Patient Specific	No Show	
03/16/2018	07:51(MT)	2.00	Patient Specific	Administered	
03/15/2018	17:34(MT)	2.00	Patient Specific	Administered	
03/15/2018	07:10(MT)	2.00	Patient Specific	Administered	
03/14/2018	17:24(MT)	2.00	Patient Specific	Administered	
03/14/2018	09:05(MT)	2.00	Patient Specific	Administered	
03/13/2018	17:13(MT)	2.00	Patient Specific	Administered	
03/13/2018	07:08(MT)	2.00	Patient Specific	Administered	
03/12/2018	21:01(MT)	0.00	Patient Specific	No Show	
03/12/2018	07:15(MT)	2.00	Patient Specific	Administered	
03/11/2018	17:19(MT)	2.00	Patient Specific	Administered	
03/11/2018	08:13(MT)	2.00	Patient Specific	Administered	
03/10/2018	18:02(MT)	2.00	Patient Specific	Administered	
03/10/2018	08:18(MT)	2.00	Patient Specific	Administered	
03/09/2018	17:33(MT)	2.00	Patient Specific	Administered	
03/09/2018	07:37(MT)	2.00	Patient Specific	Administered	
03/08/2018	17:45(MT)	2.00	Patient Specific	Administered	
03/08/2018	07:01(MT)	2.00	Patient Specific	Administered	
03/07/2018	17:28(MT)	2.00	Patient Specific	Administered	
03/07/2018	07:07(MT)	2.00	Patient Specific	Administered	
03/06/2018	21:20(MT)	2.00	Patient Specific	Administered	
03/06/2018	07:22(MT)	2.00	Patient Specific	Administered	
03/05/2018	17:25(MT)	2.00	Patient Specific	Administered	
03/05/2018	07:03(MT)	2.00	Patient Specific	Administered	
03/04/2018	17:21(MT)	2.00	Patient Specific	Administered	
03/04/2018	08:25(MT)	2.00	Patient Specific	Administered	
03/03/2018	17:34(MT)	2.00	Patient Specific	Administered	
03/03/2018	08:01(MT)	2.00	Patient Specific	Administered	
03/02/2018	17:49(MT)	2.00	Patient Specific	Administered	
03/02/2018	06:58(MT)	2.00	Patient Specific	Administered	
03/01/2018	19:57(MT)	2.00	Patient Specific	Administered	
03/01/2018	06:58(MT)	2.00	Patient Specific	Administered	
02/28/2018	19:11(MT)	2.00	Patient Specific	Administered	
02/28/2018	07:03(MT)	2.00	Patient Specific	Administered	
02/27/2018	17:58(MT)	2.00	Patient Specific	Administered	
02/27/2018	07:01(MT)	2.00	Patient Specific	Administered	
02/26/2018	17:07(MT)	2.00	Patient Specific	Administered	
02/26/2018	07:01(MT)	2.00	Patient Specific	Administered	
02/25/2018	17:18(MT)	2.00	Patient Specific	Administered	
02/25/2018	08:12(MT)	2.00	Patient Specific	Administered	
02/24/2018	17:33(MT)	2.00	Patient Specific	Administered	
02/24/2018	08:22(MT)	2.00	Patient Specific	Administered	
02/23/2018	17:30(MT)	2.00	Patient Specific	Administered	
02/23/2018	07:02(MT)	2.00	Patient Specific	Administered	
02/22/2018	17:55(MT)	2.00	Patient Specific	Administered	
02/22/2018	07:07(MT)	2.00	Patient Specific	Administered	
02/21/2018	17:44(MT)	2.00	Patient Specific	Administered	
02/21/2018	07:01(MT)	2.00	Patient Specific	Administered	
02/20/2018	17:32(MT)	2.00	Patient Specific	Administered	
02/20/2018	07:01(MT)	2.00	Patient Specific	Administered	
02/19/2018	21:07(MT)	0.00	Patient Specific	No Show	
02/19/2018	07:08(MT)	2.00	Patient Specific	Administered	
02/18/2018	17:26(MT)	2.00	Patient Specific	Administered	
02/18/2018	08:15(MT)	2.00	Patient Specific	Administered	
02/17/2018	17:34(MT)	2.00	Patient Specific	Administered	
02/17/2018	06:12(MT)	2.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
01/31/2018	17:33(MT)	2.00	Patient Specific	Administered	
02/16/2018	07:26(MT)	2.00	Patient Specific	Administered	
02/15/2018	18:05(MT)	2.00	Patient Specific	Administered	
02/15/2018	07:31(MT)	2.00	Patient Specific	Administered	
02/14/2018	17:56(MT)	2.00	Patient Specific	Administered	
02/14/2018	07:06(MT)	2.00	Patient Specific	Administered	
02/13/2018	18:41(MT)	2.00	Patient Specific	Administered	
02/13/2018	07:14(MT)	2.00	Patient Specific	Administered	
02/12/2018	17:11(MT)	2.00	Patient Specific	Administered	
02/12/2018	07:12(MT)	2.00	Patient Specific	Administered	
02/11/2018	17:16(MT)	2.00	Patient Specific	Administered	
02/11/2018	08:20(MT)	2.00	Patient Specific	Administered	
02/10/2018	17:20(MT)	2.00	Patient Specific	Administered	
02/10/2018	08:07(MT)	2.00	Patient Specific	Administered	
02/09/2018	17:31(MT)	2.00	Patient Specific	Administered	
02/09/2018	07:52(MT)	2.00	Patient Specific	Administered	
02/08/2018	17:35(MT)	2.00	Patient Specific	Administered	
02/08/2018	07:21(MT)	2.00	Patient Specific	Administered	
02/07/2018	17:21(MT)	2.00	Patient Specific	Administered	
02/07/2018	07:05(MT)	2.00	Patient Specific	Administered	
02/06/2018	17:30(MT)	2.00	Patient Specific	Administered	
02/06/2018	07:18(MT)	2.00	Patient Specific	Administered	
02/05/2018	18:55(MT)	0.00	Patient Specific	No Show	
02/05/2018	07:21(MT)	2.00	Patient Specific	Administered	
02/04/2018	17:04(MT)	2.00	Patient Specific	Administered	
02/04/2018	08:11(MT)	2.00	Patient Specific	Administered	
02/03/2018	17:11(MT)	2.00	Patient Specific	Administered	
02/03/2018	08:10(MT)	2.00	Patient Specific	Administered	
02/02/2018	17:57(MT)	2.00	Patient Specific	Administered	
02/02/2018	07:29(MT)	2.00	Patient Specific	Administered	
02/01/2018	17:29(MT)	2.00	Patient Specific	Administered	
02/01/2018	07:05(MT)	2.00	Patient Specific	Administered	
01/31/2018	21:05(MT)	0.00	Patient Specific	No Show	
01/31/2018	07:07(MT)	2.00	Patient Specific	Administered	
01/30/2018	16:56(MT)	2.00	Patient Specific	Administered	
01/30/2018	07:11(MT)	2.00	Patient Specific	Administered	
01/29/2018	21:12(MT)	0.00	Patient Specific	No Show	
01/29/2018	07:29(MT)	2.00	Patient Specific	Administered	
01/28/2018	17:20(MT)	2.00	Patient Specific	Administered	
01/28/2018	08:36(MT)	2.00	Patient Specific	Administered	
01/27/2018	17:23(MT)	2.00	Patient Specific	Administered	
01/27/2018	08:06(MT)	2.00	Patient Specific	Administered	
01/26/2018	17:23(MT)	2.00	Patient Specific	Administered	
01/26/2018	07:03(MT)	2.00	Patient Specific	Administered	
01/25/2018	18:15(MT)	2.00	Patient Specific	Administered	
01/25/2018	07:04(MT)	2.00	Patient Specific	Administered	
01/24/2018	17:32(MT)	2.00	Patient Specific	Administered	
01/24/2018	07:19(MT)	2.00	Patient Specific	Administered	
01/23/2018	17:23(MT)	2.00	Patient Specific	Administered	
01/23/2018	07:15(MT)	2.00	Patient Specific	Administered	
01/22/2018	17:19(MT)	2.00	Patient Specific	Administered	
01/22/2018	07:31(MT)	2.00	Patient Specific	Administered	
01/21/2018	17:25(MT)	2.00	Patient Specific	Administered	
01/21/2018	08:17(MT)	2.00	Patient Specific	Administered	
01/20/2018	17:31(MT)	2.00	Patient Specific	Administered	
01/20/2018	08:20(MT)	2.00	Patient Specific	Administered	
01/19/2018	17:58(MT)	2.00	Patient Specific	Administered	
01/19/2018	07:20(MT)	2.00	Patient Specific	Administered	
01/18/2018	18:45(MT)	2.00	Patient Specific	Administered	
01/18/2018	08:21(MT)	2.00	Patient Specific	Administered	
01/17/2018	17:17(MT)	2.00	Patient Specific	Administered	
01/17/2018	08:17(MT)	2.00	Patient Specific	Administered	
01/16/2018	20:10(MT)	2.00	Patient Specific	Administered	
01/16/2018	08:40(MT)	2.00	Patient Specific	Administered	
01/15/2018	20:42(MT)	2.00	Patient Specific	Administered	
01/15/2018	08:14(MT)	2.00	Patient Specific	Administered	
01/14/2018	19:10(MT)	2.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
01/14/2018	08:31(MT)	2.00	Patient Specific	Administered	
01/13/2018	18:56(MT)	2.00	Patient Specific	Administered	
01/13/2018	08:08(MT)	2.00	Patient Specific	Administered	
01/12/2018	21:21(MT)	2.00	Patient Specific	Administered	
01/12/2018	08:42(MT)	2.00	Patient Specific	Administered	
01/11/2018	18:34(MT)	2.00	Patient Specific	Administered	
01/11/2018	08:50(MT)	2.00	Patient Specific	Administered	
01/10/2018	18:29(MT)	2.00	Patient Specific	Administered	
01/10/2018	08:27(MT)	2.00	Patient Specific	Administered	
01/09/2018	18:36(MT)	2.00	Patient Specific	Administered	
01/09/2018	08:41(MT)	2.00	Patient Specific	Administered	
01/08/2018	21:31(MT)	2.00	Patient Specific	Administered	
01/08/2018	10:43(MT)	2.00	Patient Specific	Administered	
01/07/2018	17:24(MT)	2.00	Patient Specific	Administered	
01/07/2018	10:13(MT)	2.00	Patient Specific	Administered	
01/06/2018	18:02(MT)	2.00	Patient Specific	Administered	
01/06/2018	09:37(MT)	2.00	Patient Specific	Administered	
01/05/2018	17:31(MT)	2.00	Patient Specific	Administered	
01/05/2018	07:36(MT)	2.00	Clinic Stock	Administered	
01/04/2018	17:49(MT)	2.00	Clinic Stock	Administered	

0183016 - Drug Prescription Order

Ordered Date: 01/05/2018 Time: 08:59:39 AM (MT)
 Encounter Type: MH - Psychiatrist - Medication Renewal
 Location: Idaho State Correctional Institution [ISCI] Staff: Hutchison, Emily
 Order Number: 0183016 Rx Number: 39395612
 Ordering Practitioner*: Hutchison, Emily Sequence Number: 01

Prescription

Diagnosis Code*: Major depressive disorder, recurrent, in partial remission [F33.41]
 Formulary Non-Formulary
 Drug Type: VENLAFAXINE HCL XR CP24 150 Mg Cp24
 National NDC Code(4):
 RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule;

Effective Date: 01/05/2018
 Generic Acceptable
 Profile Only:
 Dosage*: 3
 Strength*: 150 MG
 Frequency*: QAM-EVERY MORNING
 for*: 210 days (Total duration)
 Route of Administration*: PO-By Mouth Method*: Daily Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?*: No Expiration: 08/02/2018
 Delivery Tm Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 5 # Refills Issued: 4
 Received Fm Pharmacy: 04/27/2018
 Status*: Discontinued - Other As of Date*: 05/18/2018
 Authorized By*: Hutchison, Emily

Pharmacy Medication Substitution

Name= Same As Above

Comments

At 05/18/2018 10:01:19 a prescription order message from the Pharmacy, with a status of "Order Discontinued at Pharmacy Vendor (DR)", was not processed because the prescription status in eOMIS was "Discontinued - Other" at the time the pharmacy message was received.

Medication Administration Record (1 of 133)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/18/2018	07:09(MT)	3.00	Patient Specific	Administered	
05/17/2018	06:53(MT)	3.00	Patient Specific	Administered	
05/16/2018	06:53(MT)	3.00	Patient Specific	Administered	
05/15/2018	07:03(MT)	3.00	Patient Specific	Administered	
05/14/2018	07:00(MT)	3.00	Patient Specific	Administered	
05/13/2018	08:14(MT)	3.00	Patient Specific	Administered	
05/12/2018	08:16(MT)	3.00	Patient Specific	Administered	
05/11/2018	07:25(MT)	3.00	Patient Specific	Administered	
05/10/2018	07:08(MT)	3.00	Patient Specific	Administered	
05/09/2018	07:04(MT)	3.00	Patient Specific	Administered	
05/08/2018	07:08(MT)	3.00	Patient Specific	Administered	
05/07/2018	07:18(MT)	3.00	Patient Specific	Administered	
05/06/2018	08:15(MT)	3.00	Patient Specific	Administered	
05/05/2018	08:14(MT)	3.00	Patient Specific	Administered	
05/04/2018	07:07(MT)	3.00	Patient Specific	Administered	
05/03/2018	07:06(MT)	3.00	Patient Specific	Administered	
05/02/2018	06:54(MT)	3.00	Patient Specific	Administered	
05/01/2018	06:56(MT)	3.00	Patient Specific	Administered	
04/30/2018	07:21(MT)	3.00	Patient Specific	Administered	
04/29/2018	08:10(MT)	3.00	Patient Specific	Administered	
04/28/2018	08:22(MT)	3.00	Patient Specific	Administered	
04/27/2018	07:09(MT)	3.00	Patient Specific	Administered	
04/26/2018	07:04(MT)	3.00	Patient Specific	Administered	
04/25/2018	06:58(MT)	3.00	Patient Spedfic	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
04/24/2018	07:03(MT)	3.00	Patient Specific	Administered	
04/23/2018	07:01(MT)	3.00	Patient Specific	Administered	
04/22/2018	08:17(MT)	3.00	Patient Specific	Administered	
04/21/2018	08:08(MT)	3.00	Patient Specific	Administered	
04/20/2018	07:10(MT)	3.00	Patient Specific	Administered	
04/19/2018	07:06(MT)	3.00	Patient Specific	Administered	
04/18/2018	06:50(MT)	3.00	Patient Specific	Administered	
04/17/2018	06:56(MT)	3.00	Patient Specific	Administered	
04/16/2018	07:00(MT)	3.00	Patient Specific	Administered	
04/15/2018	08:05(MT)	3.00	Patient Specific	Administered	
04/14/2018	07:56(MT)	3.00	Patient Specific	Administered	
04/13/2018	07:31(MT)	3.00	Patient Specific	Administered	
04/12/2018	06:57(MT)	3.00	Patient Specific	Administered	
04/11/2018	07:10(MT)	3.00	Patient Specific	Administered	
04/10/2018	07:12(MT)	3.00	Patient Specific	Administered	
04/09/2018	07:09(MT)	3.00	Patient Specific	Administered	
04/08/2018	08:02(MT)	3.00	Patient Specific	Administered	
04/07/2018	08:26(MT)	3.00	Patient Specific	Administered	
04/06/2018	07:07(MT)	3.00	Patient Specific	Administered	
04/05/2018	07:03(MT)	3.00	Patient Specific	Administered	
04/04/2018	06:58(MT)	3.00	Patient Specific	Administered	
04/03/2018	06:55(MT)	3.00	Patient Specific	Administered	
04/02/2018	07:00(MT)	3.00	Patient Specific	Administered	
04/01/2018	08:08(MT)	3.00	Patient Specific	Administered	
03/31/2018	08:20(MT)	3.00	Patient Specific	Administered	
03/30/2018	07:07(MT)	3.00	Patient Specific	Administered	
03/29/2018	07:06(MT)	3.00	Patient Specific	Administered	
03/28/2018	06:57(MT)	3.00	Patient Specific	Administered	
03/27/2018	07:04(MT)	3.00	Patient Specific	Administered	
03/26/2018	07:11(MT)	3.00	Patient Specific	Administered	
03/25/2018	08:00(MT)	3.00	Patient Specific	Administered	
03/24/2018	08:06(MT)	3.00	Patient Specific	Administered	
03/23/2018	07:06(MT)	3.00	Patient Specific	Administered	
03/22/2018	07:00(MT)	3.00	Patient Specific	Administered	
03/21/2018	06:57(MT)	3.00	Patient Specific	Administered	
03/20/2018	07:03(MT)	3.00	Patient Specific	Administered	
03/19/2018	06:58(MT)	3.00	Patient Specific	Administered	
03/18/2018	08:08(MT)	3.00	Patient Specific	Administered	
03/17/2018	08:08(MT)	3.00	Patient Specific	Administered	
03/16/2018	07:51(MT)	3.00	Patient Specific	Administered	
03/15/2018	07:10(MT)	3.00	Patient Specific	Administered	
03/14/2018	09:05(MT)	3.00	Patient Specific	Administered	
03/13/2018	07:08(MT)	3.00	Patient Specific	Administered	
03/12/2018	07:15(MT)	3.00	Patient Specific	Administered	
03/11/2018	08:13(MT)	3.00	Patient Specific	Administered	
03/10/2018	08:18(MT)	3.00	Patient Specific	Administered	
03/09/2018	07:37(MT)	3.00	Patient Specific	Administered	
03/08/2018	07:01(MT)	3.00	Patient Specific	Administered	
03/07/2018	07:07(MT)	3.00	Patient Specific	Administered	
03/06/2018	07:22(MT)	3.00	Patient Specific	Administered	
03/05/2018	07:03(MT)	3.00	Patient Specific	Administered	
03/04/2018	08:25(MT)	3.00	Patient Specific	Administered	
03/03/2018	08:01(MT)	3.00	Patient Specific	Administered	
03/02/2018	06:58(MT)	3.00	Patient Specific	Administered	
03/01/2018	06:58(MT)	3.00	Patient Specific	Administered	
02/28/2018	07:03(MT)	3.00	Patient Specific	Administered	
02/27/2018	07:01(MT)	3.00	Patient Specific	Administered	
02/26/2018	07:01(MT)	3.00	Patient Specific	Administered	
02/25/2018	08:12(MT)	3.00	Patient Specific	Administered	
02/24/2018	08:22(MT)	3.00	Patient Specific	Administered	
02/23/2018	07:02(MT)	3.00	Patient Specific	Administered	
02/22/2018	07:07(MT)	3.00	Patient Specific	Administered	
02/21/2018	07:01(MT)	3.00	Patient Specific	Administered	
02/20/2018	07:01(MT)	3.00	Patient Specific	Administered	
02/19/2018	07:08(MT)	3.00	Patient Specific	Administered	
02/18/2018	08:15(MT)	3.00	Patient Specific	Administered	
02/17/2018	08:12(MT)	3.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
02/16/2018	07:26(MT)	3.00	Patient Specific	Administered	
02/15/2018	07:31(MT)	3.00	Patient Specific	Administered	
02/14/2018	07:06(MT)	3.00	Patient Specific	Administered	
02/13/2018	07:14(MT)	3.00	Patient Specific	Administered	
02/12/2018	07:12(MT)	3.00	Patient Specific	Administered	
02/11/2018	08:20(MT)	3.00	Patient Specific	Administered	
02/10/2018	08:07(MT)	3.00	Patient Specific	Administered	
02/09/2018	07:52(MT)	3.00	Patient Specific	Administered	
02/08/2018	07:21(MT)	3.00	Patient Specific	Administered	
02/07/2018	07:05(MT)	3.00	Patient Specific	Administered	
02/06/2018	07:18(MT)	3.00	Patient Specific	Administered	
02/05/2018	07:21(MT)	3.00	Patient Specific	Administered	
02/04/2018	08:11(MT)	3.00	Patient Specific	Administered	
02/03/2018	08:10(MT)	3.00	Patient Specific	Administered	
02/02/2018	07:29(MT)	3.00	Patient Specific	Administered	
02/01/2018	07:05(MT)	3.00	Patient Specific	Administered	
01/31/2018	07:07(MT)	3.00	Patient Specific	Administered	
01/30/2018	07:11(MT)	3.00	Patient Specific	Administered	
01/29/2018	07:29(MT)	3.00	Patient Specific	Administered	
01/28/2018	08:36(MT)	3.00	Patient Specific	Administered	
01/27/2018	08:06(MT)	3.00	Patient Specific	Administered	
01/26/2018	07:03(MT)	3.00	Patient Specific	Administered	
01/25/2018	07:04(MT)	3.00	Patient Specific	Administered	
01/24/2018	07:19(MT)	3.00	Patient Specific	Administered	
01/23/2018	07:15(MT)	3.00	Patient Specific	Administered	
01/22/2018	07:31(MT)	3.00	Patient Specific	Administered	
01/21/2018	08:17(MT)	3.00	Patient Specific	Administered	
01/20/2018	08:20(MT)	3.00	Patient Specific	Administered	
01/19/2018	07:20(MT)	3.00	Patient Specific	Administered	
01/18/2018	08:21(MT)	3.00	Patient Specific	Administered	
01/17/2018	08:17(MT)	3.00	Patient Specific	Administered	
01/16/2018	08:40(MT)	3.00	Patient Specific	Administered	
01/15/2018	08:14(MT)	3.00	Patient Specific	Administered	
01/14/2018	08:31(MT)	3.00	Patient Specific	Administered	
01/13/2018	08:08(MT)	3.00	Patient Specific	Administered	
01/12/2018	08:42(MT)	3.00	Patient Specific	Administered	
01/11/2018	08:50(MT)	3.00	Patient Specific	Administered	
01/10/2018	08:27(MT)	3.00	Patient Specific	Administered	
01/09/2018	08:41(MT)	3.00	Patient Specific	Administered	
01/08/2018	10:43(MT)	3.00	Patient Specific	Administered	
01/07/2018	10:13(MT)	3.00	Patient Specific	Administered	
01/06/2018	09:37(MT)	3.00	Clinic Stock	Administered	

0080176 - Drug Prescription Order	
Ordered Date: 01/08/2018	Time: 01:06:23 AM (MT)
Encounter Type: Pharmacy Order (Unsolicited)	
Location: Idaho State Correctional Institution [ISCI]	Staff: Unknown
Order Number: 0183944	Rx Number: 39407551
Ordering Practitioner*: Unknown	Sequence Number: 01

Prescription

Diagnosis Code*:
 Formulary Non-Formulary

Drug Type: CYCR030T

Effective Date: 01/08/2018

Generic Acceptable
Profile Only:

Dosage*: 1
Strength*:

Frequency*: UAD-USE AS DIRECTED
for*: 0 days (Total duration)

Route of Administration*: UN-Unknown
Pill Call* AM: Noon: PM: Bed Time:

Method*: Normal Dose

Keep on Person?*: No
Expiration: 01/08/2018

Delivery Tm Frame*: Routine
Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 11
Received From Pharmacy:
Status*: Order Discontinued at Pharmacy Vendor (DR)

Refills Issued: 0
As of Date*: 01/09/2018

Authorized By*:

Comments

At 01/09/2018 12:06:28 a prescription order message from the Pharmacy, with a status of "Order Accepted at Pharmacy Vendor (SC)", was not processed because the prescription status in eOMIS was "Order Discontinued at Pharmacy Vendor (DR)" at the time the pharmacy message was received. T1 BY MOUTH EVERY MORNING FOR 365 DAYS

Medication Administration Record

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
No Rows Found					

ORDERS - Drug Prescriptions Order

Ordered Date: 01/08/2018 Time: 07:25:16 AM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Order Number: 0183607 Rx Number: 39408703
 Ordering Practitioner*: Eldredge, Summer Sequence Number: 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary
 Drug Type: MEDROXYPROGESTERONE TABS 10 Mg Tabs
 RxNorm: 1000114 - medroxyPROGESTERone acetate 10 MG Oral Tablet;

Effective Date: 01/08/2018
 Generic Acceptable
 Profile Only:
 Dosage*: 1
 Strength*: 10 Mg
 Frequency*: QD-EVERY DAY
 for*: 365 days (Total duration)
 Route of Administration*: PO-By Mouth Method*: Normal Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: No Expiration: 01/07/2019
 Delivery Tr Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 11 # Refills Issued: 5
 Received From Pharmacy: 05/22/2018
 Status*: Received from Pharmacy As of Date*: 05/22/2018

Pharmacy Medication Substitution

Name= Same As Above

Comments

None

Medication Administration Record 11 (43 of 143)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/30/2018	06:58(MT)	1.00	Patient Specific	Administered	
05/29/2018	07:07(MT)	1.00	Patient Specific	Administered	
05/28/2018	07:01(MT)	1.00	Patient Specific	Administered	
05/27/2018	08:33(MT)	1.00	Patient Specific	Administered	
05/26/2018	07:55(MT)	1.00	Patient Specific	Administered	
05/25/2018	06:56(MT)	1.00	Patient Specific	Administered	
05/24/2018	07:07(MT)	1.00	Patient Specific	Administered	
05/23/2018	07:02(MT)	1.00	Patient Specific	Administered	
05/22/2018	07:09(MT)	1.00	Patient Specific	Administered	
05/21/2018	07:05(MT)	1.00	Patient Specific	Administered	
05/20/2018	08:26(MT)	1.00	Patient Specific	Administered	
05/19/2018	08:18(MT)	1.00	Patient Specific	Administered	
05/18/2018	07:09(MT)	1.00	Patient Specific	Administered	
05/17/2018	06:53(MT)	1.00	Patient Specific	Administered	
05/16/2018	06:53(MT)	1.00	Patient Specific	Administered	
05/15/2018	07:03(MT)	1.00	Patient Specific	Administered	
05/14/2018	07:00(MT)	1.00	Patient Specific	Administered	
05/13/2018	08:14(MT)	1.00	Patient Specific	Administered	
05/12/2018	08:16(MT)	1.00	Patient Specific	Administered	
05/11/2018	07:25(MT)	1.00	Patient Specific	Administered	
05/10/2018	07:08(MT)	1.00	Patient Specific	Administered	
05/09/2018	07:04(MT)	1.00	Patient Specific	Administered	
05/08/2018	07:08(MT)	1.00	Patient Specific	Administered	
05/07/2018	07:18(MT)	1.00	Patient Specific	Administered	
05/06/2018	08:15(MT)	1.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/05/2018	08:14(MT)	1.00	Patient Specific	Administered	
05/04/2018	07:07(MT)	1.00	Patient Specific	Administered	
05/03/2018	07:06(MT)	1.00	Patient Specific	Administered	
05/02/2018	06:54(MT)	1.00	Patient Specific	Administered	
05/01/2018	06:56(MT)	1.00	Patient Specific	Administered	
04/30/2018	07:21(MT)	1.00	Patient Specific	Administered	
04/29/2018	08:10(MT)	1.00	Patient Specific	Administered	
04/28/2018	08:22(MT)	1.00	Patient Specific	Administered	
04/27/2018	07:09(MT)	1.00	Patient Specific	Administered	
04/26/2018	07:04(MT)	1.00	Patient Specific	Administered	
04/25/2018	06:58(MT)	1.00	Patient Specific	Administered	
04/24/2018	07:03(MT)	1.00	Patient Specific	Administered	
04/23/2018	07:01(MT)	1.00	Patient Specific	Administered	
04/22/2018	08:17(MT)	1.00	Patient Specific	Administered	
04/21/2018	08:08(MT)	1.00	Patient Specific	Administered	
04/20/2018	07:10(MT)	1.00	Patient Specific	Administered	
04/19/2018	07:06(MT)	1.00	Patient Specific	Administered	
04/18/2018	06:50(MT)	1.00	Patient Specific	Administered	
04/17/2018	06:56(MT)	1.00	Patient Specific	Administered	
04/16/2018	07:00(MT)	1.00	Patient Specific	Administered	
04/15/2018	08:05(MT)	1.00	Patient Specific	Administered	
04/14/2018	07:56(MT)	1.00	Patient Specific	Administered	
04/13/2018	07:31(MT)	1.00	Patient Specific	Administered	
04/12/2018	06:57(MT)	1.00	Patient Specific	Administered	
04/11/2018	07:10(MT)	1.00	Patient Specific	Administered	
04/10/2018	07:12(MT)	1.00	Patient Specific	Administered	
04/09/2018	07:09(MT)	1.00	Patient Specific	Administered	
04/08/2018	08:02(MT)	1.00	Patient Specific	Administered	
04/07/2018	08:26(MT)	1.00	Patient Specific	Administered	
04/06/2018	07:07(MT)	1.00	Patient Specific	Administered	
04/05/2018	07:03(MT)	1.00	Patient Specific	Administered	
04/04/2018	06:58(MT)	1.00	Patient Specific	Administered	
04/03/2018	06:55(MT)	1.00	Patient Specific	Administered	
04/02/2018	07:00(MT)	1.00	Patient Specific	Administered	
04/01/2018	08:08(MT)	1.00	Patient Specific	Administered	
03/31/2018	08:20(MT)	1.00	Patient Specific	Administered	
03/30/2018	07:07(MT)	1.00	Patient Specific	Administered	
03/29/2018	07:06(MT)	1.00	Patient Specific	Administered	
03/28/2018	06:57(MT)	1.00	Patient Specific	Administered	
03/27/2018	07:04(MT)	1.00	Patient Specific	Administered	
03/26/2018	07:11(MT)	1.00	Patient Specific	Administered	
03/25/2018	08:00(MT)	1.00	Patient Specific	Administered	
03/24/2018	08:06(MT)	1.00	Patient Specific	Administered	
03/23/2018	07:06(MT)	1.00	Patient Specific	Administered	
03/22/2018	07:00(MT)	1.00	Patient Specific	Administered	
03/21/2018	06:57(MT)	1.00	Patient Specific	Administered	
03/20/2018	07:03(MT)	1.00	Patient Specific	Administered	
03/19/2018	06:58(MT)	1.00	Patient Specific	Administered	
03/18/2018	08:08(MT)	1.00	Patient Specific	Administered	
03/17/2018	08:08(MT)	1.00	Patient Specific	Administered	
03/16/2018	07:51(MT)	1.00	Patient Specific	Administered	
03/15/2018	07:10(MT)	1.00	Patient Specific	Administered	
03/14/2018	09:05(MT)	1.00	Patient Specific	Administered	
03/13/2018	07:08(MT)	1.00	Patient Specific	Administered	
03/12/2018	07:15(MT)	1.00	Patient Specific	Administered	
03/11/2018	08:13(MT)	1.00	Patient Specific	Administered	
03/10/2018	08:18(MT)	1.00	Patient Specific	Administered	
03/09/2018	07:37(MT)	1.00	Patient Specific	Administered	
03/08/2018	07:01(MT)	1.00	Patient Specific	Administered	
03/07/2018	07:07(MT)	1.00	Patient Specific	Administered	
03/06/2018	07:22(MT)	1.00	Patient Specific	Administered	
03/05/2018	07:03(MT)	1.00	Patient Specific	Administered	
03/04/2018	08:25(MT)	1.00	Patient Specific	Administered	
03/03/2018	08:01(MT)	1.00	Patient Specific	Administered	
03/02/2018	06:58(MT)	1.00	Patient Specific	Administered	
03/01/2018	06:58(MT)	1.00	Patient Specific	Administered	
02/28/2018	07:03(MT)	1.00	Patient Specific	Administered	
02/27/2018	07:01(MT)	1.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
02/26/2018	07:01(MT)	1.00	Patient Specific	Administered	
02/25/2018	08:12(MT)	1.00	Patient Specific	Administered	
02/24/2018	08:22(MT)	1.00	Patient Specific	Administered	
02/23/2018	07:02(MT)	1.00	Patient Specific	Administered	
02/22/2018	07:07(MT)	1.00	Patient Specific	Administered	
02/21/2018	07:01(MT)	1.00	Patient Specific	Administered	
02/20/2018	07:01(MT)	1.00	Patient Specific	Administered	
02/19/2018	07:08(MT)	1.00	Patient Specific	Administered	
02/18/2018	08:15(MT)	1.00	Patient Specific	Administered	
02/17/2018	08:12(MT)	1.00	Patient Specific	Administered	
02/16/2018	07:26(MT)	1.00	Patient Specific	Administered	
02/15/2018	07:31(MT)	1.00	Patient Specific	Administered	
02/14/2018	07:06(MT)	1.00	Patient Specific	Administered	
02/13/2018	07:14(MT)	1.00	Patient Specific	Administered	
02/12/2018	07:12(MT)	1.00	Patient Specific	Administered	
02/11/2018	08:20(MT)	1.00	Patient Specific	Administered	
02/10/2018	08:07(MT)	1.00	Patient Specific	Administered	
02/09/2018	07:52(MT)	1.00	Patient Specific	Administered	
02/08/2018	07:21(MT)	1.00	Patient Specific	Administered	
02/07/2018	07:05(MT)	1.00	Patient Specific	Administered	
02/06/2018	07:18(MT)	1.00	Patient Specific	Administered	
02/05/2018	07:21(MT)	1.00	Patient Specific	Administered	
02/04/2018	08:11(MT)	1.00	Patient Specific	Administered	
02/03/2018	08:10(MT)	1.00	Patient Specific	Administered	
02/02/2018	07:29(MT)	1.00	Patient Specific	Administered	
02/01/2018	07:05(MT)	1.00	Patient Specific	Administered	
01/31/2018	07:07(MT)	1.00	Patient Specific	Administered	
01/30/2018	07:11(MT)	1.00	Patient Specific	Administered	
01/29/2018	07:29(MT)	1.00	Patient Specific	Administered	
01/28/2018	08:36(MT)	1.00	Patient Specific	Administered	
01/27/2018	08:06(MT)	1.00	Patient Specific	Administered	
01/26/2018	07:03(MT)	1.00	Patient Specific	Administered	
01/25/2018	07:04(MT)	1.00	Patient Specific	Administered	
01/24/2018	07:19(MT)	1.00	Patient Specific	Administered	
01/23/2018	07:15(MT)	1.00	Patient Specific	Administered	
01/22/2018	07:31(MT)	1.00	Patient Specific	Administered	
01/21/2018	08:17(MT)	1.00	Patient Specific	Administered	
01/20/2018	08:20(MT)	1.00	Patient Specific	Administered	
01/19/2018	07:20(MT)	1.00	Patient Specific	Administered	
01/18/2018	08:21(MT)	1.00	Patient Specific	Administered	
01/17/2018	08:17(MT)	1.00	Patient Specific	Administered	
01/16/2018	08:40(MT)	1.00	Patient Specific	Administered	
01/15/2018	08:14(MT)	1.00	Patient Specific	Administered	
01/14/2018	08:31(MT)	1.00	Patient Specific	Administered	
01/13/2018	08:08(MT)	1.00	Patient Specific	Administered	
01/12/2018	08:42(MT)	1.00	Patient Specific	Administered	
01/11/2018	08:50(MT)	1.00	Patient Specific	Administered	
01/10/2018	08:27(MT)	1.00	Clinic Stock	Administered	
01/09/2018	08:41(MT)	1.00	Clinic Stock	Administered	
01/08/2018	10:43(MT)	1.00	Clinic Stock	Administered	

C:\msd978 - Drug Prescription Order

www.mdc-9000.com MDCL: 9999

Ordered Date: 01/25/2018 **Time:** 03:37:04 PM (MT)
Encounter Type: Nurse - Verbal/Telephone Orders
Location: Idaho State Correctional Institution [ISCI] **Staff:** Wise, Nicholas
Order Number: 0189843 **Rx Number:** 39541879
Ordering Practitioner*: Haggard, Rebekah **Sequence Number:** 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary
Drug Type: FINASTERIDE (UD) TABS 5 Mg Tabs
RxNom: 310346 - FIN5C 5 MG Oral Tablet;

Effective Date: 01/25/2018
Generic Acceptable:
Profile Only:
Dosage*: 1
Strength*: 5 Mg
Frequency*: QD-EVERY DAY
 for*: 90 days (Total duration)

Route of Administration*: PO-By Mouth **Method*:** Normal Dose
Pill Call* AM: **Noon:** **PM:** **Bed Time:**
Keep on Person?*: No **Expiration:** 04/24/2018
Delivery Trn Frame*: Routine **Drug on hold until:**

Order Information

Pharmacy Indicated # Refills: 2 **# Refills Issued:** 2
Received Fm Pharmacy: 03/20/2018
Status*: Discontinued - Other **As of Date*:** 04/09/2018
Authorized By*: Haggard, Rebekah

Pharmacy Medication Substitution

Name= Same As Above

Comments

At 04/09/2018 10:01:31 a prescription order message from the Pharmacy, with a status of "Order Discontinued at Pharmacy Vendor (DR)", was not processed because the prescription status in eOMIS was "Discontinued - Other" at the time the pharmacy message was received. Gender Dysphoria HRT

Medication Administration Record (1 of 73)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
04/09/2018	07:09(MT)	1.00	Patient Specific	Administered	
04/08/2018	08:02(MT)	1.00	Patient Specific	Administered	
04/07/2018	08:26(MT)	1.00	Patient Specific	Administered	
04/06/2018	07:07(MT)	1.00	Patient Specific	Administered	
04/05/2018	07:03(MT)	1.00	Patient Specific	Administered	
04/04/2018	06:58(MT)	1.00	Patient Specific	Administered	
04/03/2018	06:55(MT)	1.00	Patient Specific	Administered	
04/02/2018	07:00(MT)	1.00	Patient Specific	Administered	
04/01/2018	08:08(MT)	1.00	Patient Specific	Administered	
03/31/2018	08:20(MT)	1.00	Patient Specific	Administered	
03/30/2018	07:07(MT)	1.00	Patient Specific	Administered	
03/29/2018	07:06(MT)	1.00	Patient Specific	Administered	
03/28/2018	06:57(MT)	1.00	Patient Specific	Administered	
03/27/2018	07:04(MT)	1.00	Patient Specific	Administered	
03/26/2018	07:11(MT)	1.00	Patient Specific	Administered	
03/25/2018	08:00(MT)	1.00	Patient Specific	Administered	
03/24/2018	08:06(MT)	1.00	Patient Specific	Administered	
03/23/2018	07:06(MT)	1.00	Patient Specific	Administered	
03/22/2018	07:00(MT)	1.00	Patient Specific	Administered	
03/21/2018	06:57(MT)	1.00	Patient Specific	Administered	
03/20/2018	07:03(MT)	1.00	Patient Specific	Administered	
03/19/2018	06:58(MT)	1.00	Patient Specific	Administered	
03/18/2018	08:08(MT)	1.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
03/17/2018	08:08(MT)	1.00	Patient Specific	Administered	
03/16/2018	07:51(MT)	1.00	Patient Specific	Administered	
03/15/2018	07:18(MT)	1.00	Patient Specific	Administered	
03/14/2018	09:05(MT)	1.00	Patient Specific	Administered	
03/13/2018	07:08(MT)	1.00	Patient Specific	Administered	
03/12/2018	07:15(MT)	1.00	Patient Specific	Administered	
03/11/2018	08:13(MT)	1.00	Patient Specific	Administered	
03/10/2018	08:18(MT)	1.00	Patient Specific	Administered	
03/09/2018	07:37(MT)	1.00	Patient Specific	Administered	
03/08/2018	07:01(MT)	1.00	Patient Specific	Administered	
03/07/2018	07:07(MT)	1.00	Patient Specific	Administered	
03/06/2018	07:22(MT)	1.00	Patient Specific	Administered	
03/05/2018	07:03(MT)	1.00	Patient Specific	Administered	
03/04/2018	08:25(MT)	1.00	Patient Specific	Administered	
03/03/2018	08:01(MT)	1.00	Patient Specific	Administered	
03/02/2018	06:58(MT)	1.00	Patient Specific	Administered	
03/01/2018	06:58(MT)	1.00	Patient Specific	Administered	
02/28/2018	07:03(MT)	1.00	Patient Specific	Administered	
02/27/2018	07:01(MT)	1.00	Patient Specific	Administered	
02/26/2018	07:01(MT)	1.00	Patient Specific	Administered	
02/25/2018	08:12(MT)	1.00	Patient Specific	Administered	
02/24/2018	08:22(MT)	1.00	Patient Specific	Administered	
02/23/2018	07:02(MT)	1.00	Patient Specific	Administered	
02/22/2018	07:07(MT)	1.00	Patient Specific	Administered	
02/21/2018	07:01(MT)	1.00	Patient Specific	Administered	
02/20/2018	07:01(MT)	1.00	Patient Specific	Administered	
02/19/2018	07:08(MT)	1.00	Patient Specific	Administered	
02/18/2018	08:15(MT)	1.00	Patient Specific	Administered	
02/17/2018	08:12(MT)	1.00	Patient Specific	Administered	
02/16/2018	07:26(MT)	1.00	Patient Specific	Administered	
02/15/2018	07:31(MT)	1.00	Patient Specific	Administered	
02/14/2018	07:06(MT)	1.00	Patient Specific	Administered	
02/13/2018	07:14(MT)	1.00	Patient Specific	Administered	
02/12/2018	07:12(MT)	1.00	Patient Specific	Administered	
02/11/2018	08:20(MT)	1.00	Patient Specific	Administered	
02/10/2018	08:07(MT)	1.00	Patient Specific	Administered	
02/09/2018	07:52(MT)	1.00	Patient Specific	Administered	
02/08/2018	07:21(MT)	1.00	Patient Specific	Administered	
02/07/2018	07:05(MT)	1.00	Patient Specific	Administered	
02/06/2018	07:18(MT)	1.00	Patient Specific	Administered	
02/05/2018	07:21(MT)	1.00	Patient Specific	Administered	
02/04/2018	08:11(MT)	1.00	Patient Specific	Administered	
02/03/2018	08:10(MT)	1.00	Patient Specific	Administered	
02/02/2018	07:29(MT)	1.00	Patient Specific	Administered	
02/01/2018	07:05(MT)	1.00	Patient Specific	Administered	
01/31/2018	07:07(MT)	1.00	Patient Specific	Administered	
01/30/2018	07:11(MT)	1.00	Patient Specific	Administered	
01/29/2018	07:29(MT)	1.00	Clinic Stock	Administered	
01/28/2018	08:36(MT)	1.00	Clinic Stock	Administered	
01/27/2018	08:06(MT)	1.00	Clinic Stock	Administered	

01202018 - Drug Prescription Form

Form: 0001 / 0001 D. 01202018

Ordered Date: 01/30/2018	Time: 09:55:03 AM (MT)
Encounter Type: Nurse - Verbal/Telephone Orders	
Location: Idaho State Correctional Institution [JSCI]	Staff: Wise, Nicholas
Order Number: 0191018	Rx Number: 39557219
Ordering Practitioner*: Eldredge, Summer	Sequence Number: 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary

Drug Type: SPIRONOLACTONE (UD) TABS 25 Mg Tabs

National NDC Code(s):
 RxNorm: 313096 - Spironolactone 25 MG Oral Tablet;

Effective Date: 01/30/2018
 Generic Acceptable
 Profile Only:
 Dosage*: 1
 Strength*: 25 Mg
 Frequency*: QD-EVERY DAY
 for*: 365 days (Total duration)

Route of Administration*: PO-By Mouth
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: No
 Delivery Trn Frame*: Routine

Method*: Normal Dose
 Expiration: 01/29/2019
 Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 11 # Refills Issued: 0
 Received From Pharmacy: 01/31/2018
 Status*: Discontinued - Other As of Date*: 02/19/2018

Authorized By*: Eldredge, Summer

Pharmacy Medication Substitution

Name= Same As Above

Comments

At 02/20/2018 12:07:13 a prescription order message from the Pharmacy, with a status of "Order Discontinued at Pharmacy Vendor (DR)", was not processed because the prescription status in eOMIS was "Discontinued - Other" at the time the pharmacy message was received. SEE Nurse Verbal orders 2/19/18 per Wellness center

Medication Administration Record (3 of 20)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
02/19/2018	07:08(MT)	1.00	Patient Specific	Administered	
02/18/2018	08:15(MT)	1.00	Patient Specific	Administered	
02/17/2018	08:12(MT)	1.00	Patient Specific	Administered	
02/16/2018	07:26(MT)	1.00	Patient Specific	Administered	
02/15/2018	07:31(MT)	1.00	Patient Specific	Administered	
02/14/2018	07:06(MT)	1.00	Patient Specific	Administered	
02/13/2018	07:14(MT)	1.00	Patient Specific	Administered	
02/12/2018	07:12(MT)	1.00	Patient Specific	Administered	
02/11/2018	08:20(MT)	1.00	Patient Specific	Administered	
02/10/2018	08:07(MT)	1.00	Patient Specific	Administered	
02/09/2018	07:52(MT)	1.00	Patient Specific	Administered	
02/08/2018	07:21(MT)	1.00	Patient Specific	Administered	
02/07/2018	07:05(MT)	1.00	Patient Specific	Administered	
02/06/2018	07:18(MT)	1.00	Patient Specific	Administered	
02/05/2018	07:21(MT)	1.00	Patient Specific	Administered	
02/04/2018	08:11(MT)	1.00	Patient Specific	Administered	
02/03/2018	08:10(MT)	1.00	Patient Specific	Administered	
02/02/2018	07:29(MT)	1.00	Patient Specific	Administered	
02/01/2018	07:05(MT)	1.00	Patient Specific	Administered	
01/31/2018	07:07(MT)	1.00	Clinic Stock	Administered	

CHR2378 - Drug Prescription Form

Ordered Date: 02/23/2018 Time: 01:18:26 PM (MT)
 Encounter Type: Practitioner - Chronic Care-Follow-up
 Location: Idaho State Correctional Institution [ISCI] Staff: Eldredge, Summer
 Order Number: 0199500 Rx Number: 39726464
 Ordering Practitioner*: Eldredge, Summer Sequence Number: 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary
 Drug Type: VITAMIN B COMP W-C/FA TABS Tabs
 National NDC Code(s):
 RxNorm: 877466 - Ascorbic Acid 60 MG / Calcium Pantothenate 10 MG / D-BIOTIN 0.3 MG / Folic Acid 0.8 MG / Niacinamide 20 MG / pyridoxine 10 MG / Riboflavin 1.7 MG / Thiamine 1.5 MG / Vitamin B 12 0.006 MG Oral Tablet [Rena-Vite];

Effective Date: 02/23/2018
 Generic Acceptable
 Profile Only:
 Dosage*: 1
 Strength*: 1
 Frequency*: D-EVERY DAY
 for*: 365 days (Total duration)
 Route of Administration*: PO-By Mouth Method*: Normal Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: Yes Expiration: 02/22/2019
 Delivery Trn Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 11 # Refills Issued: 3
 Received From Pharmacy: 05/19/2018
 Status*: Received from Pharmacy As of Date*: 05/19/2018

Pharmacy Medication Substitution

Name= Same As Above

Comment

None

Medication Administration Record (7 of 7)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/27/2018	10:22(MT)	0.00	Patient Specific	No Show	
05/23/2018	10:50(MT)	0.00	Patient Specific	No Show	
04/27/2018	10:12(MT)	30.00	Patient Specific	KOP	
04/23/2018	10:38(MT)	0.00	Patient Specific	No Show	
04/20/2018	10:39(MT)	0.00	Patient Specific	No Show	
03/24/2018	10:09(MT)	30.00	Patient Specific	KOP	
02/27/2018	10:07(MT)	30.00	Patient Specific	KOP	

Encounter Header

Date*: 04/04/2018 Start Time*: 07:35:04 AM (MT)
 End Date*: 04/04/2018 End Time*: 07:37:25 AM (MT)
 Category: Nursing
 Type*: Nurse - Medication Renewal Encounter Close Date: 04/08/2018
 Location*: Idaho State Correctional Institution [ISCI] Encounter Close Time: 01:23:59 PM (MT)
 Setting*: Clinic
 Staff Member*: Cleveland, Penny
 Title: Nurse Assistant
 Form Type:

Subjective

Related Health Service Requests

Request Date	Area of Interest	Request Type	Status
No Rows Found			

Subjective Notes

Estrace expired on 4-3-2018 Patient was seen on 3-8-2018 no notes were found about estrace being ordered or discontinued at that time.
 TimeStamp: 4 April 2018 07:41:09 (MT) --- User: Penny Cleveland (CLEPE01)

Objective

Vital Signs

Time	Temp	Pulse	Resp	Height	Weight	BP Sys	BP Dia	Blood Sugar	BMI	O2	Comments
Not Taken											

Objective Notes

None

Assessment

Active Allergies/Health Problems/Conditions

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
001	Allergies - Medication	NKDA (No Known Drug Allergies)			Patient Reported	02/14/2017	
002	Other Diagnosis	Other Diagnosis	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
003	Mental Health	Mental Health	SNOMED: 21897009 - Generalized anxiety disorder (disorder)	Generalized anxiety disorder [F41.1]	Assessed	03/21/2017	03/21/2017
004	Mental Health	Mental Health	SNOMED: 66590003 - Alcohol dependence (disorder)	Alcohol use disorder. Severe [F10.20]	Assessed	03/21/2017	03/21/2017
005	Mental Health	Mental Health	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
006	Other Diagnosis	Pt. Specific Chronic Condition	SNOMED: 93461009 - Gender dysphoria (disorder)	Gender identity disorder, unspecified [F64.9]	Assessed	05/16/2017	05/16/2017

Related Allergies/Health Problems/Conditions

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
No Rows Found							

Assessment Notes

None

Plan

Treatment Orders

Category	Type	Frequency	For Days	Specify Comments
No Rows Found				

Active Drug Prescriptions

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
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VITAMIN B COMP W-C/FA TABS Tabs	RxNorm: 877466 - Ascorbic Acid 60 MG / Calcium Pantothenate 10 MG / D-BIOTIN 0.3 MG / Folic Acid 0.8...	02/23/2018	1	EVERY DAY	02/22/2019	Received from Pharmacy
FINASTERIDE (UD) TABS 5 Mg Tabs	RxNorm: 310346 - FIN5C 5 MG Oral Tablet;	01/25/2018	1	EVERY DAY	04/24/2018	Received from Pharmacy
MEDROXYPROGESTERONE TABS 10 Mg Tabs	RxNorm: 1000114 - medroxyPROGESTERone acetate 10 MG Oral Tablet;	01/08/2018	1	EVERY DAY	01/07/2019	Received from Pharmacy
VENLAFAXINE HCL XR CP24 150 Mg Cp24	RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule;	01/05/2018	3	EVERY MORNING	08/02/2018	Received from Pharmacy
CALCIUM CARB 1250MG/VIT D TABS 1250 Mg Tabs	RxNorm: 809536 - calcium carbonate 1250 MG (calcium 500 MG) / cholecalciferol 200 IU Oral Tablet;	10/30/2017	1	EVERY BEDTIME	10/29/2018	Received from Pharmacy

Ordered Drug Prescriptions

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
No Rows Found						

Lab Test Orders

Lab Test Type	National HIE Code(s)	Priority	Status	Results	Value
No Rows Found					

X-Ray Orders

X-Ray Body Area	National HIE Code(s)	Priority	Status
No Rows Found			

Consultation Request

Request Type	Service Type	Priority	Status
No Rows Found			

Follow-up Appointments

Date	Time	Type	Staff	Location
No Rows Found				

Patient Transfer Holds

Type	Expiration Date	Status
No Rows Found		

Other Actions/Procedures

Group	Type	Approximate Begin Date	Approximate End Date	Specify Comments
No Rows Found				

Plan Notes

None

Patient Education

Patient Education Notes

TimeStamp: 4 April 2018 07:41:29 (MT) --- User: Penny Cleveland (CLEPE01)

Health Classification

Medical: Unknown
 SMI:
 Dental:

None

Encounter Orders Review

Review Type*: Pending Nurses Order
 Review Date: 04/08/2018

Review Staff: Eldredge, Summer
 Review Time: 01:24:48 PM (MT)

Review Notes

Estrace expired on 4-3-2018 Patient was seen on 3-8-2018 no notes were found about estrace being ordered or discontinued at that time.
 TimeStamp: 4 April 2018 07:41:09 (MT) --- User: Penny Cleveland (CLEPE01)

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Type	Staff
No Rows Found	

CHSS027C - Health Services Encounter
 Name: EDMO, MASON D. IDOC#: 94691

Encounter Header

Date*: 04/05/2018 Start Time*: 08:41:59 AM (MT)
 End Date*: 04/05/2018 End Time*: 08:53:20 AM (MT)
 Category: Nursing
 Type*: Nurse - Verbal/Telephone Orders Encounter Close Date: 04/08/2018
 Location*: Idaho State Correctional Institution [ISCI] Encounter Close Time: 01:29:00 PM (MT)
 Setting*: Clinic
 Staff Member*: Wise, Nicholas
 Title: Registered Nurse
 Form Type:

Subjective

Related Health Service Requests (1 - 2 of 2)

Request Date	Area of Interest	Request Type	Status
04/05/2018	Practitioner	Routine	Encounter Held
04/05/2018	Practitioner	Routine	Encounter Held

Subjective Notes

Request Date: 04/05/2018
 HSR 1105103 spironolactone renewal; order made 1/30/18 - 1/29/19 but was discontinued?
 Dr. Alviso D/C per related lab values. No order to restart spironolactone at this time.
 Request Date: 04/05/2018
 HSR 1105104 Estradiol renewal; 1/4/18 - 4/3/18
 Being renewed today.

Objective

Vital Signs

Time	Temp	Pulse	Resp	Height	Weight	Sys	BP Dia	Blood Sugar	BMI	O2	Comments
Not Taken											

Objective Notes

None

Assessment

Active Allergies/Health Problems/Conditions (1 - 6 of 6)

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
001	Allergies - Medication	NKDA (No Known Drug Allergies)			Patient Reported	02/14/2017	
002	Other Diagnosis	Other Diagnosis	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
003	Mental Health	Mental Health	SNOMED: 21897009 - Generalized anxiety disorder (disorder)	Generalized anxiety disorder [F41.1]	Assessed	03/21/2017	03/21/2017
004	Mental Health	Mental Health	SNOMED: 66590003 - Alcohol dependence (disorder)	Alcohol use disorder, Severe [F10.20]	Assessed	03/21/2017	03/21/2017
005	Mental Health	Mental Health	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
006	Other Diagnosis	Pt. Specific Chronic Condition	SNOMED: 93461009 - Gender dysphoria (disorder)	Gender identity disorder, unspecified [F64.9]	Assessed	05/16/2017	05/16/2017

Related Allergies/Health Problems/Conditions

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
No Rows Found							

Assessment Notes

None

Plan

Treatment Orders

Category	Type	Frequency	For Days	Specify Comments
No Rows Found				

Active Drug Prescription Orders (1 - 5 of 5)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
VITAMIN B COMP W-C/FA TABS Tabs ↓	RxNorm: 877466 - Ascorbic Acid 60 MG / Calcium Pantothenate 10 MG / D-BIOTIN 0.3 MG / Folic Acid 0.8...	02/23/2018	1	EVERY DAY	02/22/2019	Received from Pharmacy
FINASTERIDE (UD) TABS 5 Mg Tabs ↓	RxNorm: 310346 - FIN5C 5 MG Oral Tablet;	01/25/2018	1	EVERY DAY	04/24/2018	Received from Pharmacy
MEDROXYPROGESTERONE TABS 10 Mg Tabs ↓	RxNorm: 1000114 - medroxyPROGESTERone acetate 10 MG Oral Tablet;	01/08/2018	1	EVERY DAY	01/07/2019	Received from Pharmacy
VENLAFAXINE HCL XR CP24 150 Mg Cp24 ↓	RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule;	01/05/2018	3	EVERY MORNING	08/02/2018	Received from Pharmacy
CALCIUM CARB 1250MG/VIT D TABS 1250 Mg Tabs ↓	RxNorm: 809536 - calcium carbonate 1250 MG (calcium 500 MG) / cholecalciferol 200 IU Oral Tablet;&nb...	10/30/2017	1	EVERY BEDTIME	10/29/2018	Received from Pharmacy

Ordered Drug Prescriptions (1 - 2 of 2)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
ESTRADIOL TABS 2 Mg Tabs ↓	RxNorm: 197659 - Estradiol 2 MG Oral Tablet;	04/05/2018	2	TWICE DAILY	10/01/2018	Order Accepted at Pharmacy Vendor (SC)
FINASTERIDE (UD) TABS 5 Mg Tabs ↓	RxNorm: 310346 - FIN5C 5 MG Oral Tablet;	04/05/2018	1	EVERY DAY	06/12/2018	Discontinued - Other

Lab Test Orders

Lab Test Type	National HIE Code(s)	Priority	Status	Results	Value
No Rows Found					

X-Ray Orders

X-Ray Body Area	National HIE Code(s)	Priority	Status
No Rows Found			

Consultation Request

Request Type	Service Type	Priority	Status
No Rows Found			

Follow-up Appointments

Date	Time	Type	Staff	Location
No Rows Found				

Patient Transfer Holds

Type	Expiration Date	Status
No Rows Found		

Other Actions/Procedures

Group	Type	Approximate Begin Date	Approximate End Date	Specify Comments
No Rows Found				

Plan Notes

None

Patient Education

Patient Education Notes
admin only

Health Classification

Medical: Unknown
SMI:
Dental:
None

Encounter Orders Review

Review Type*: Practitioner Review
Review Date: 04/08/2018

Review Staff: Eldredge, Summer
Review Time: 01:29:00 PM (MT)

Review Notes

cc med renewal

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff
No Rows Found	

Ordered Date: 04/05/2018	Time: 08:41:59 AM (MT)
Encounter Type: Nurse Verbal/Telephone Orders	
Location: Idaho State Correctional Institution [ISCI]	Staff: Wise, Nicholas
Order Number: 0213512	Rx Number:
Ordering Practitioner*: Eldredge, Summer	Sequence Number: 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary

Drug Type: FINASTERIDE (UD) TABS 5 Mg Tabs

National NDC Code(s)
 RxNorm: 310346 - FIN5C 5 MG Oral Tablet;

Effective Date: 04/05/2018
 Generic Acceptable
 Profile Only:
 Dosage*: 1
 Strength*: 5 Mg
 Frequency*: QD-EVERY DAY
 for*: 69 days (Total duration)

Route of Administration*: PO-By Mouth
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: No
 Delivery Tm Frame*: Routine

Method*: Normal Dose
 Expiration: 06/12/2018
 Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 0 # Refills issued: 0
 Received Fm Pharmacy:
 Status*: Discontinued Other As of Date*: 04/09/2018

Authorized By*: Menard, Steven

Comments

Corizon's preferred 5 Alpha-Reductase Inhibitor is dutasteride 0.5mg once daily. Serum DHT concentrations are reduced by 93 to 94 percent with 0.5 mg/day of dutasteride compared with around 70 percent with 5 mg/day of finasteride.

What if I do not agree with this decision? An appeal may be initiated by resubmitting the order, noting that this is an "Appeal Request" and providing additional clinical rationale/documentation to support the request. Please email IDNonForm@CorizonHealth.com with any questions or concerns.

Gender Dyphoric HRT previously approved

Medication Administration Record

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
No Rows Found					

CHSS037A - Drug Prescription Orders

NAPRE: ESTRO, MASON D.

ID:0001 03/01/18

Show Active Medication Only:

Drug Prescription Orders (1 - 4 of 4)

Ordered Date	Effective Date	Prescription/Medication	National HIE Code(s)	Dosage	Frequency	Expiration Date	Status
05/18/2018	05/18/2018	VENLAFAXINE HCL XR CP24 150 Mg Cp24 ↓	RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule; Ⓢ	2	EVERY MORNING	12/13/2018	Received from Pharmacy
04/09/2018	04/09/2018	FINASTERIDE (UD) TABS 5 Mg Tabs ↓	RxNorm: 310346 - FIN5C 5 MG Oral Tablet; Ⓢ	1	EVERY DAY	07/07/2018	Received from Pharmacy
04/05/2018	04/05/2018	ESTRADIOL TABS 2 Mg Tabs ↓	RxNorm: 197659 - Estradiol 2 MG Oral Tablet; Ⓢ	2	TWICE DAILY	10/01/2018	Order Accepted at Pharmacy Vendor (SC)
04/05/2018	04/05/2018	FINASTERIDE (UD) TABS 5 Mg Tabs ↓	RxNorm: 310346 - FIN5C 5 MG Oral Tablet; Ⓢ	1	EVERY DAY	06/12/2018	Discontinued - Other

C1889778 - Drug Prescription Order

Wise, Nicholas (M.D.) Nurse, Wendy

Ordered Date: 04/05/2018 **Time:** 08:41:59 AM (MT)
Encounter Type: Nurse - Verbal/Telephone Orders
Location: Idaho State Correctional Institution (ISCI) **Staff:** Wise, Nicholas
Order Number: 0213505 **Rx Number:** 30046484
Ordering Practitioner*: Eldredge, Summer **Sequence Number:** 01

Prescription

Diagnosis Code*: Gender Identity Disorder, unspecified [F64.9]
 Formulary Non-Formulary
Drug Type: ESTRADIOL TABS 2 Mg Tabs
National NDC Code(s):
 RxNorm: 197659 - Estradiol 2 MG Oral Tablet;

Effective Date: 04/05/2018
Generic Acceptable:
Profile Only:
Dosage*: 2
Strength*: 2 Mg
Frequency*: BID-TWICE DAILY
 for*: 180 days (Total duration)

Route of Administration*: PO-By Mouth **Method*:** Normal Dose
Pill Call* AM: **Noon:** **PM:** **Bed Time:**
Keep on Person?*: No **Expiration:** 10/01/2018
Delivery Trn Frame*: Routine **Drug on hold until:**

Order Information

Pharmacy Indicated # Refills: 5 **# Refills Issued:** 1
Received From Pharmacy: 04/27/2018
Status*: Order Accepted at Pharmacy Vendor (SC) **As of Date*:** 04/26/2018

Pharmacy Medication Substitution

Name= Same As Above

Comments

cc med renewal

Medication Administration Record (1 of 110)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/30/2018	06:58(MT)	2.00	Patient Specific	Administered	
05/29/2018	17:18(MT)	2.00	Patient Specific	Administered	
05/29/2018	07:07(MT)	2.00	Patient Specific	Administered	
05/28/2018	17:15(MT)	2.00	Patient Specific	Administered	
05/28/2018	07:01(MT)	2.00	Patient Specific	Administered	
05/27/2018	17:13(MT)	2.00	Patient Specific	Administered	
05/27/2018	08:33(MT)	2.00	Patient Specific	Administered	
05/26/2018	17:18(MT)	2.00	Patient Specific	Administered	
05/26/2018	07:55(MT)	2.00	Patient Specific	Administered	
05/25/2018	19:25(MT)	2.00	Patient Specific	Administered	
05/25/2018	06:56(MT)	2.00	Patient Specific	Administered	
05/24/2018	17:29(MT)	2.00	Patient Specific	Administered	
05/24/2018	07:07(MT)	2.00	Patient Specific	Administered	
05/23/2018	17:16(MT)	2.00	Patient Specific	Administered	
05/23/2018	07:02(MT)	2.00	Patient Specific	Administered	
05/22/2018	17:29(MT)	2.00	Patient Specific	Administered	
05/22/2018	07:09(MT)	2.00	Patient Specific	Administered	
05/21/2018	17:53(MT)	0.00	Patient Specific	No Show	
05/21/2018	07:05(MT)	2.00	Patient Specific	Administered	
05/20/2018	17:21(MT)	2.00	Patient Specific	Administered	
05/20/2018	08:26(MT)	2.00	Patient Specific	Administered	
05/19/2018	17:21(MT)	2.00	Patient Specific	Administered	05/22/2018 20:28:49 Rodriguez, Guadalupe Dosed 5/19/18 by Rodriguez T...
05/19/2018	08:18(MT)	2.00	Patient Specific	Administered	
05/18/2018	17:25(MT)	2.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/18/2018	07:09(MT)	2.00	Patient Specific	Administered	
05/17/2018	17:31(MT)	2.00	Patient Specific	Administered	
05/17/2018	06:53(MT)	2.00	Patient Specific	Administered	
05/16/2018	17:23(MT)	2.00	Patient Specific	Administered	
05/16/2018	06:53(MT)	2.00	Patient Specific	Administered	
05/15/2018	17:32(MT)	2.00	Patient Specific	Administered	
05/15/2018	07:03(MT)	2.00	Patient Specific	Administered	
05/14/2018	17:22(MT)	2.00	Patient Specific	Administered	
05/14/2018	07:00(MT)	2.00	Patient Specific	Administered	
05/13/2018	17:21(MT)	2.00	Patient Specific	Administered	
05/13/2018	08:14(MT)	2.00	Patient Specific	Administered	
05/12/2018	18:04(MT)	2.00	Patient Specific	Administered	
05/12/2018	08:16(MT)	2.00	Patient Specific	Administered	
05/11/2018	17:23(MT)	2.00	Patient Specific	Administered	
05/11/2018	07:25(MT)	2.00	Patient Specific	Administered	
05/10/2018	18:20(MT)	2.00	Patient Specific	Administered	
05/10/2018	07:08(MT)	2.00	Patient Specific	Administered	
05/09/2018	17:16(MT)	2.00	Patient Specific	Administered	
05/09/2018	07:04(MT)	2.00	Patient Specific	Administered	
05/08/2018	17:16(MT)	2.00	Patient Specific	Administered	
05/08/2018	07:08(MT)	2.00	Patient Specific	Administered	
05/07/2018	17:14(MT)	2.00	Patient Specific	Administered	
05/07/2018	07:18(MT)	2.00	Patient Specific	Administered	
05/06/2018	19:06(MT)	2.00	Patient Specific	Administered	
05/06/2018	08:15(MT)	2.00	Patient Specific	Administered	
05/05/2018	17:27(MT)	2.00	Patient Specific	Administered	
05/05/2018	08:14(MT)	2.00	Patient Specific	Administered	
05/04/2018	17:17(MT)	2.00	Patient Specific	Administered	
05/04/2018	07:07(MT)	2.00	Patient Specific	Administered	
05/03/2018	18:48(MT)	2.00	Patient Specific	Administered	
05/03/2018	07:06(MT)	2.00	Patient Specific	Administered	
05/02/2018	17:23(MT)	2.00	Patient Specific	Administered	
05/02/2018	06:54(MT)	2.00	Patient Specific	Administered	
05/01/2018	17:39(MT)	2.00	Patient Specific	Administered	
05/01/2018	06:56(MT)	2.00	Patient Specific	Administered	
04/30/2018	17:49(MT)	0.00	Patient Specific	No Show	
04/30/2018	07:21(MT)	2.00	Patient Specific	Administered	
04/29/2018	17:19(MT)	2.00	Patient Specific	Administered	
04/29/2018	08:10(MT)	2.00	Patient Specific	Administered	
04/28/2018	17:23(MT)	2.00	Patient Specific	Administered	
04/28/2018	08:22(MT)	2.00	Patient Specific	Administered	
04/27/2018	18:06(MT)	0.00	Patient Specific	No Show	
04/27/2018	07:09(MT)	2.00	Patient Specific	Administered	
04/26/2018	17:21(MT)	2.00	Patient Specific	Administered	
04/26/2018	07:04(MT)	2.00	Patient Specific	Administered	
04/25/2018	17:25(MT)	2.00	Patient Specific	Administered	
04/25/2018	06:58(MT)	2.00	Patient Specific	Administered	
04/24/2018	17:06(MT)	2.00	Patient Specific	Administered	
04/24/2018	07:03(MT)	2.00	Patient Specific	Administered	
04/23/2018	17:28(MT)	2.00	Patient Specific	Administered	
04/23/2018	07:01(MT)	2.00	Patient Specific	Administered	
04/22/2018	17:18(MT)	2.00	Patient Specific	Administered	
04/22/2018	08:17(MT)	2.00	Patient Specific	Administered	
04/21/2018	17:50(MT)	2.00	Patient Specific	Administered	
04/21/2018	08:08(MT)	2.00	Patient Specific	Administered	
04/20/2018	17:26(MT)	2.00	Patient Specific	Administered	
04/20/2018	07:10(MT)	2.00	Patient Specific	Administered	
04/19/2018	18:21(MT)	0.00	Patient Specific	No Show	
04/19/2018	07:06(MT)	2.00	Patient Specific	Administered	
04/18/2018	17:17(MT)	2.00	Patient Specific	Administered	
04/18/2018	06:50(MT)	2.00	Patient Specific	Administered	
04/17/2018	21:20(MT)	0.00	Patient Specific	No Show	
04/17/2018	06:56(MT)	2.00	Patient Specific	Administered	
04/16/2018	21:29(MT)	0.00	Patient Specific	No Show	
04/16/2018	07:00(MT)	2.00	Patient Specific	Administered	
04/15/2018	17:24(MT)	2.00	Patient Specific	Administered	
04/15/2018	08:05(MT)	2.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
04/14/2018	17:36(MT)	2.00	Patient Specific	Administered	
04/14/2018	07:56(MT)	2.00	Patient Specific	Administered	
04/13/2018	17:26(MT)	2.00	Patient Specific	Administered	
04/13/2018	07:31(MT)	2.00	Patient Specific	Administered	
04/12/2018	17:34(MT)	2.00	Patient Specific	Administered	
04/12/2018	06:57(MT)	2.00	Patient Specific	Administered	
04/11/2018	19:12(MT)	0.00	Patient Specific	No Show	
04/11/2018	07:10(MT)	2.00	Patient Specific	Administered	
04/10/2018	18:28(MT)	0.00	Patient Specific	No Show	
04/10/2018	07:12(MT)	2.00	Patient Specific	Administered	
04/09/2018	18:31(MT)	0.00	Patient Specific	No Show	
04/09/2018	07:09(MT)	2.00	Patient Specific	Administered	
04/08/2018	17:36(MT)	2.00	Patient Specific	Administered	
04/08/2018	08:02(MT)	2.00	Patient Specific	Administered	
04/07/2018	17:25(MT)	2.00	Patient Specific	Administered	
04/07/2018	08:26(MT)	2.00	Patient Specific	Administered	
04/06/2018	17:38(MT)	2.00	Patient Specific	Administered	
04/06/2018	07:07(MT)	2.00	Clinic Stock	Administered	
04/05/2018	17:54(MT)	2.00	Clinic Stock	Administered	

Encounter Header

Date*: 04/09/2018 Start Time*: 11:14:28 AM (MT)
 End Date*: 04/09/2018 End Time*: 11:14:28 AM (MT)
 Category: Medical Practitioner
 Type*: Practitioner - Medication Renewal Encounter Close Date: 04/24/2018
 Location*: Idaho State Correctional Institution (ISCI) Encounter Close Time: 01:37:38 PM (MT)
 Setting*: Clinic
 Staff Member*: Haggard, Rebekah
 Title: Medical Doctor
 Form Type:

Subjective

Related Health Service Requests

Request Date	Area of Interest	Request Type	Status
No Rows Found			

Subjective Notes

This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.

Objective

Vital Signs

Time	Temp	Pulse	Resp	Height	Weight	BP Sys	BP Dia	Blood Sugar	BMI	O2	Comments
Not Taken											

Objective Notes

None

Assessment

Medical Diagnosis/Complaint

ICD Code	Diagnosis/Complaint
No Rows Found	

Health Services

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
001	Allergies - Medication	NKDA (No Known Drug Allergies)			Patient Reported	02/14/2017	
002	Other Diagnosis	Other Diagnosis	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
003	Mental Health	Mental Health	SNOMED: 21897009 - Generalized anxiety disorder (disorder)	Generalized anxiety disorder [F41.1]	Assessed	03/21/2017	03/21/2017
004	Mental Health	Mental Health	SNOMED: 66590003 - Alcohol dependence (disorder)	Alcohol use disorder, Severe [F10.20]	Assessed	03/21/2017	03/21/2017
005	Mental Health	Mental Health	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
006	Other Diagnosis	Pt. Specific Chronic Condition	SNOMED: 93461009 - Gender dysphoria (disorder)	Gender identity disorder, unspecified [F64.9]	Assessed	05/16/2017	05/16/2017

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
No Rows Found							

Assessment of

None

Plan

Treatment Orders

Category	Type	Frequency	For Days	Specify Comments
No Rows Found				

Active Drug Prescription Orders (1 - 5 of 7)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
ESTRADIOL TABS 2 Mg Tabs	RxNorm: 197659 - Estradiol 2 MG Oral Tablet;	04/05/2018	2	TWICE DAILY	10/01/2018	Received from Pharmacy
VITAMIN B COMP W-C/FA TABS Tabs	RxNorm: 877466 - Ascorbic Acid 80 MG / Calcium Pantothenate 10 MG / D-BIOTIN 0.3 MG / Folic Acid 0.8...	02/23/2018	1	EVERY DAY	02/22/2019	Received from Pharmacy
MEDROXYPROGESTERONE TABS 10 Mg Tabs	RxNorm: 1000114 - medroxyPROGESTERone acetate 10 MG Oral Tablet;	01/08/2018	1	EVERY DAY	01/07/2019	Received from Pharmacy
VENLAFAXINE HCL XR CP24 150 Mg Cp24	RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule;	01/05/2018	3	EVERY MORNING	08/02/2018	Received from Pharmacy
CALCIUM CARB 1250MG/VIT D TABS 1250 Mg Tabs	RxNorm: 809536 - calcium carbonate 1250 MG (calcium 500 MG) / cholecalciferol 200 IU Oral Tablet;&nb...	10/30/2017	1	EVERY BEDTIME	10/29/2018	Received from Pharmacy

Ordered Drug Prescriptions (1 - 1 of 1)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
FINASTERIDE (UD) TABS 5 Mg Tabs	RxNorm: 310346 - FIN5C 5 MG Oral Tablet;	04/09/2018	1	EVERY DAY	07/07/2018	Received from Pharmacy

Lab Test Orders

Lab Test Type	National HIE Code(s)	Priority	Status	Results	Value
No Rows Found					

X-Ray Orders

X-Ray Body Area	National HIE Code(s)	Priority	Status
No Rows Found			

Consultation Request

Request Type	Service Type	Priority	Status
No Rows Found			

Follow-up Appointments

Date	Time	Type	Staff	Location
No Rows Found				

Patient Transfer Holds

Type	Expiration Date	Status
No Rows Found		

Other Actions/Procedures

Group	Type	Approximate Begin Date	Approximate End Date	Specify Comments
No Rows Found				

Plan Notes

None

Patient Education

Patient Education Notes
None

Health Classification

Medical: Unknown
SMI:
Dental:

Classification and Security Notes
None

Encounter Orders Review

Review Type*: No Review Required
Review Staff: Unknown

Review Notes
None

Scanned Documents/Photos				
Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms	
Type	Staff
No Rows Found	

0208270 - Drug Prescription Order

Ordered Date: 04/09/2018 Time: 11:14:28 AM (MT)
 Encounter Type: Practitioner Medication Renewal
 Location: Idaho State Correctional Institution [ISCI] Staff: Haggard, Rebekah
 Order Number: 0214604 Rx Number: 30052283
 Ordering Practitioner*: Haggard, Rebekah Sequence Number: 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary
 Drug Type: FINASTERIDE (UD) TABS 5 Mg Tabs
 RxNorm: 310346 - FIN5C 5 MG Oral Tablet;

Effective Date: 04/09/2018
 Generic Acceptable
 Profile Only:
 Dosage*: 1
 Strength*: 5 Mg
 Frequency*: QD-EVERY DAY
 for*: 90 days (Total duration)
 Route of Administration*: PO-By Mouth Method*: Normal Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?*: No Expiration: 07/07/2018
 Delivery Trn Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 1 # Refills Issued: 1
 Received From Pharmacy: 05/02/2018
 Status*: Received from Pharmacy As of Date*: 05/02/2018

Pharmacy Medication Substitution

Name= Same As Above

Comments

Why must this drug be used instead of one included on the formulary? Gender Dysphoria hormone regimen per Wellness Center specialist orders
 What formulary drugs have been tried? preferred agent Avodart not acceptable for this indication per Dr Alviso
 What was outcome? n/a

Medication Administration Record (1 - 31 of 31)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/30/2018	06:58(MT)	1.00	Patient Specific	Administered	
05/29/2018	07:07(MT)	1.00	Patient Specific	Administered	
05/28/2018	07:01(MT)	1.00	Patient Specific	Administered	
05/27/2018	08:33(MT)	1.00	Patient Specific	Administered	
05/26/2018	07:55(MT)	1.00	Patient Specific	Administered	
05/25/2018	06:56(MT)	1.00	Patient Specific	Administered	
05/24/2018	07:07(MT)	1.00	Patient Specific	Administered	
05/23/2018	07:02(MT)	1.00	Patient Specific	Administered	
05/22/2018	07:09(MT)	1.00	Patient Specific	Administered	
05/21/2018	07:05(MT)	1.00	Patient Specific	Administered	
05/20/2018	08:26(MT)	1.00	Patient Specific	Administered	
05/19/2018	08:18(MT)	1.00	Patient Specific	Administered	
05/18/2018	07:09(MT)	1.00	Patient Specific	Administered	
05/17/2018	06:53(MT)	1.00	Patient Specific	Administered	
05/16/2018	06:53(MT)	1.00	Patient Specific	Administered	
05/15/2018	07:03(MT)	1.00	Patient Specific	Administered	
05/14/2018	07:00(MT)	1.00	Patient Specific	Administered	
05/13/2018	08:14(MT)	1.00	Patient Specific	Administered	
05/12/2018	08:16(MT)	1.00	Patient Specific	Administered	
05/11/2018	07:25(MT)	1.00	Patient Specific	Administered	
05/10/2018	07:08(MT)	1.00	Patient Specific	Administered	
05/09/2018	07:04(MT)	1.00	Patient Specific	Administered	
05/08/2018	07:08(MT)	1.00	Patient Specific	Administered	

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/07/2018	07:18(MT)	1.00	Patient Specific	Administered	
05/06/2018	08:15(MT)	1.00	Patient Specific	Administered	
05/05/2018	08:14(MT)	1.00	Patient Specific	Administered	
05/04/2018	07:07(MT)	1.00	Patient Specific	Administered	
05/03/2018	07:06(MT)	1.00	Patient Specific	Administered	
05/02/2018	06:54(MT)	1.00	Patient Specific	Administered	
05/01/2018	06:56(MT)	1.00	Patient Specific	Administered	
04/30/2018	07:21(MT)	1.00	Patient Specific	Administered	
04/29/2018	08:10(MT)	1.00	Patient Specific	Administered	
04/28/2018	08:22(MT)	1.00	Patient Specific	Administered	
04/27/2018	07:09(MT)	1.00	Patient Specific	Administered	
04/26/2018	07:04(MT)	1.00	Patient Specific	Administered	
04/25/2018	06:58(MT)	1.00	Patient Specific	Administered	
04/24/2018	07:03(MT)	1.00	Patient Specific	Administered	
04/23/2018	07:01(MT)	1.00	Patient Specific	Administered	
04/22/2018	08:17(MT)	1.00	Patient Specific	Administered	
04/21/2018	08:08(MT)	1.00	Patient Specific	Administered	
04/20/2018	07:10(MT)	1.00	Patient Specific	Administered	
04/19/2018	07:06(MT)	1.00	Patient Specific	Administered	
04/18/2018	06:50(MT)	1.00	Patient Specific	Administered	
04/17/2018	06:56(MT)	1.00	Patient Specific	Administered	
04/16/2018	07:00(MT)	1.00	Patient Specific	Administered	
04/15/2018	08:05(MT)	1.00	Patient Specific	Administered	
04/14/2018	07:56(MT)	1.00	Patient Specific	Administered	
04/13/2018	07:31(MT)	1.00	Patient Specific	Administered	
04/12/2018	06:57(MT)	1.00	Patient Specific	Administered	
04/11/2018	07:10(MT)	1.00	Patient Specific	Administered	
04/10/2018	07:12(MT)	1.00	Clinic Stock	Administered	

Drug Prescription Order

Ordered Date: 05/18/2018 **Time:** 11:26:15 AM (MT)
Encounter Type: MH - Psychiatrist - Medication Renewal
Location: Idaho State Correctional Institution [ISCI] **Staff:** Hutchison, Emily
Order Number: 0227952 **Rx Number:** 41102733
Ordering Practitioner*: Hutchison, Emily **Sequence Number:** 01

Prescription

Diagnosis Code*: Major depressive disorder, recurrent, in partial remission [F33.41]
 Formulary Non-Formulary
Drug Type: VENLAFAXINE HCL XR CP24 150 Mg Cp24
National NDC Code(s):
RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule; 1

Effective Date: 05/18/2018
Generic Acceptable:
Profile Only:
Dosage*: 2
Strength*: 150 MG
Frequency*: QAM-EVERY MORNING
 for*: 210 days (Total duration)
Route of Administration*: PO-By Mouth **Method*:** Daily Dose
Pill Call* AM: **Noon:** **PM:** **Bed Time:**
Keep on Person?*: No **Expiration:** 12/13/2018
Delivery Tm Frame*: Routine **Drug on hold until:**

Order Information

Pharmacy Indicated # Refills: 6 **# Refills Issued:** 0
Received Fm Pharmacy: 05/19/2018
Status*: Received from Pharmacy **As of Date*:** 05/19/2018

Pharmacy Medication Substitution

Name= Same As Above

Comments

None

Medication Administration Record (1 - 12 of 12)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
05/30/2018	06:58(MT)	2.00	Patient Specific	Administered	
05/29/2018	07:07(MT)	2.00	Patient Specific	Administered	
05/28/2018	07:01(MT)	2.00	Patient Specific	Administered	
05/27/2018	08:33(MT)	2.00	Patient Specific	Administered	
05/26/2018	07:55(MT)	2.00	Patient Specific	Administered	
05/25/2018	06:56(MT)	2.00	Patient Specific	Administered	
05/24/2018	07:07(MT)	2.00	Patient Specific	Administered	
05/23/2018	07:02(MT)	2.00	Patient Specific	Administered	
05/22/2018	07:09(MT)	2.00	Patient Specific	Administered	
05/21/2018	07:05(MT)	2.00	Patient Specific	Administered	
05/20/2018	08:26(MT)	2.00	Patient Specific	Administered	
05/19/2018	08:18(MT)	2.00	Clinic Stock	Administered	

CHSS027C - Health Services Encounter

Name: EDMO, MASON D. IDOC#: 94691

Encounter Header

Date*: 05/18/2018 Start Time*: 11:26:15 AM (MT)
 End Date*: 05/18/2018 End Time*: 11:26:15 AM (MT)
 Category: Mental Health
 Type*: MH - Psychiatrist - Medication Renewal
 Location*: Idaho State Correctional Institution [ISCI]
 Setting*: Clinic
 Staff Member*: Hutchison, Emily
 Title: Psychiatrist
 Form Type:

Subjective

Request Date	Area of Interest	Request Type	Status
No Rows Found			

Subjective Notes

This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.

Objective

Vital Signs (1 - 1 of 1)											
Time	Temp	Pulse	Resp	Height	Weight	BP Sys	BP Dia	Blood Sugar	BMI	O2	Comments
10:12(NT)				5'7"	202			NA	31.63		MH provider visit

Objective Notes

None

Assessment

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
001	Allergies - Medication	NKDA (No Known Drug Allergies)			Patient Reported	02/14/2017	
002	Other Diagnosis	Other Diagnosis	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
003	Mental Health	Mental Health	SNOMED: 21897009 - Generalized anxiety disorder (disorder)	Generalized anxiety disorder [F41.1]	Assessed	03/21/2017	03/21/2017
004	Mental Health	Mental Health	SNOMED: 66590003 - Alcohol dependence (disorder)	Alcohol use disorder, Severe [F10.20]	Assessed	03/21/2017	03/21/2017
005	Mental Health	Mental Health	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
006	Other Diagnosis	Pt. Specific Chronic Condition	SNOMED: 93461009 - Gender dysphoria (disorder)	Gender identity disorder, unspecified [F64.3]	Assessed	05/16/2017	05/16/2017

Related Allergies/Health Problems/Conditions

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
No Rows Found							

Assessment Notes

None

Plan

Active Drug Prescription Orders (1 - 1 of 1)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
FINASTERIDE (UD) TABS 5 Mg Tabs	RxNorm: 310346 - FINSC 5 MG Oral Tablet;	04/09/2018	1	EVERY DAY	07/07/2018	Received from Pharmacy

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
ESTRADIOL TABS 2 Mg Tabs	RxNorm: 197659 - Estradiol 2 MG Oral Tablet;	04/05/2018	2	TWICE DAILY	10/01/2018	Received from Pharmacy
VITAMIN B COMP W-C/FA TABS Tabs	RxNorm: 877466 - Ascorbic Acid 60 MG / Calcium Pantothenate 10 MG / D-BIOTIN 0.3 MG / Folic Acid 0.8...	02/23/2018	1	EVERY DAY	02/22/2019	Order Accepted at Pharmacy Vendor (SC)
MEDROXYPROGESTERONE TABS 10 Mg Tabs	RxNorm: 1000114 - medroxyPROGESTERone acetate 10 MG Oral Tablet;	01/08/2018	1	EVERY DAY	01/07/2019	Received from Pharmacy
CALCIUM CARB 1250MG/VIT D TABS 1250 Mg Tabs	RxNorm: 809536 - calcium carbonate 1250 MG (calcium 500 MG) / cholecalciferol 200 IU Oral Tablet;&nb...	10/30/2017	1	EVERY BEDTIME	10/29/2018	Received from Pharmacy

Ordered Drug Prescriptions (1 - 1 of 1)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
VENLAFAXINE HCL XR CP24 150 Mg Cp24	RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule;	05/18/2018	2	EVERY MORNING	12/13/2018	Received from Pharmacy

Lab Test Orders

Lab Test Type	National HIE Code(s)	Priority	Status	Results	Value
No Rows Found					

X-Ray Orders

X-Ray Body Area	National HIE Code(s)	Priority	Status
No Rows Found			

Consultation Request

Request Type	Service Type	Priority	Status
No Rows Found			

Follow-up Appointments

Date	Time	Type	Staff	Location
No Rows Found				

Patient Transfer Holds

Type	Expiration Date	Status
No Rows Found		

Other Actions/Procedures

Group	Type	Approximate Begin Date	Approximate End Date	Specify Comments
No Rows Found				

Plan Notes

None

Patient Education

Patient Education Notes

None

Health Classification

Medical: Unknown
 SMI:
 Dental:

Classification and Security Notes

None

Encounter Orders Review

Review Type*: No Review Required

Review Staff: Unknown

Review Notes

None

Scanned Documents/Photos				
Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms	
Type	Staff
No Rows Found	

Ordered Date	Specimen Date	Results Date	Encounter Type	Lab Test Code	National HIE Code(s)	Lab Test Status	Test Result	Value	Recurring Frequency
03/15/2018			Nurse - Verbal/Telephone Orders	ESTRADIOL	LOINC: 2243-4 - ESTRADIOL; ⑥	Ordered			No Repeat
03/15/2018			Nurse - Verbal/Telephone Orders	COMP. METABOLIC (CMP)	LOINC: 2823-3 - Potassium; 2160-0 - Creatinine; 2885-2 - Total Protein; &... ⑥	Ordered			No Repeat
02/28/2018	03/06/2018	03/07/2018	Nurse - Verbal/Telephone Orders	COMP. METABOLIC (CMP)	LOINC: 2823-3 - Potassium; 2160-0 - Creatinine; 2885-2 - Total Protein; &... ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
02/19/2018	02/26/2018	02/27/2018	Nurse - Verbal/Telephone Orders	CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC	LOINC: 2085-9 - HDL CHOL., DIRECT; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
02/12/2018	02/14/2018	02/15/2018	Nurse - Verbal/Telephone Orders	CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC	LOINC: 2085-9 - HDL CHOL., DIRECT; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
02/06/2018	02/07/2018	02/08/2018	Nurse - Verbal/Telephone Orders	ESTRADIOL	LOINC: 2243-4 - ESTRADIOL; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
01/29/2018	01/29/2018	01/31/2018	Lab Test (Unsolicited)	CBC WITH DIFF	LOINC: 31160-5 - POLYS; 803-7 - TOXIC GRANULATION; 6746-2 - PROLYMPHOCYTES;&nb... ⑥	Completed - Results Reviewed	See Report	From Vendor	
01/29/2018	01/29/2018	01/31/2018	Lab Test (Unsolicited)	COMP. METABOLIC (CMP)	LOINC: 2823-3 - Potassium; 2160-0 - Creatinine; 2885-2 - Total Protein; &... ⑥	Completed - Results Reviewed	See Report	From Vendor	
01/23/2018	01/29/2018		Nurse - Verbal/Telephone Orders	COMP. METABOLIC (CMP)	LOINC: 2823-3 - Potassium; 2160-0 - Creatinine; 2885-2 - Total Protein; &... ⑥	Successfully Sent Electronically to Vendor			No Repeat
01/17/2018	01/18/2018	01/22/2018	Nurse - Verbal/Telephone Orders	CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC	LOINC: 2085-9 - HDL CHOL., DIRECT; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
01/16/2018	01/16/2018		Nurse - Verbal/Telephone Orders	CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC	LOINC: 2085-9 - HDL CHOL., DIRECT; ⑥	Successfully Sent Electronically to Vendor			No Repeat
01/08/2018	01/12/2018	01/13/2018	Nurse - Verbal/Telephone Orders	COMP. METABOLIC (CMP)	LOINC: 2823-3 - Potassium; 2160-0 - Creatinine; 2885-2 - Total Protein; &... ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
01/04/2018	01/29/2018	01/31/2018	Nurse - Verbal/Telephone Orders	TESTOSTERONE, TOT.,S.	LOINC: 2986-8 - TESTOSTERONE, TOT.,S.; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
01/04/2018	01/29/2018	01/31/2018	Nurse - Verbal/Telephone Orders	ESTRADIOL (E2), SERUM	LOINC: 35384-7 - ESTRADIOL (E2), SERUM; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
12/19/2017	12/20/2017	12/22/2017	Nurse - Verbal/Telephone Orders	PROLACTIN, SERUM	LOINC: 2842-3 - PROLACTIN, SERUM; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
12/19/2017	12/20/2017	12/22/2017	Nurse - Verbal/Telephone Orders	TESTOSTERONE, TOT.,S.	LOINC: 2986-8 - TESTOSTERONE, TOT.,S.; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
12/19/2017	12/20/2017	12/22/2017	Nurse - Verbal/Telephone Orders	CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC	LOINC: 2085-9 - HDL CHOL., DIRECT; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
12/19/2017	12/20/2017	12/22/2017	Nurse - Verbal/Telephone Orders	ESTRADIOL (E2), SERUM	LOINC: 35384-7 - ESTRADIOL (E2), SERUM; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
10/23/2017	10/23/2017	10/25/2017	Nurse - PPD Administration	PPD		Completed	Negative	0 mm	
09/05/2017	09/05/2017	09/07/2017	Lab Test (Unsolicited)	CBC WITH DIFF	LOINC: 31160-5 - POLYS; 803-7 - TOXIC GRANULATION; 6746-2 - PROLYMPHOCYTES;&nb... ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
09/05/2017	09/05/2017	09/07/2017	Lab Test (Unsolicited)	COMP. METABOLIC (CMP)	LOINC: 2823-3 - Potassium; 2160-0 - Creatinine; 2885-2 - Total Protein; &... ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
08/31/2017	09/05/2017	09/07/2017	Practitioner - Chronic Care-Follow-up	PROLACTIN, SERUM	LOINC: 2842-3 - PROLACTIN, SERUM; ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat
08/31/2017	09/05/2017	09/07/2017	Practitioner - Chronic Care-Follow-up	ESTROGEN PANEL	LOINC: 2243-4 - ESTRADIOL; 2250-9 - ESTRADIOL, UNCONJUGATED; 2258-2 - ESTRONE (E... ⑥	Completed - Results Reviewed	See Report	From Vendor	No Repeat

Order#	Specimen Date	Results Date	Encounter Type	Lab Test Type	National HIE Code(s)	Lab Test Status	Test Result	Value	Recurring Frequency
08/31/2017	09/05/2017	09/07/2017	Practitioner - Chronic Care-Follow-up	TESTOSTERONE FREE + TOTAL	LOINC: 1753-7 - Albumin; 2942-1 - SEX HORM.BIND.GLOB.; 2986-8 - TESTOSTERONE, ...	Completed - Results Reviewed	See Report	From Vendor	No Repeat
04/18/2017	04/19/2017	04/20/2017	Practitioner - Sick Call - Scheduled	RPR	LOINC: 11084-1 - RPR;	Completed - Results Reviewed	See Report	From Vendor	
04/18/2017	04/19/2017	04/20/2017	Practitioner - Sick Call - Scheduled	Hepatitis Screen	LOINC: 53776-1 - HEP. A Ab., TOTAL; 16933-4 - HEP. B CORE Ab.; 5195-3 - HEP. B., ...	Completed - Results Reviewed	See Report	From Vendor	
04/18/2017	04/19/2017	04/20/2017	Practitioner - Sick Call - Scheduled	HIV Ag/Ab	LOINC: 56888-1 - HIV Ag/Ab;	Completed - Results Reviewed	See Report	From Vendor	

HSS0318 - Lab Test Order

Name: **EDMO, MASON D** ID: **94691**

Ordered Date: 04/18/2017 Time: 09:01:38 AM (MT)
 Encounter Type: Practitioner - Sick Call - Scheduled
 Location: Idaho State Correctional Institution [ISCI] Staff: Bushnell, Anthony
 Ordering Practitioner*: Bushnell, Anthony

Formulary Non-Formulary
 Lab Test Ordered*: RPR [BR-0142-0]

National HIE Code(s)

Priority*: Rout (Draw-10days;RsIts-48hrs)
 Lab Schedule Date*: 04/28/2017
 Fasting*: No
 Recurring Frequency*:
 Order Number: 002756100003ME

Instructions
 None

Specimen Instructions

Specimen Collected Date: 04/19/2017 Time: 08:17:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100001

Specimen Comments
 None

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
RPR	Non-Reactive		Normal	Non-Reactive	Final Results	<input checked="" type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: BIOR
 Results Received Date: 04/20/2017 Time: 06:45:43 AM (MT)
 Test Results: See Report

ID302

PAGE: 1

EDMO, MASON
IDOC#: 94691

SEX: M D/O/B: XXXXXXXXXX

Thurston, Galyna
 COLLECTION DATE: 04/19/2017 07:17
 RECEIVED DATE: 04/20/2017 00:26
 INITIAL REPORT DATE: 04/20/2017 06:34
 ACCESSION NO.: 970941728

DESCRIPTION RESULT OUT OF RANGE REF RANGE UNITS

RPR Serology

RPR Non-Reactive Complete Non-Reactive Titer

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

RESULTS COMMENTS

None

Results Review

Reviewed Date: 04/20/2017

Time: 07:40:17 AM (MT)

Review Staff: Bushnell, Anthony

Inmate Notice:

Review Notes

TimeStamp: 20 April 2017 07:40:59 (MT) --- User: Anthony Bushnell (BUSAN01)

Status: Completed - Results Reviewed

As of Date*: 04/20/2017

P15600218 - Lab Test Order

Ordered Date: 04/18/2017 Time: 09:01:38 AM (MT)
 Encounter Type: Practitioner - Sick Call - Scheduled
 Location: Idaho State Correctional Institution [ISCI] Staff: Bushnell, Anthony
 Ordering Practitioner*: Bushnell, Anthony

Formulary Non-Formulary
 Lab Test Ordered*: Hepatitis Screen [BR-0330-1]

National NTE Code(s)

Priority*: Rout (Draw-10days;RsIts-48hrs)
 Lab Schedule Date*: 04/28/2017
 Fasting*: No
 Recurring Frequency*:
 Order Number: 002756100002ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 04/19/2017 Time: 08:17:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100001

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
HEP_A Ab., TOTAL	Non-Reactive		Normal	Non-Reactive	Final Results	<input type="checkbox"/>
HEP_B SURF. Ag	Non-Reactive		Normal	Non-Reactive	Final Results	<input type="checkbox"/>
HEP_B CORE Ab.	Non-Reactive		Normal	Non-Reactive	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: BIOR
 Results Received Date: 04/20/2017 Time: 06:45:43 AM (MT)
 Test Results: See Report

ID302

PAGE: 1 EDMO, MASON
DOC#: 34691

Thurston, Galyna
 COLLECTION DATE: 04/19/2017 01:17
 RECEIVED DATE: 04/20/2017 00:26
 INITIAL REPORT DATE: 04/20/2017 06:34
 ACCESSION NO.: 970941728

SEX: M D/O/B: [REDACTED]

==== DESCRIPTION ==== <= RESULT => <=OUT OF RANGE=> <= REF RANGE -> <= UNITS ->

Hepatitis Screen

HEP_A Ab., TOTAL Non-Reactive Non-Reactive
 HEP_B SURF. Ag Non-Reactive Non-Reactive

Hepatitis B Result Interpretation
 (for reference use only)

Marker	LI/EA*	Acute	Base	Chronic	HBV Vacc
HBsAg	+	-	-	+	-
HBeAg	+	+	-	+/ -	-
HEP_B CORE AB, IgM	-	+	-	-	-

HEP. B. CORE AB. - * + + -
 HBeAb - - +/- +/- -
 HBsAb - - +/- - *

*Late Incubation/Early Acute
 NOTE: In remote past infection, HBsAb level may be Negative or Non-Reactive in some patients.

HEP. B CORE Ab. Non-Reactive Non-Reactive

Hepatitis B Result Interpretation
 (for reference use only)

Marker	LI/EA*	Acute	Past	Chronic	HBV Vacc.
HBeAg	+	+	-	+	-
HBeAb	+	+	-	+/-	-
HEP. B. CORE AB, IgM	-	+	-	-	-
HEP. B. CORE AB.	-	+	+	+	-
HBeAb	-	-	+/-	+/-	-
HBsAb	-	-	+/-	-	+

*Late Incubation/Early Acute
 NOTE: In remote past infection, HBsAb level may be Negative or Non-Reactive in some patients.
 -- Complete --

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 04/20/2017 Time: 07:40:35 AM (MT)
 Review Staff: Bushnell, Anthony
 Inmate Notice: Normal Results

Review Notes

Please send MRD, negative for hepatitis other labs pending.
 TimeStamp: 20 April 2017 07:41:52 (MT) --- User: Anthony Bushnell (BUSAN01)

Status: Completed - Results Reviewed

As of Date*: 04/20/2017

HESB318 - Lab Test Order

Ordered Date: 04/18/2017 Time: 09:01:38 AM (MT)
 Encounter Type: Practitioner - Sick Call - Scheduled
 Location: Idaho State Correctional Institution [ISCI] Staff: Bushnell, Anthony
 Ordering Practitioner*: Bushnell, Anthony

Formulary Non-Formulary
 Lab Test Ordered*: HIV Ag/Ab [BR-B688-3]

National HIE Code(s)

Priority*: Rout (Draw-10days;RsIts-48hrs)
 Lab Schedule Date*: 04/28/2017
 Fasting*: No
 Recurring Frequency*:
 Order Number: 002756100001ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 04/19/2017 Time: 08:17:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100001

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
HIV Ag/Ab	Non-Reactive		Normal	Non-Reactive	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: BIOR
 Results Received Date: 04/20/2017 Time: 06:45:43 AM (MT)
 Test Results: See Report

ID302

PAGE: 1

EDMO, MASON
IDOC#: 94691

Thurston, Galyna SEX: M D/O/B: [REDACTED]
 COLLECTION DATE: 04/19/2017 07:17
 RECEIVED DATE: 04/20/2017 00:26
 INITIAL REPORT DATE: 04/20/2017 06:34
 ACCESSION NO.: 970941728

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
HIV AG/AB 4th Generation				
HIV Ag/Ab	Non-Reactive			Non-Reactive

Assay Information: Assay for the detection of HIV p24 antigen and antibodies to Human Immunodeficiency Virus Type 1, including Group O (HIV-1 + "O") and/or Type 2 (HIV-2)
 Method: Chemiluminescence (Siemens Healthcare Diagnostics)
 -- Complete --

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
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No Rows Found

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 04/20/2017 Time: 07:42:21 AM (MT)
 Review Staff: Bushnell, Anthony
 Inmate Notice: Normal Results

Review Notes

Please send MRD, negative for HIV.

Status: Completed - Results Reviewed As of Date*: 04/20/2017

MSS50318 - Lab Test Order

Name: EDMO, MASON D. ID: 94691

Ordered Date: 08/31/2017 Time: 09:44:01 AM (MT)

Encounter Type: Practitioner - Chronic Care-Follow-up

Location: Idaho State Correctional Institution [ISCI] Staff: Rogers, William

Ordering Practitioner*: Rogers, William

Formulary Non-Formulary
 Lab Test Ordered*: PROLACTIN, SERUM [BR-0134-7]

National HIE Code(s):

Priority*: Rout (Draw-10days;RsIts-48hrs)

Lab Schedule Date*: 09/10/2017

Fasting*: No

Recurring Frequency*: No Repeat

Order Number: 002756100006ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 09/05/2017 Time: 07:34:00 AM (MT)

Staff: Thurston, Galyna

Specimen Source: Blood (Venous) Volume: Unit:

Control Number: 002756100002

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
PROLACTIN, SERUM	12.7			2.1-17.7	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7

Results Received Date: 09/07/2017 Time: 02:15:23 PM (MT)

Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON DEAN
IDOC#: 94691

SEX: M D/O/B: [REDACTED]

Thurston, Galyna

COLLECTION DATE: 09/05/2017 06:34

RECEIVED DATE: 09/06/2017 00:44

INITIAL REPORT DATE: 09/07/2017 14:01

ACCESSION NO.: 971109953

◀ DESCRIPTION ▶	◀ RESULT ▶	◀ OUT OF RANGE ▶	◀ REF RANGE ▶	UNITS
Prolactin, Serum				
PROLACTIN, SERUM	12.7	-- Complete --	2.1-17.7	ng/mL

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 09/11/2017

Time: 11:01:06 AM (MT)

Review Staff: Rogers, William

Inmate Notice: Normal Results

Review Notes

TimeStamp: 11 September 2017 11:02:25 (MT) --- User: William Rogers (ROGWI01)

Status: Completed - Results Reviewed

As of Date*: 09/11/2017

HER1021B - Lab Test Order

Name: EDMO, MASON D. IDOC#: 94691

Ordered Date: 08/31/2017 Time: 09:44:01 AM (MT)

Encounter Type: Practitioner - Chronic Care-Follow-up

Location: Idaho State Correctional Institution [ISCI] Staff: Rogers, William

Ordering Practitioner*: Rogers, William

Formulary Non-Formulary

Lab Test Ordered*: ESTROGEN PANEL [BR-2317-6]

National HIE Code(s)

Priority*: Rout (Draw-10days;Rsits-48hrs)

Lab Schedule Date*: 09/10/2017

Fasting*: No

Recurring Frequency*: No Repeat

Order Number: 002756100004ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 09/05/2017 Time: 07:34:00 AM (MT)

Staff: Thurston, Galyna

Specimen Source: Blood (Venous) Volume: Unit:

Control Number: 002756100002

Specimen Comments

None

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
ESTRADIOL	84.40		Above High Normal	<39.90	Final Results	<input type="checkbox"/>
ESTRIOL, UNCONJUGATED	0.1			See Below	Final Results	<input type="checkbox"/>
ESTRONE (E1), SERUM	216.4			See Below	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7

Results Received Date: 09/07/2017 Time: 02:15:23 PM (MT)

Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON DEAN
IDOC#: 94691
SEX: M D/O/B: [REDACTED]

Thurston, Galyna
COLLECTION DATE: 09/05/2017 06:34
RECEIVED DATE: 09/06/2017 00:44
INITIAL REPORT DATE: 09/07/2017 14:01
ACCESSION NO.: 971109953

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Estrogen Panel				
ESTRADIOL	84.40	* HIGH *	<39.90	pg/mL
NOTE: The result for ESTRADIOL was confirmed by repeat analysis.				
ESTRIOL, UNCONJUGATED	0.1		See Below	ng/mL

RANGES FOR UNCONJUGATED ESTRIOL

 Gestational Week Central 95% Range (ng/mL)

 27 2.3-6.4

28	2.3-7.0
29	2.3-7.7
30	2.4-8.6
31	2.6-9.9
32	2.8-11.4
33	3.0->12.0
34	3.3->12.0
35	3.9->12.0
36	4.7->12.0
37	5.6->12.0
38	6.6->12.0
39	7.3->12.0
40	7.6->12.0
Males/Female(Non-Pregnant)	<2.0

ESTRONE (E1), SERUM 216.4 See Below pg/mL

ESTRONE (E1) SERUM REFERENCE RANGES

MALES		E1		Estrone (pg/mL)
	Tanner Stage	Mean Age (yrs)		
1	7.1	<5.0	-	19.0
2	12.1	6.3	-	24.9
3	13.6	15.4	-	27.4
4	15.1	14.8	-	52.0
5	18	10.5	-	52.5
Adult		10.0	-	60.0

FEMALES		E1		Estrone (pg/mL)
	Tanner Stage	Mean Age (yrs)		
1	7.1	<5.0	-	29.0
2	10.5	10.0	-	33.0
3	11.6	15.0	-	43.0
4	12.3	16.0	-	77.0
5	14.5	29.0	-	77.0
Adult				
Premenopausal		17.0	-	200.0
Postmenopausal		7.0	-	40.0

NOTE: Estrone was developed and its performance characteristics were determined by BioReference Laboratories. It has not been cleared by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This lab has been approved by CLIA 08 and designated as a high complexity laboratory and is qualified to perform this test.

ASSAY INFORMATION: LC-MS/MS Methodology
-- Complete --

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 09/11/2017 Time: 11:01:29 AM (MT)
Review Staff: Rogers, William
Inmate Notice:

Review Notes

expected elevation d/t hormone therapy.

Status: Completed Results Reviewed

As of Date*: 09/11/2017

(92350319 - Lab Test Order)

Name: EDMO, HABLON D. IDOC#: 94691

Ordered Date: 08/31/2017 Time: 09:44:01 AM (MT)

Encounter Type: Practitioner - Chronic Care-Follow-up

Location: Idaho State Correctional Institution [ISCI] Staff: Rogers, William

Ordering Practitioner*: Rogers, William

Formulary Non-Formulary

Lab Test Ordered*: TESTOSTERONE FREE + TOTAL [BR-7301-5]

National HIE Code(s)

Priority*: Rout (Draw-10days;RsIts-48hrs)

Lab Schedule Date*: 09/10/2017

Fasting*: No

Recurring Frequency*: No Repeat

Order Number: 002756100005ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 09/05/2017 Time: 07:34:00 AM (MT)

Staff: Thurston, Galyna

Specimen Source: Blood (Venous) Volume: Unit:

Control Number: 002756100002

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
Albumin	4.2			3.2-4.8	Final Results	<input type="checkbox"/>
TESTOSTERONE, TOT., S.	172.0			129.0-767.0	Final Results	<input type="checkbox"/>
SEX HORM. BIND. GLOB.	114		Above High Normal	10-57	Final Results	<input type="checkbox"/>
FREE TESTOSTERONE	13.05		Below Low Normal	30.00-150.00	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7

Results Received Date: 09/07/2017 Time: 02:15:23 PM (MT)

Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, HABLON DEAN
IDOC#: 94691
SEX: M D/O/B: [REDACTED]

Thurston, Galyna
COLLECTION DATE: 09/05/2017 06:34
RECEIVED DATE: 09/06/2017 00:44
INITIAL REPORT DATE: 09/07/2017 14:01
ACCESSION NO.: 971109953

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Testosterone Free + Total w/ SHBG, Albumin				
Albumin	4.2		3.2-4.8	g/dL
TESTOSTERONE, TOT., S.	172.0		129.0-767.0	ng/dL
SEX HORM. BIND. GLOB.	114	* HIGH *	10-57	nmol/L
FREE TESTOSTERONE	13.05	* LOW *	30.00-150.00	pg/mL

-- Complete --

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Document Type	Date Scanned	Title	Source	Privacy Level
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Type	Staff	Date	Time	
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Results Comments
None

Results Review						
<table border="0"> <tr> <td>Reviewed Date: 09/11/2017</td> <td>Time: 11:01:59 AM (MT)</td> </tr> <tr> <td>Review Staff: Rogers, William</td> <td></td> </tr> <tr> <td>Inmate Notice:</td> <td></td> </tr> </table>	Reviewed Date: 09/11/2017	Time: 11:01:59 AM (MT)	Review Staff: Rogers, William		Inmate Notice:	
Reviewed Date: 09/11/2017	Time: 11:01:59 AM (MT)					
Review Staff: Rogers, William						
Inmate Notice:						
<table border="1"> <thead> <tr> <th>Review Notes</th> </tr> </thead> <tbody> <tr> <td> expected deviations d/t hormone therapy TimeStamp: 11 September 2017 11:03:23 (MT) --- User: William Rogers (ROGWI01) </td> </tr> </tbody> </table>	Review Notes	expected deviations d/t hormone therapy TimeStamp: 11 September 2017 11:03:23 (MT) --- User: William Rogers (ROGWI01)				
Review Notes						
expected deviations d/t hormone therapy TimeStamp: 11 September 2017 11:03:23 (MT) --- User: William Rogers (ROGWI01)						

Status: Completed - Results Reviewed	As of Date*: 09/11/2017
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PANEL 1 (P1) - MAIN (1)		PANEL 1 (P1) - Lab Test Order		LUCR - 949V	
Ordered Date:	09/05/2017	Time:	07:34:00 AM (MT)		
Encounter Type:	Lab Test (Unsolicited)				
Location:	Idaho State Correctional Institution [ISCI]	Staff:	Rogers, William		
Ordering Practitioner*:					

Formulary Non-Formulary
 Lab Test Ordered*: CBC WITH DIFF [BR-0053-9]

Waigam HIE Code(s)

Priority*: Unknown
 Lab Schedule Date*:
 Fasting*: Unknown
 Recurring Frequency*: No Repeat
 Order Number:

Instructions

None

Specimen Instructions

Specimen Collected Date:	09/05/2017	Time:	07:34:00 AM (MT)
Staff:	Unknown		
Specimen Source:		Volume:	Unit:

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
HCT	39.5			39.3-52.5	Final Results	<input type="checkbox"/>
PLATELET COUNT	258			144-400	Final Results	<input type="checkbox"/>
WBC	4.88			3.66-11.99	Final Results	<input type="checkbox"/>
RBC	4.30			4.20-5.90	Final Results	<input type="checkbox"/>
HGB	13.5			12.3-17.0	Final Results	<input type="checkbox"/>
MCHC	34.2			29.0-35.0	Final Results	<input type="checkbox"/>
MCV	91.9			80.0-100.0	Final Results	<input type="checkbox"/>
MCH	31.4			25.0-34.1	Final Results	<input type="checkbox"/>
POLYS	47.0			36.0-78.0	Final Results	<input type="checkbox"/>
LYMPHS	38.1			12.0-48.0	Final Results	<input type="checkbox"/>
EOS	5.5			0.0-8.0	Final Results	<input type="checkbox"/>
BASOS	0.8			0.0-2.0	Final Results	<input type="checkbox"/>
MONOS	8.4			0.0-13.0	Final Results	<input type="checkbox"/>
RDW	12.2			10.9-16.9	Final Results	<input type="checkbox"/>
IMMATURE GRANULOCYTES	0.2			0.0-1.6	Final Results	<input type="checkbox"/>
POLYS, ABS. COUNT	2.29			1.43-6.80	Final Results	<input type="checkbox"/>
LYMPHS, ABS. COUNT	1.86			0.98-3.46	Final Results	<input type="checkbox"/>
EOS, ABS. COUNT	0.22			0.01-0.35	Final Results	<input type="checkbox"/>
BASOS, ABS. COUNT	0.04			0.00-0.07	Final Results	<input type="checkbox"/>
MONOS, ABS. COUNT	0.41			0.23-0.90	Final Results	<input type="checkbox"/>
MPV	8.8			8.2-11.9	Final Results	<input type="checkbox"/>

Lab Test Site:	Tested Off-Site	Vendor:	EOHL7
Results Received Date:	09/07/2017	Time:	02:15:23 PM (MT)
Test Results:	See Report		

BIOREFERENCE LABS

PAGE: 1

EJMO, MASON DEAN
IDOC#: 34691

SEX: M D/O/B: [REDACTED]

Unknown
COLLECTION DATE: 09/05/2017 06:34
RECEIVED DATE: 09/06/2017 00:44
INITIAL REPORT DATE: 09/07/2017 14:04
ACCESSION NO.: 971109953

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
CBC w/Diff, Platelet Ct.				
WBC	4.88		3.66-11.99	x10 ³ /uL
RBC	4.30		4.20-5.90	x10 ⁶ /uL
HGB	13.5		12.3-17.0	gm/dL
HCT	39.5		39.3-52.5	%
MCV	91.9		80.0-100.0	fL
MCH	31.4		25.0-34.1	pg
MCHC	34.2		29.0-35.0	gm/dL
RDW	12.2		10.9-16.9	%
POLYS	47.0		36.0-78.0	%
POLYS, ABS. COUNT	2.29		1.43-6.80	x10 ³ /uL
LYMPHS	38.1		12.0-48.0	%
LYMPHS, ABS. COUNT	1.86		0.98-3.46	x10 ³ /uL
MONOS	8.4		0.0-13.0	%
MONOS, ABS. COUNT	0.41		0.23-0.90	x10 ³ /uL
EOS	5.5		0.0-8.0	%
EOS, ABS. COUNT	0.27		0.01-0.35	x10 ³ /uL
BASOS	0.8		0.0-2.0	%
BASOS, ABS. COUNT	0.04		0.00-0.07	x10 ³ /uL
IMMATURE GRANULOCYTES	0.2		0.0-1.6	%
PLATELET COUNT	258		144-400	x10 ³ /uL
MPV	8.8		8.2-11.9	fL

--- Complete ---

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 09/08/2017 Time: 08:29:25 AM (MT)
Review Staff: Rogers, William

Inmate Notice:

Review Notes

TimeStamp: 8 September 2017 08:30:35 (MT) --- User: William Rogers (ROGWI01)

Status: Completed - Results Reviewed

As of Date*: 09/08/2017

HER0310 - Lab Test Order

Ordered Date: 09/05/2017 Time: 07:34:00 AM (MT)
 Encounter Type: Lab Test (Unsolicited)
 Location: Idaho State Correctional Institution [ISCI] Staff: Rogers, William
 Ordering Practitioner*:

Formulary Non-Formulary
 Lab Test Ordered*: COMP. METABOLIC (CMP) [BR-3427-2]

National NIE Code(s):

Priority*: Unknown
 Lab Schedule Date*:
 Fasting*: Unknown
 Recurring Frequency*: No Repeat
 Order Number:

Instructions

None

Specimen Instructions

Specimen Collected Date: 09/05/2017 Time: 07:34:00 AM (MT)
 Staff: Unknown
 Specimen Source: Volume: Unit:

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
Albumin	4.2			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	0.8			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	12			9-23	Final Results	<input type="checkbox"/>
Calcium	9.1			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	24			20-31	Final Results	<input type="checkbox"/>
Chloride	102			99-109	Final Results	<input type="checkbox"/>
Creatinine	0.74			0.70-1.30	Final Results	<input type="checkbox"/>
Potassium	4.0			3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	7.0			5.7-8.2	Final Results	<input type="checkbox"/>
AST	15			<34	Final Results	<input type="checkbox"/>
ALT	10			10-49	Final Results	<input type="checkbox"/>
Sodium	140			132-146	Final Results	<input type="checkbox"/>
Alk Phos	55			40-156	Final Results	<input type="checkbox"/>
A/G Ratio	1.5			1.1-2.9	Final Results	<input type="checkbox"/>
e-GFR	125			>or=60	Final Results	<input type="checkbox"/>
e-GFR, African American	145			>or=60	Final Results	<input type="checkbox"/>
UREA NITROGEN/CREATININE	16.2			10.0-28.0	Final Results	<input type="checkbox"/>
Globulin	2.8			1.7-3.7	Final Results	<input type="checkbox"/>
Glucose	91			70-99	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 09/07/2017 Time: 02:15:23 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON DEAN
IDOC#: 11111

SEX: M 07/08/17

Unknown
COLLECTION DATE: 09/05/2017 06:34
RECEIVED DATE: 09/06/2017 00:44
INITIAL REPORT DATE: 09/07/2017 14:01
ACCESSION NO.: 971109953

<==== DESCRIPTION <====>	<= RESULT <=>	<=OUT OF RANGE>	<= REF RANGE <=>	<= UNITS <=>
Comprehensive Metabolic Panel				
Total Protein	7.0		5.7-8.2	g/dL
Albumin	4.2		3.2-4.8	g/dL
Globulin	2.8		1.7-3.7	g/dL
A/G Ratio	1.5		1.1-2.9	
Sodium	140		132-146	mmol/L
Potassium	4.0		3.5-5.5	mmol/L
Chloride	107		99-109	mmol/L
CO2	24		20-31	mmol/L
BUN	12		9-23	mg/dL
Creatinine	0.74		0.70-1.30	mg/dL
e-GFR	125		>or=60	ml/min
e-GFR, African American	145		>or=60	ml/min
BUN/Creat Ratio	16.2		10.0-28.0	
Calcium	9.1		8.3-10.6	mg/dL
Bilirubin, Total	0.8		0.3-1.2	mg/dL
Alk Phos	55		40-156	U/L
AST	15		<34	U/L
ALT	10		10-49	U/L

NOTE: ALT results may vary (falsely depressed or elevated) in patients taking sulfasalazine (Azulfidine(TM)) or sulfapyridine medications (Seimens Medical Device correction CHC16-06A, 6/29/17).

Glucose	91		70-99	mg/dL
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-- Complete --

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
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Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 09/08/2017 Time: 08:29:44 AM (MT)
Review Staff: Rogers, William
Inmate Notice:

Review Notes

TimeStamp: 8 September 2017 08:30:55 (MT) --- User: William Rogers (ROGW101)

Status: Completed - Results Reviewed

As of Date*: 09/08/2017

Ordered Date: 10/23/2017 **Time:** 09:00:00 AM (MT)
Encounter Type: Nurse - PPD Administration
Location: Idaho State Correctional Institution [ISCI] **Staff:** Larsen, Kelly
Ordering Practitioner*:

Formulary Non-Formulary
Lab Test Ordered*: PPD [PPD]

National HIE Code(s)

Priority*: PPD(Adminster;Reslts-72h)
Lab Schedule Date*:
Fasting*: No
Recurring Frequency*:
Order Number:

Reason: Annual Test **Body Location:** Left Forearm
Manufacturer: PAR Pharmaceuticals **Solution:** Aplisol
Lot #: 806544
Test Location: Idaho State Correctional Institution [ISCI]
Measurement: 0 **Result Read:** 10/25/2017 **Time:** 04:51:34 PM (MT)
Result Read By: Larsen, Kelly **PPD Test Result:** Negative

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
No Rows Found						

Scanned Documents/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: **Time:**
Review Staff:
Inmate Notice:

Review Notes

None

Status: Completed **As of Date*:** 10/25/2017

48950318 - Lab Test Order

Name: EMMA, MASON D. IDOC#: 94691

Ordered Date: 12/19/2017 Time: 04:15:19 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Haggard, Rebekah

Formulary Non-Formulary
 Lab Test Ordered*: PROLACTIN, SERUM [BR-0134-7]

National HIE Code(s)

Priority*: Special (Draw-cmnts;Rsits-48h)
 Lab Schedule Date*: 12/21/2017
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 00275610008ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 12/20/2017 Time: 09:16:00 AM (MT)
 Staff: Savell, Julie
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100003

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
PROLACTIN, SERUM	23.7		Above High Normal	2.1-17.7	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 12/22/2017 Time: 02:15:23 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 94691

SEX: M D/O/B: XXXXXXXXXX

Savell, Julie
 COLLECTION DATE: 12/20/2017 08:16
 RECEIVED DATE: 12/21/2017 00:52
 INITIAL REPORT DATE: 12/22/2017 14:02
 ACCESSION NO.: 971241130

<=> DESCRIPTION <=> <=> RESULT <=> <=> OUT OF RANGE <=> <=> REF RANGE <=> <=> UNITS
 Prolactin, Serum
 PROLACTIN, SERUM 23.7 * HIGH * 2.1-17.7 ng/mL
 -- Complete --

Scanned Documents/Photos (1 - 1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	12/20/2017	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 12/22/2017

Time: 03:38:20 PM (MT)

Review Staff: Haggard, Rebekah

Inmate Notice:

Review Notes

For Dr Alviso
TimeStamp: 22 December 2017 15:37:40 (MT) -- User: Rebekah Haggard (HAGRE01)

Status: Completed - Results Reviewed

As of Date*: 12/22/2017

463559318 - Lab Test Order

Name: EDMO, MASON D. IDOC#: 94691

Ordered Date: 12/19/2017 Time: 04:15:19 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Haggard, Rebekah

Formulary Non-Formulary

Lab Test Ordered*: TESTOSTERONE, TOT.,S. [BR-0379-8]

National HIE Code(s)

Priority*: Special (Draw-cmnts;RsIts-48h)
 Lab Schedule Date*: 12/21/2017
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100010ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 12/20/2017 Time: 09:16:00 AM (MT)
 Staff: Savelli, Julie
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100003

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
TESTOSTERONE, TOT.,S.	107.3		Below Low Normal	249.0-836.0	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 12/22/2017 Time: 02:15:23 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 94691

Savelli, Julie PREX: M D/O/B: ██████████
 COLLECTION DATE: 12/20/2017 08:16
 RECEIVED DATE: 12/21/2017 00:52
 INITIAL REPORT DATE: 12/22/2017 14:02
 ACCESSION NO.: 971241130

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Testosterone, Serum				
TESTOSTERONE, TOT.,S.	107.3 * LOW *		249.0-836.0	ng/dL

NOTE: Patients receiving the drug Nandrolone cannot be tested for TESTOSTERONE, total using the EIA method (test code 0379-8) due to a strong interference from the drug. Clinicians are asked to request Testosterone, Total by LC/MS/MS (test code 0451-6) for these patients.
 -- Complete --

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
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Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	12/20/2017	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 12/22/2017 Time: 03:38:44 PM (MT)
Review Staff: Haggard, Rebekah
Inmate Notice:

Review Notes

For Dr Alviso
TimeStamp: 22 December 2017 15:37:40 (MT) --- User: Rebekah Haggard (HAGRE01)

Status: Completed - Results Reviewed As of Date*: 12/22/2017

HSS2017 - Lab Test Order

Ordered Date: 12/19/2017 Time: 04:15:19 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Haggard, Rebekah

Formulary Non-Formulary

Lab Test Ordered*: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC [BR-0855-7]

National NIE Code(s):

Priority*: Special (Draw-cmnts;Rsits-48h)
 Lab Schedule Date*: 12/21/2017
 Fasting*: Yes
 Recurring Frequency*: No Repeat
 Order Number: 002756100007ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 12/20/2017 Time: 09:16:00 AM (MT)
 Staff: Savell, Julie
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100003

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
HCT	40.6			39.3-52.5	Final Results	<input type="checkbox"/>
Albumin	4.3			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	0.6			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	8		Below Low Normal	9-23	Final Results	<input type="checkbox"/>
Calcium	9.3			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	10		Below Low Normal	20-31	Final Results	<input type="checkbox"/>
Chloride	108			99-109	Final Results	<input type="checkbox"/>
Cholesterol	138			<200	Final Results	<input type="checkbox"/>
HDL CHOL., DIRECT	49			>40	Final Results	<input type="checkbox"/>
Creatinine	0.89			0.70-1.30	Final Results	<input type="checkbox"/>
GGTP	19			<73	Final Results	<input type="checkbox"/>
Iron	130			65-175	Final Results	<input type="checkbox"/>
LD	153			120-246	Final Results	<input type="checkbox"/>
Phosphorus	3.6			2.4-5.1	Final Results	<input type="checkbox"/>
PLATELET COUNT	275			144-400	Final Results	<input type="checkbox"/>
Potassium	4.2			3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	7.1			5.7-8.2	Final Results	<input type="checkbox"/>
AST	84		Above High Normal	<34	Final Results	<input type="checkbox"/>
ALT	179		Above High Normal	10-49	Final Results	<input type="checkbox"/>
Sodium	144			132-146	Final Results	<input type="checkbox"/>
Triglycerides	70			<150	Final Results	<input type="checkbox"/>
Uric Acid	5.2			3.7-9.2	Final Results	<input type="checkbox"/>
Alk Phos	69			40-156	Final Results	<input type="checkbox"/>
LDLc/HDLc SerPI	1.53			<3.56	Final Results	<input type="checkbox"/>

CHOLESTEROL IN LDL	75		<100	Final Results	▢
A/G Ratio	1.5		1.1-2.9	Final Results	▢
e-GFR	115		>or=60	Final Results	▢
e-GFR, African American	133		>or=60	Final Results	▢
CHOLESTEROL TOTAL/CHOLESTEROL IN HDL	2.8		<7.4	Final Results	▢
UREA NITROGEN/CREATININE	9.0	Below Low Normal	10.0-28.0	Final Results	▢
WBC	4.32		3.66-11.99	Final Results	▢
RBC	4.42		4.20-5.90	Final Results	▢
HGB	13.9		12.3-17.0	Final Results	▢
MCHC	34.2		29.0-35.0	Final Results	▢
MCV	91.9		80.0-100.0	Final Results	▢
MCH	31.4		25.0-34.1	Final Results	▢
POLYS	39.4		36.0-78.0	Final Results	▢
LYMPHS	43.8		12.0-48.0	Final Results	▢
EOS	5.3		0.0-8.0	Final Results	▢
BASOS	0.9		0.0-2.0	Final Results	▢
MONOS	10.4		0.0-13.0	Final Results	▢
RDW	12.2		10.9-16.9	Final Results	▢
Globulin	2.8		1.7-3.7	Final Results	▢
CHOLESTEROL IN HDL/CHOLESTEROL TOTAL	36		>14	Final Results	▢
Glucose	105	Above High Normal	70-99	Final Results	▢
IMMATURE GRANULOCYTES	0.2		0.0-1.6	Final Results	▢
POLYS, ABS. COUNT	1.70		1.43-6.80	Final Results	▢
LYMPHS, ABS. COUNT	1.89		0.98-3.46	Final Results	▢
EOS, ABS. COUNT	0.23		0.01-0.35	Final Results	▢
BASOS, ABS. COUNT	0.04		0.00-0.07	Final Results	▢
MONOS, ABS. COUNT	0.45		0.23-0.90	Final Results	▢
VLDL, CALCULATED	14		7-32	Final Results	▢
MPV	9.3		8.2-11.9	Final Results	▢

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 12/22/2017 Time: 02:15:23 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 2

ETMO, HASON
IDOC#: 94691

SEX: M P/O/R: [REDACTED]

Sawell, Julie
 COLLECTION DATE: 12/20/2017 08:16
 RECEIVED DATE: 12/21/2017 00:52
 INITIAL REPORT DATE: 12/22/2017 14:02
 ACCESSION NO.: 971241130

DESCRIPTION	RESULT	<-OUT OF RANGE->	REF RANGE	UNITS
CH24/HDL, CBC/D/PLT				
Total Protein	7.1		5.1-8.2	g/dL
Albumin	4.3		3.2-4.6	g/dL
Globulin	2.8		1.7-3.1	g/dL
A/G Ratio	1.5		1.1-2.9	
Glucose		105 * HIGH *	70-99	mg/dL
Sodium	144		132-146	mmol/L
Potassium	4.2		3.5-5.5	mmol/L
Chloride	108		99-109	mmol/L
CO2		10 * LOW *	20-31	mmol/L
BUN		9 * LOW *	9-23	mg/dL
Creatinine	0.89		0.70-1.30	mg/dL
e-GFR	115		>or=60	mL/min
e-GFR, African American	133		>or=60	mL/min
BUN/Creat Ratio		9.0 * LOW *	10.0-28.0	
Calcium	9.3		8.3-10.6	mg/dL
Uric Acid	5.0		3.1-9.0	mg/dL
Iron	130		65-175	ug/dL
Bilirubin, Total	0.6		0.3-1.2	mg/dL
LD	350		120-240	U/L

Alk Phos	89		40-156	U/L
AST		81 * HIGH *	<34	U/L
Phosphorus	3.6		2.4-5.1	mg/dL
ALT		175 * HIGH *	10-49	U/L

NOTE: ALT results may vary (falsely depressed or elevated) in patients taking sulfasalazine (Azulfidine (TM)) or sulfapyridine medications (Siemens Medical Device correction CHC16-D6A, 6/29/17).

GGT	19		<73	U/L
Cholesterol	138		<200	mg/dL
Triglycerides	70		<150	mg/dL
HDL CHOL., DIRECT	49		>40	mg/dL
Chol/HDL Ratio	2.8		<7.4	

Evaluation: BELOW AVERAGE RISK

HDL % of Cholesterol	35		>18	
----------------------	----	--	-----	--

Evaluation: BELOW AVERAGE RISK

LDL/HDL Ratio	1.53		<3.56	
LDL Cholesterol	75		<100	mg/dL
VLDL, CALCULATED	14		7-32	mg/dL
WBC	4.32		3.66-11.99	x10 (3) /uL
RBC	4.42		4.20-5.90	x10 (6) /uL
HGB	13.9		12.3-17.0	gm/dL
HCT	40.8		39.3-52.5	%
MCV	91.9		80.0-100.0	fL
MCH	31.4		25.0-34.1	pg
MCHC	34.2		29.0-35.0	gm/dL
RDW	12.2		10.9-16.9	%
PDLYS	39.4		36.0-78.0	%
POLYS, ABS. COUNT	1.70		1.43-6.80	x10 (3) /uL
LYMPHS	43.8		12.0-48.0	%
LYMPHS, ABS. COUNT	1.89		0.98-3.46	x10 (3) /uL
MONOS	10.4		0.0-13.0	%
MONOS, ABS. COUNT	0.45		0.23-0.90	x10 (3) /uL
EOS	5.3		0.0-8.0	%
EOS, ABS. COUNT	0.23		0.01-0.35	x10 (3) /uL
BASOS	0.8		0.0-2.0	%
BASOS, ABS. COUNT	0.04		0.00-0.07	x10 (3) /uL
IMMATURE GRANULOCYTES	0.2		0.0-1.6	%
PLATELET COUNT	275		144-400	x10 (3) /uL
MPV	9.3		8.2-11.9	fL

-- Complete --

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	12/20/2017	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 12/22/2017 Time: 03:39:07 PM (MT)
 Review Staff: Haggard, Rebekah
 Inmate Notice:

Review Notes

For Dr Alviso
 TimeStamp: 22 December 2017 15:37:40 (MT) --- User: Rebekah Haggard (HAGRE01)

Status: Completed Results Reviewed

As of Date*: 12/22/2017

#10880318 - Lab Test Order

Ordered Date: 12/19/2017 Time: 04:15:19 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Haggard, Rebekah

Formulary @ Non-Formulary

Lab Test Ordered*: ESTRADIOL (E2), SERUM [BR-1258-5]

National IHE Code(s)

Priority*: Special (Draw-cmnts;Rsits-48h)
 Lab Schedule Date*: 12/21/2017
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100009ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 12/20/2017 Time: 09:16:00 AM (MT)
 Staff: Savell, Julie
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100003

Specimen Comments

None

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
ESTRADIOL (E2), SERUM	45.4			See Below	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 12/22/2017 Time: 02:15:23 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
 (DOC#: 34691)

SEX: M D/O/B: [REDACTED]

Savell, Julie
 COLLECTION DATE: 12/20/2017 08:16
 RECEIVED DATE: 12/21/2017 00:52
 INITIAL REPORT DATE: 12/22/2017 14:02
 ACCESSION NO.: 971241130

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Estradiol (E2), Serum				
ESTRADIOL (E2), SERUM	45.4		See Below	pg/mL

ESTRADIOL(E2) SERUM REFERENCE RANGES

MALES	E2		Estradiol (pg/mL)
	Tanner Stage	Mean Age (yrs)	
1	7.1		<5.0 - 15.9
2	12.1		<5.0 - 19.2
3	13.6		<5.0 - 31.7
4	15.1		<5.0 - 45.3
5	18		<5.0 - 36.0

Adult 10.0 - 40.0

FEMALES		
	Tanner Stage	Mean Age (yrs)
1	7.1	<5.0 - 20.0
2	10.5	10.0 - 24.0
3	11.6	7.0 - 60.0
4	12.3	21.0 - 85.0
5	14.5	34.0 - 170.0
Adult		
	Premenopausal	15.0 - 350.0
	Postmenopausal	<10.0

NOTE: Estradiol was developed and its performance characteristics were determined by BioReference Laboratories. It has not been cleared by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This lab has been approved by CLIA 88 and designated as a high complexity laboratory and is qualified to perform this test.

ASSAY INFORMATION: LC-MS/MS Methodology
-- Complete --

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	12/20/2017	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 12/22/2017 Time: 03:39:34 PM (MT)
Review Staff: Haggard, Rebekah
Inmate Notice:

Review Notes

For Dr Alviso
TimeStamp: 22 December 2017 15:37:40 (MT) — User: Rebekah Haggard (HAGRE01)

Status: Completed Results Reviewed

As of Date*: 12/22/2017

MED0318 - Lab Test Order

Name: EBRAJ, MAJIB D. IDOC# 94691
 Ordered Date: 01/04/2018 Time: 02:58:07 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Savell, Julie
 Ordering Practitioner*: Haggard, Rebekah

Formulary Non-Formulary
 Lab Test Ordered*: ESTRADIOL (E2), SERUM [BR-J258-5]

National HIE Code(s)

Priority*: Prior to Next Clinic
 Lab Schedule Date*: 02/02/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100012ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 01/29/2018 Time: 07:46:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100008

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
ESTRADIOL (E2), SERUM	82.7			See Below	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 01/31/2018 Time: 01:45:27 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 94691

Thurston, Galyna
 COLLECTION DATE: 01/29/2018 06:46
 RECEIVED DATE: 01/30/2018 00:16
 INITIAL REPORT DATE: 01/31/2018 13:41
 ACCESSION NO.: 971285885

SEX: M D/O/B: [REDACTED]

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Estradiol (E2), Serum				
ESTRADIOL (E2), SERUM	82.7		See Below	pg/mL

ESTRADIOL(E2) SERUM REFERENCE RANGES

MALES	E2		Estradiol (pg/mL)
	Tanner Stage	Mean Age (yrs)	
1	7.1		<5.0 - 15.9
2	12.1		<5.0 - 19.2
3	13.6		<5.0 - 31.7
4	15.1		<5.0 - 45.3
5	18		<5.0 - 36.6

Adult 10.0 - 40.0

FEMALES		
	Tanner Stage	Mean Age (yrs)
1	7.1	<5.0 - 20.0
2	10.5	10.0 - 24.0
3	11.6	7.0 - 60.0
4	12.3	21.0 - 85.0
5	14.5	34.0 - 170.0
Adult		
Premenopausal		15.0 - 350.0
Postmenopausal		<10.0

NOTE: Estradiol was developed and its performance characteristics were determined by BioReference Laboratories. It has not been cleared by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This lab has been approved by CLIA 88 and designated as a high complexity laboratory and is qualified to perform this test.

ASSAY INFORMATION: LC-MS/MS Methodology
== Complete ==

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	01/29/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 01/31/2018
Review Staff: Haggard, Rebekah
Inmate Notice:

Time: 02:02:21 PM (MT)

Review Notes

F/U CCC/Wellness Dr Alviso
TimeStamp: 31 January 2018 14:05:57 (MT) -- User: Rebekah Haggard (HAGRE01)

Status: Completed - Results Reviewed

As of Date*: 01/31/2018

H550218 - Lab Test Order

EDMO, MASON D. 0000044683

Ordered Date: 01/04/2018 Time: 02:58:07 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Savell, Julie
 Ordering Practitioner*: Haggard, Rebekah

Formulary Non-Formulary

Lab Test Ordered*: TESTOSTERONE, TOT.,S. [BR-0379-8]

National HIE Code(s):

Priority*: Prior to Next Clinic
 Lab Schedule Date*: 02/02/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100011ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 01/29/2018 Time: 07:46:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100008

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
TESTOSTERONE, TOT.,S.	80.5		Below Low Normal	249.0-836.0	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 01/31/2018 Time: 01:45:27 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 94691

SEX: M D/O/B: [REDACTED]

Thurston, Galyna
 COLLECTION DATE: 01/29/2018 06:46
 RECEIVED DATE: 01/30/2018 00:16
 INITIAL REPORT DATE: 01/31/2018 13:41
 ACCESSION NO.: 971285885

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Testosterone, Serum				
TESTOSTERONE, TOT.,S.	80.5 * LOW *		249.0-836.0	ng/dL

NOTE: Patients receiving the drug Nandrolone cannot be tested for TESTOSTERONE, total using the EIA method (test code 0379-8) due to a strong interference from the drug. Clinicians are asked to request Testosterone, Total by LC/MS/MS (test code J451-8) for these patients.
 -- Complete --

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
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Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	01/29/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms			
Type	Staff	Date	Time
No Rows Found			

Results Comments
None

Results Review	
Reviewed Date: 01/31/2018 Review Staff: Haggard, Rebekah Inmate Notice:	Time: 02:02:00 PM (MT)
Review Notes F/U Dr Alviso/Wellness and CCC TimeStamp: 31 January 2018 14:05:32 (MT) --- User: Rebekah Haggard (HAGRE01)	

Status: Completed Results Reviewed	As of Date*: 01/31/2018
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HRS50310 - Lab Test Order

Name: EDMO, AMEOM D. IDOC# 04691

Ordered Date: 01/08/2018 Time: 07:25:16 AM (MT)

Encounter Type: Nurse - Verbal/Telephone Orders

Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas

Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary

Lab Test Ordered*: COMP. METABOLIC (CMP) [BR-3427-2]

National HIE Code(s)

Priority*: Rout (Draw-10days;Rslts-48hrs)

Lab Schedule Date*: 01/12/2018

Fasting*: No

Recurring Frequency*: No Repeat

Order Number: 002756100013ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 01/12/2018 Time: 11:58:00 AM (MT)

Staff: Thurston, Galyna

Specimen Source: Blood (Venous) Volume: Unit:

Control Number: 002756100004

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
Albumin	3.9			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	1.1			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	12			9-23	Final Results	<input type="checkbox"/>
Calcium	9.3			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	29			20-31	Final Results	<input type="checkbox"/>
Chloride	103			99-109	Final Results	<input type="checkbox"/>
Creatinine	0.83			0.70-1.30	Final Results	<input type="checkbox"/>
Potassium	4.1			3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	6.9			5.7-8.2	Final Results	<input type="checkbox"/>
AST	742		Above High Normal	<34	Final Results	<input type="checkbox"/>
ALT	1782		Above High Normal	10-49	Final Results	<input type="checkbox"/>
Sodium	136			132-146	Final Results	<input type="checkbox"/>
Alk Phos	100			40-156	Final Results	<input type="checkbox"/>
A/G Ratio	1.3			1.1-2.9	Final Results	<input type="checkbox"/>
e-GFR	118			>or=60	Final Results	<input type="checkbox"/>
e-GFR, African American	137			>or=60	Final Results	<input type="checkbox"/>
UREA NITROGEN/CREATININE	14.5			10.0-28.0	Final Results	<input type="checkbox"/>
Globulin	3.0			1.7-3.7	Final Results	<input type="checkbox"/>
Glucose	128		Above High Normal	70-99	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7

Results Received Date: 01/13/2018 Time: 06:45:16 AM (MT)

Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 94691

SEX: M D/O/B: [REDACTED]

Thurston, Galyna
COLLECTION DATE: 01/12/2018 10:58
RECEIVED DATE: 01/13/2018 00:41
INITIAL REPORT DATE: 01/13/2018 06:37
ACCESSION NO.: 971265949

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Comprehensive Metabolic Panel				
Total Protein	6.9		5.7-8.2	g/dL
Albumin	3.9		3.2-4.8	g/dL
Globulin	3.0		1.7-3.7	g/dL
A/G Ratio	1.3		1.1-2.9	
Sodium	136		132-146	mmol/L
Potassium	4.1		3.5-5.5	mmol/L
Chloride	103		99-109	mmol/L
CO2	29		20-31	mmol/L
BUN	12		9-23	mg/dL
Creatinine	0.83		0.70-1.30	mg/dL
e-GFR	118		>or=60	ml/min
e-GFR, African American	137		>or=60	ml/min
BUN/Creat Ratio	14.5		10.0-28.0	
Calcium	9.3		8.3-10.5	mg/dL
Bilirubin, Total	1.1		0.3-1.2	mg/dL
Alk Phos	100		40-156	U/L
AST		742 * HIGH *	<34	U/L
ALT		1782 * HIGH *	10-49	U/L

NOTE: The result for ALT has been confirmed by repeat analysis.

NOTE: ALT results may vary (falsely depressed or elevated) in patients taking sulfasalazine (Azulfidine(TM)) or sulfapyridine medications (Siemens Medical Device correction CHC16-06A, 6/29/17).

Glucose 128 * HIGH * 70-99 mg/dL
-- Complete --

Scanned Documents/Photos (1 - 1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	01/12/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

Increase spironolactone to 200mg if electrolytes are normal

Results Review

Reviewed Date: 01/14/2018 Time: 01:13:25 PM (MT)
Review Staff: Eldredge, Summer
Inmate Notice:

Review Notes

Pt will be scheduled ASAP to review elevated LFT's

Status: Completed - Results Reviewed

As of Date*: 01/14/2018

Ordered Date: 01/16/2018 Time: 11:01:56 AM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary

Lab Test Ordered*: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC [BR-0855-7]

National HIE Code(s)

Priority*: Stat (Draw-Now; Results-4hrs)
 Lab Schedule Date*: 01/16/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100014ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 01/16/2018 Time: 11:45:00 AM (MT)
 Staff: Wise, Nicholas
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100005

Specimen Comments

None

Lab Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
No Rows Found						

Lab Test Site: Vendor:
 Results Received Date: Time:
 Test Results:
 Value:

Scanned Documents/Photos (1 - 1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	01/16/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: Time:
 Review Staff:
 Inmate Notice:

Review Notes

None

Status: Successfully Sent Electronically to Vendor As of Date*: 01/16/2018

HSS0316 - Lab Test Order

Ordered Date: 01/17/2018 Time: 02:35:50 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary

Lab Test Ordered*: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC [BR-0855-7]

National HIE Code(s)

Priority*: Stat (Draw-Now; Results-4hrs)
 Lab Schedule Date*: 01/22/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100015ME

Instructions

STAT AM draw please

Specimen Instructions

Specimen Collected Date: 01/18/2018 Time: 07:51:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100006

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
No Rows Found						

Lab Test Site: Tested Off-Site Vendor:
 Results Received Date: 01/22/2018 Time:
 Test Results: See Report
 Value: LFTs elev

Scanned Documents/Photos (1 - 2 of 2)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	01/18/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information
Lab / X-Ray / EKG	01/22/2018	2018_01_22 STAT LABS RESULTS	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 01/22/2018 Time: 04:43:42 PM (MT)
 Review Staff: Eldredge, Summer
 Inmate Notice:

Review Notes

reviewed

Status: Completed - Results Reviewed

As of Date*: 01/22/2018

ER 2672

FAXDR: A-

ST. ALPHONSUS REGIONAL MEDICAL CENTER
1055 NORTH CURTIS ROAD
BOISE, IDAHO 83706

NAME: EDMO, MASON D
LOC: MIL

DR: HAGGARD, REBEKAH, MD
1111 S ORCHARD ST SUITE 242
BOISE, ID 83705

PT#: 2239563 ACCT: 453655558022
AGE: 30Y SEX: M DOB: [REDACTED]
CURRENT DATE/TIME: 01/22/2018 18:59

PAGE: 1

M38209 COLL: 01/22/2018 UNKNOWN REC: 01/22/2018 13:38 PHYS: HAGGARD, REBEKAH, MD

HEMOGRAM WITH PLATELETS STAT

WBC	4.64	[4.60-12.40]	Th/cmm	{SA}
RBC	4.40	[3.92-5.72]	Mil/cmm	{SA}
HGB	13.7	[13.2-17.6]	g/dL	{SA}
HCT	41.8	[38.8-51.1]	%	{SA}
MCV	95	[81.1-99.9]	fL	{SA}
MCH	31.1	[25.1-34.6]	pg	{SA}
MCHC	32.8	[30.2-35.7]	g/dL	{SA}
RDW	12.6	[11.5-16.9]	%	{SA}
PLT	314	[132.3-423.7]	Th/cmm	{SA}
MPV	9.4	[8.7-12.7]	fL	{SA}
NRBC%	0.0	[0-0.2]		{SA}
NRBC	0.00	[0.-0.012]		{SA}

DIFFERENTIAL STAT

METHOD	AUTO DIFF			{SA}
NEUT, %	43.5	[41.2-79.0]	%	{SA}
LYMPH, %	41.6	[11.5-47.9]	%	{SA}
MONO, %	9.5	[3.9-12.4]	%	{SA}
EOS, %	4.3	[0.0-8.6]	%	{SA}
BASO, %	0.9	[0.2-1.4]	%	{SA}
IMMATURE GRANS, %	0.2	[0.0-0.4]	%	{SA}

IG is composed of promyelocytes, metamyelocytes, myelocytes.

NEUT, ABS	2.02	[1.61-11.05]	Th/cmm	{SA}
LYMPH, ABS	1.93	[0.80-3.98]	Th/cmm	{SA}
MONO, ABS	0.44	[0.32-1.04]	Th/cmm	{SA}
EOS, ABS	0.20	[0.02-0.55]	Th/cmm	{SA}
BASO, ABS	0.04	[0.01-0.09]	Th/cmm	{SA}
IMMATURE GRANS, ABS	0.01	[0.0-0.3]	Th/cmm	{SA}

An absolute IG result >0.1 Th/cmm is suggestive of a left shift.

An absolute IG result >0.5 Th/cmm is suggestive of infection.

COMPREHENSIVE METABOLIC PANEL STAT

SODIUM	L 133	[135-145]	mEq/L	{SA}
POTASSIUM	4.0	[3.5-5.0]	mEq/L	{SA}
CHLORIDE	104	[98-109]	mEq/L	{SA}
CO2	22	[22-31]	mEq/L	{SA}
GLUCOSE	H 100	[65-99]	mg/dL	{SA}
UREA NITROGEN (BUN)	10	[7-23]	mg/dL	{SA}
CREATININE	0.84	[0.6-1.4]	mg/dL	{SA}

INTERIM REPORT
CONTINUED

EDMO, MASON D

FAXDR: A-

ST. ALPHONSUS REGIONAL MEDICAL CENTER

NAME: EDMO, MASON D
PT#: 2239563
LOC: MIL

DR: HAGGARD, REBEKAH, MD
AGE: 30Y SEX: M

PAGE: 2

M38209 COLL: 01/22/2018 UNKNOWN REC: 01/22/2018 13:38 PHYS: HAGGARD, REBEKAH, MD

COMPREHENSIVE METABOLIC PANEL (CONTINUED)

GFR, ESTIMATED	>60	[>60]	mL/min/1.73m2	{SA}
CALCIUM	9.0	[8.5-10.5]	mg/dL	{SA}
TOTAL PROTEIN	L 5.9	[6.3-8.0]	g/dL	{
ALBUMIN	L 3.4	[3.5-5.0]	g/dL	
GLOBULIN	2.5	[2.0-4.0]	g/dL	{SA}
BILIRUBIN, TOTAL	0.8	[0.1-1.5]	mg/dL	{SA}

A metabolite of Naproxen has been shown to interfere with this method of measuring total bilirubin and patients who have taken Naproxen may show a spurious elevation in total bilirubin levels.

ALKALINE PHOSPHATASE	56	[38-110]	U/L	{SA}
AST (SGOT)	43	[10-45]	U/L	{SA}
ALT (SGPT)	H 310	[10-65]	U/L	{
ANION GAP	11	[6-16]	mEq/L	{SA}
COMMENT				{SA}

Reference ranges for estimated GFR:

Less than 60 mL/min/1.73m2 indicates chronic kidney disease if found over a 3 month period. Less than 15 mL/min/1.73m2 indicates kidney failure.

For African Americans, multiply the estimated GFR by 1.21.

The MDRD equation is most valid for patients with some degree of renal impairment. The MDRD equation is not valid for patients under 20 years of age.

Creatinine results have been standardized to be traceable to the IDMS method in response to the NKDEP initiative.

{SA} = Testing performed at SARMC, Boise, Idaho 83706

INTERIM REPORT
END OF REPORT

EDMO, MASON D

ER 2674

FAXDR: A-

ST. ALPHONSUS REGIONAL MEDICAL CENTER
1055 NORTH CURTIS ROAD
BOISE, IDAHO 83706

NAME: EDMO, MASON D
LOC : MIL

DR: HAGGARD, REBEKAH, MD
1111 S ORCHARD ST SUITE 242
BOISE, ID 83705

PT# : 2239563 ACCT: 453655558022
AGE : 30Y SEX: M DOB : ██████████
CURRENT DATE/TIME: 01/22/2018 15:28

PAGE: 1

M38209 COLL: 01/22/2018 UNKNOWN REC: 01/22/2018 13:38 PHYS: HAGGARD, REBEKAH, MD

HEMOGRAM WITH PLATELETS

			STAT
WBC	4.64	[4.60-12.40] Th/cmm	{SA}
RBC	4.40	[3.92-5.72] Mil/cmm	{SA}
HGB	13.7	[13.2-17.6] g/dL	{SA}
HCT	41.8	[38.8-51.1] %	{SA}
MCV	95	[81.1-99.9] fL	{SA}
MCH	31.1	[25.1-34.6] pg	{SA}
MCHC	32.8	[30.2-35.7] g/dL	{SA}
RDW	12.6	[11.5-16.9] %	{SA}
PLT	314	[132.3-423.7] Th/cmm	{SA}
MPV	9.4	[8.7-12.7] fL	{SA}
NRBC%	0.0	[0-0.2]	{SA}
NRBC	0.00	[0.-0.012]	{SA}

DIFFERENTIAL

METHOD		AUTO DIFF	STAT
NEUT, %	43.5	[41.2-79.0] %	{SA}
LYMPH, %	41.6	[11.5-47.9] %	{SA}
MONO, %	9.5	[3.9-12.4] %	{SA}
EOS, %	4.3	[0.0-8.6] %	{SA}
BASO, %	0.9	[0.2-1.4] %	{SA}
IMMATURE GRANS, %	0.2	[0.0-0.4] %	{SA}

IG is composed of promyelocytes, metamyelocytes, myelocytes.

NEUT, ABS	2.02	[1.61-11.05] Th/cmm	{SA}
LYMPH, ABS	1.93	[0.80-3.98] Th/cmm	{SA}
MONO, ABS	0.44	[0.32-1.04] Th/cmm	{SA}
EOS, ABS	0.20	[0.02-0.55] Th/cmm	{SA}
BASO, ABS	0.04	[0.01-0.09] Th/cmm	{SA}
IMMATURE GRANS, ABS	0.01	[0.0-0.3] Th/cmm	{SA}

An absolute IG result >0.1 Th/cmm is suggestive of a left shift.

An absolute IG result >0.5 Th/cmm is suggestive of infection.

COMPREHENSIVE METABOLIC PANEL

			STAT
SODIUM	L 133	[135-145] mEq/L	{SA}
POTASSIUM	4.0	[3.5-5.0] mEq/L	{SA}
CHLORIDE	104	[98-109] mEq/L	{SA}
CO2	22	[22-31] mEq/L	{SA}
GLUCOSE	H 100	[65-99] mg/dL	{SA}
UREA NITROGEN (BUN)	10	[7-23] mg/dL	{SA}
CREATININE	0.84	[0.6-1.4] mg/dL	{SA}

INTERIM REPORT
CONTINUED

EDMO, MASON D

FAXDR: A-

ST. ALPHONSUS REGIONAL MEDICAL CENTER

NAME: EDMO, MASON D
PT# : 2239563
LOC : MIL

DR: HAGGARD, REBEKAH, MD
AGE: 30Y SEX: M

PAGE: 2

M38209 COLL: 01/22/2018 UNKNOWN REC: 01/22/2018 13:38 PHYS: HAGGARD, REBEKAH, MD

COMPREHENSIVE METABOLIC PANEL		(CONTINUED)		
GFR, ESTIMATED	>60	[>60]	mL/min/1.73m2	{SA}
CALCIUM	9.0	[8.5-10.5]	mg/dL	{SA}
TOTAL PROTEIN	L 5.9	[6.3-8.0]	g/dL	{
ALBUMIN	L 3.4	[3.5-5.0]	g/dL	
GLOBULIN	2.5	[2.0-4.0]	g/dL	{SA}
BILIRUBIN, TOTAL	0.8	[0.1-1.5]	mg/dL	{SA}
A metabolite of Naproxen has been shown to interfere with this method of measuring total bilirubin and patients who have taken Naproxen may show a spurious elevation in total bilirubin levels.				
ALKALINE PHOSPHATASE	56	[38-110]	U/L	{SA}
AST (SGOT)	43	[10-45]	U/L	{SA}
ALT (SGPT)	H 310	[10-65]	U/L	{
ANION GAP	11	[6-16]	mEq/L	
COMMENT				{SA}

Reference ranges for estimated GFR:

Less than 60 mL/min/1.73m2 indicates chronic kidney disease if found over a 3 month period. Less than 15 mL/min/1.73m2 indicates kidney failure.

For African Americans, multiply the estimated GFR by 1.21.

The MDRD equation is most valid for patients with some degree of renal impairment. The MDRD equation is not valid for patients under 20 years of age.

Creatinine results have been standardized to be traceable to the IDMS method in response to the NKDEP initiative.

{SA} = Testing performed at SARMC, Boise, Idaho 83706

INTERIM REPORT
END OF REPORT

EDMO, MASON D

ER 2676

Ordered Date: 01/23/2018 **Time:** 10:51:43 AM (MT)
Encounter Type: Nurse - Verbal/Telephone Orders
Location: Idaho State Correctional Institution [ISCI] **Staff:** Wise, Nicholas
Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary
Lab Test Ordered*: COMP. METABOLIC (CMP) [BR-3427-2]
National HIE Code(s)

Priority*: Rout (Draw-10days;Rsits-48hrs)
Lab Schedule Date*: 01/29/2018
Fasting*: No
Recurring Frequency*: No Repeat
Order Number: 002756100016ME

Instructions
None

Specimen Instructions

Specimen Collected Date: 01/29/2018 **Time:** 07:46:00 AM (MT)
Staff: Thurston, Galyna
Specimen Source: Blood (Venous) **Volume:** **Unit:**
Control Number: 002756100007

Specimen Comments
None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
No Rows Found						

Lab Test Site: **Vendor:**
Results Received Date: **Time:**
Test Results:
Value:

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	01/29/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments
None

Results Review

Reviewed Date: **Time:**
Review Staff:
Inmate Notice:

Review Notes

None

Status: Successfully Sent Electronically to Vendor **As of Date*:** 01/23/2018

4580310 - Lab Test Order		
Name: SIMQ, MAREN D	TCID: 44451	
Ordered Date: 01/29/2018	Time: 07:46:00 AM (MT)	
Encounter Type: Lab Test (Unsolicted)		
Location: Idaho State Correctional Institution [ISCI]	Staff: Haggard, Rebekah	
Ordering Practitioner*:		

Formulary Non-Formulary
 Lab Test Ordered*: CBC WITH DIFF [BR-0053-9]

National HIE Code(s)

Priority*: Unknown
 Lab Schedule Date*:
 Fasting*: Unknown
 Recurring Frequency*:
 Order Number:

Instructions

None

Specimen Instructions

Specimen Collected Date: 01/29/2018 Time: 07:46:00 AM (MT)
 Staff: Unknown
 Specimen Source: Volume: Unit:

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
HCT	40.3			39.3-52.5	Final Results	<input type="checkbox"/>
PLATELET_COUNT	283			144-400	Final Results	<input type="checkbox"/>
WBC	6.99			3.66-11.99	Final Results	<input type="checkbox"/>
RBC	4.36			4.20-5.90	Final Results	<input type="checkbox"/>
HGB	13.7			12.3-17.0	Final Results	<input type="checkbox"/>
MCHC	34.0			29.0-35.0	Final Results	<input type="checkbox"/>
MCV	92.4			80.0-100.0	Final Results	<input type="checkbox"/>
MCH	31.4			25.0-34.1	Final Results	<input type="checkbox"/>
POLYS	41.0			36.0-78.0	Final Results	<input type="checkbox"/>
LYMPHS	40.3			12.0-48.0	Final Results	<input type="checkbox"/>
EOS	6.6			0.0-8.0	Final Results	<input type="checkbox"/>
BASQS	0.7			0.0-2.0	Final Results	<input type="checkbox"/>
MONOS	11.3			0.0-13.0	Final Results	<input type="checkbox"/>
RDW	12.8			10.9-16.9	Final Results	<input type="checkbox"/>
IMMATURE GRANULOCYTES	0.1			0.0-1.6	Final Results	<input type="checkbox"/>
POLYS_ABS_COUNT	2.86			1.43-6.80	Final Results	<input type="checkbox"/>
LYMPHS_ABS_COUNT	2.82			0.98-3.46	Final Results	<input type="checkbox"/>
EOS_ABS_COUNT	0.46		Above High Normal	0.01-0.35	Final Results	<input type="checkbox"/>
BASQS_ABS_COUNT	0.05			0.00-0.07	Final Results	<input type="checkbox"/>
MONOS_ABS_COUNT	0.79			0.23-0.90	Final Results	<input type="checkbox"/>
MPV	9.3			8.2-11.9	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 01/31/2018 Time: 01:45:27 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 94691

SEX: M D/O/B: [REDACTED]

Unknown
COLLECTION DATE: 01/29/2018 06:46
RECEIVED DATE: 01/30/2018 00:16
INITIAL REPORT DATE: 01/31/2018 13:41
ACCESSION NO.: 971285885

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
CBC w/Diff, Platelet Ct.				
WBC	6.99		3.86-11.99	x10(3)/uL
RBC	4.36		4.20-5.90	x10(6)/uL
HGB	13.7		12.3-17.0	gm/dL
HCT	40.3		39.3-52.5	%
MCV	92.4		80.0-100.0	fL
MCH	31.4		25.0-34.1	pg
MCHC	34.0		29.0-35.0	gm/dL
RDW	12.8		10.9-16.9	%
POLYS	41.0		36.0-78.0	%
POLYS, ABS. COUNT	2.86		1.43-6.80	x10(3)/uL
LYMPHS	40.3		12.0-48.0	%
LYMPHS, ABS. COUNT	2.82		0.98-3.46	x10(3)/uL
MONOS	11.3		0.0-13.0	%
MONOS, ABS. COUNT	0.79		0.23-0.90	x10(3)/uL
EOS	6.6		0.0-8.0	%
EOS, ABS. COUNT		0.46 * HIGH *	0.01-0.35	x10(3)/uL
BASOS	0.7		0.0-2.0	%
BASOS, ABS. COUNT	0.05		0.00-0.07	x10(3)/uL
IMMATURE GRANULOCYTES	0.1		0.0-1.6	%
PLATELET COUNT	283		144-400	x10(3)/uL
MPV	9.3		8.2-11.9	fL

-- Complete --

Scanned Documents

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 01/31/2018 Time: 02:01:11 PM (MT)
Review Staff: Haggard, Rebekah
Inmate Notice:

REVIEW NOTES

For Wellness /Dr Alviso
TimeStamp: 31 January 2018 14:04:49 (MT) --- User: Rebekah Haggard (HAGRE01)

Status: Completed Results Reviewed

As of Date*: 01/31/2018

HSD50218 - Lab Test Order

Name: COMO, MASON D. (DOB: 1988)

Ordered Date: 01/29/2018 Time: 07:46:00 AM (MT)
 Encounter Type: Lab Test (Unsolicited)
 Location: Idaho State Correctional Institution [ISCI] Staff: Haggard, Rebekah
 Ordering Practitioner*:

Formulary Non-Formulary

Lab Test Ordered*: **COMP. METABOLIC (CMP) [BR-3427-2]**

National NTE Code(s):

Priority*: Unknown
 Lab Schedule Date*:
 Fasting*: Unknown
 Recurring Frequency*:
 Order Number:

Instructions

None

Specimen Instructions

Specimen Collected Date: 01/29/2018 Time: 07:46:00 AM (MT)
 Staff: Unknown
 Specimen Source: Volume: Unit:

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
Albumin	4.2			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	0.7			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	7		Below Low Normal	9-23	Final Results	<input type="checkbox"/>
Calcium	8.9			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	26			20-31	Final Results	<input type="checkbox"/>
Chloride	105			99-109	Final Results	<input type="checkbox"/>
Creatinine	0.75			0.70-1.30	Final Results	<input type="checkbox"/>
Potassium	4.1			3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	6.6			5.7-8.2	Final Results	<input type="checkbox"/>
AST	41		Above High Normal	<34	Final Results	<input type="checkbox"/>
ALT	88		Above High Normal	10-49	Final Results	<input type="checkbox"/>
Sodium	141			132-146	Final Results	<input type="checkbox"/>
Alk Phos	78			40-156	Final Results	<input type="checkbox"/>
A/G Ratio	1.8			1.1-2.9	Final Results	<input type="checkbox"/>
e-GFR	123			>or=60	Final Results	<input type="checkbox"/>
e-GFR, African American	143			>or=60	Final Results	<input type="checkbox"/>
UREA NITROGEN/CREATININE	9.3		Below Low Normal	10.0-28.0	Final Results	<input type="checkbox"/>
Globulin	2.4			1.7-3.7	Final Results	<input type="checkbox"/>
Glucose	96			70-99	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 01/31/2018 Time: 01:45:27 PM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 84591

SEX: M D/O/B: [REDACTED]

Unknown
COLLECTION DATE: 01/29/2018 06:45
RECEIVED DATE: 01/30/2018 00:16
INITIAL REPORT DATE: 01/31/2018 13:41
ACCESSION NO.: 971285885

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Comprehensive Metabolic Panel				
Total Protein	6.6		5.7-8.2	g/dL
Albumin	4.2		3.2-4.8	g/dL
Globulin	2.4		1.7-3.7	g/dL
N/G Ratio	1.8		1.1-2.9	
Sodium	141		132-146	mmol/L
Potassium	4.1		3.5-5.5	mmol/L
Chloride	105		99-109	mmol/L
CO2	26		20-31	mmol/L
BUN		7 * LOW *	9-23	mg/dL
Creatinine	0.75		0.70-1.30	mg/dL
e-GFR	123		>or=60	mL/min
e-GFR, African American	143		>or=60	mL/min
BUN/Creat Ratio		9.3 * LOW *	10.0-28.0	
Calcium	8.9		8.3-10.6	mg/dL
Bilirubin, Total	0.7		0.3-1.2	mg/dL
Alk Phos	78		40-156	U/L
AST		41 * HIGH *	<34	U/L
ALT		88 * HIGH *	10-49	U/L

NOTE: ALT results may vary (falsely depressed or elevated) in patients taking sulfasalazine (Azulfidine(TM)) or sulfapyridine medications (Siemens Medical Device correction CHC16-06A, 6/29/17).

Glucose	96		70-99	mg/dL
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-- Complete --

Scan or Attachments/Photos

Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 01/31/2018
Review Staff: Haggard, Rebekah
Inmate Notice:

Time: 02:01:42 PM (MT)

Review Notes

F/U in CCC a/s
TimeStamp: 31 January 2018 14:05:11 (MT) --- User: Rebekah Haggard (HAGRE01)

Status: Completed - Results Reviewed

As of Date*: 01/31/2018

HSE00318 - Lab Test Order

Name: JHMO, MASON O. IDOC# 31691

Ordered Date: 02/06/2018 Time: 01:33:09 PM (MT)

Encounter Type: Nurse - Verbal/Telephone Orders

Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas

Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary

Lab Test Ordered*: ESTRADIOL [BR-0516-5]

National HIE Code(s):

Priority*: ASAP (Draw-24hrs;Results-48hrs)

Lab Schedule Date*: 02/07/2018

Fasting*: No

Recurring Frequency*: No Repeat

Order Number: 002756100017ME

Instructions

PLEASE OBTAIN 2/7/18 since system was down 2/6/18

Specimen Instructions

Specimen Collected Date: 02/07/2018 Time: 08:03:00 AM (MT)

Staff: Thurston, Galyna

Specimen Source: Blood (Venous) Volume: Unit:

Control Number: 002756100009

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
ESTRADIOL	221.63		Above High Normal	<39.81	Final Results	Γ

Lab Test Site: Tested Off-Site Vendor: EOHL7

Results Received Date: 02/08/2018 Time: 07:30:26 AM (MT)

Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC# 31691

SEX: M D/O/B: XXXXXXXXXX

Thurston, Galyna

COLLECTION DATE: 02/07/2018 07:03

RECEIVED DATE: 02/08/2018 00:22

INITIAL REPORT DATE: 02/08/2018 07:10

ACCESSION NO.: 971298620

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Estradiol, Serum				
ESTRADIOL	221.63 * HIGH *	<39.81		pg/mL

NOTE: The result for ESTRADIOL was confirmed by repeat analysis.

-- Complete --

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	02/07/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			
Results Comments			
None			
Results Review			
Reviewed Date: 02/08/2018		Time: 08:43:24 AM (MT)	
Review Staff: Eldredge, Summer		Inmate Notice:	
Review Notes			
Goal for Estradiol is 100-200, she is at 221.63 - these labs will be sent to Dr. Alviso for review			
Status: Completed - Results Reviewed		As of Date*: 02/08/2018	

#00000318 - Lab Test Order

Ordered Date: 02/12/2018 Time: 12:57:06 PM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary

Lab Test Ordered*: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC [BR-0855-7]

National HIE Code(s):

Priority*: ASAP (Draw-24hrs;Reslts-48hrs)
 Lab Schedule Date*: 02/13/2018
 Fasting*: Yes
 Recurring Frequency*: No Repeat
 Order Number: 002756100018ME

Instructions:

None

Specimen Instructions:

Specimen Collected Date: 02/14/2018 Time: 12:16:00 PM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100010

Specimen Comments:

None

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
HCT	42.2			39.3-52.5	Final Results	<input type="checkbox"/>
Albumin	4.0			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	0.7			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	7		Below Low Normal	9-23	Final Results	<input type="checkbox"/>
Calcium	8.8			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	27			20-31	Final Results	<input type="checkbox"/>
Chloride	108			99-109	Final Results	<input type="checkbox"/>
Cholesterol	149			<200	Final Results	<input type="checkbox"/>
HDL CHOL., DIRECT	55			>40	Final Results	<input type="checkbox"/>
Creatinine	0.69		Below Low Normal	0.70-1.30	Final Results	<input type="checkbox"/>
GGTP	71			<73	Final Results	<input type="checkbox"/>
Iron	149			65-175	Final Results	<input type="checkbox"/>
LD	214			120-246	Final Results	<input type="checkbox"/>
Phosphorus	3.2			2.4-5.1	Final Results	<input type="checkbox"/>
PLATELET COUNT	260			144-400	Final Results	<input type="checkbox"/>
Potassium	3.4		Below Low Normal	3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	6.6			5.7-8.2	Final Results	<input type="checkbox"/>
AST	156		Above High Normal	<34	Final Results	<input type="checkbox"/>
ALT	359		Above High Normal	10-49	Final Results	<input type="checkbox"/>
Sodium	142			132-146	Final Results	<input type="checkbox"/>
Triglycerides	81			<150	Final Results	<input type="checkbox"/>
Uric Acid	4.2			3.7-9.2	Final Results	<input type="checkbox"/>
Alk Phos	68			40-156	Final Results	<input type="checkbox"/>
LDLc/HDLc SerPI	1.42			<3.56	Final Results	<input type="checkbox"/>

CHOLESTEROL_IN_IDL	28	<100	Final Results	Γ
A/G Ratio	1.5	1.1-2.9	Final Results	Γ
e-GFR	127	>or=60	Final Results	Γ
e-GFR, African American	147	>or=60	Final Results	Γ
CHOLESTEROL_TOTAL/CHOLESTEROL_IN_HDL	2.7	<7.4	Final Results	Γ
UREA_NITROGEN/CREATININE	10.1	10.0-28.0	Final Results	Γ
WBC	4.38	3.66-11.99	Final Results	Γ
RBC	4.62	4.20-5.90	Final Results	Γ
HGB	14.1	12.3-17.0	Final Results	Γ
MCHC	33.4	29.0-35.0	Final Results	Γ
MCV	91.3	80.0-100.0	Final Results	Γ
MCH	30.5	25.0-34.1	Final Results	Γ
POLYS	37.5	36.0-78.0	Final Results	Γ
LYMPHS	41.3	12.0-48.0	Final Results	Γ
EOS	7.1	0.0-8.0	Final Results	Γ
BASOS	0.9	0.0-2.0	Final Results	Γ
MONOS	13.0	0.0-13.0	Final Results	Γ
RDW	12.7	10.9-16.9	Final Results	Γ
Globulin	2.6	1.7-3.7	Final Results	Γ
CHOLESTEROL_IN_HDL/CHOLESTEROL_TOTAL	37	>14	Final Results	Γ
Glucose	84	70-99	Final Results	Γ
IMMATURE GRANULOCYTES	0.2	0.0-1.6	Final Results	Γ
POLYS, ABS. COUNT	1.64	1.43-6.80	Final Results	Γ
LYMPHS, ABS. COUNT	1.81	0.98-3.46	Final Results	Γ
EOS, ABS. COUNT	0.31	0.01-0.35	Final Results	Γ
BASOS, ABS. COUNT	0.04	0.00-0.07	Final Results	Γ
MONOS, ABS. COUNT	0.57	0.23-0.90	Final Results	Γ
VLDL, CALCULATED	16	7-32	Final Results	Γ
MPV	9.4	8.2-11.9	Final Results	Γ

Lab Test Site: Tested Off-Site
 Results Received Date: 02/15/2018
 Test Results: See Report

Vendor: EOHL7
 Time: 05:46:01 AM (MT)

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
 IDOC#: 94691

SEX: M D/O/B: [REDACTED]

Thurston, Galyna
 COLLECTION DATE: 02/14/2018 11:16
 RECEIVED DATE: 02/15/2018 00:40
 INITIAL REPORT DATE: 02/15/2018 05:42
 ACCESSION NO.: 971308121

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
CH24/HDL, CBC/D/PLT				
Total Protein	6.6		5.7-8.2	g/dL
Albumin	4.0		3.2-4.8	g/dL
Globulin	2.6		1.7-3.7	g/dL
A/G Ratio	1.5		1.1-2.9	
Glucose	84		70-99	mg/dL
Sodium	142		132-146	mmol/L
Potassium		3.4 * LOW *	3.5-5.5	mmol/L
Chloride	108		99-109	mmol/L
CO2	27		20-31	mmol/L
BUN		7 * LOW *	9-23	mg/dL
Creatinine		0.69 * LOW *	0.70-1.30	mg/dL
e-GFR	127		>or=60	mL/min
e-GFR, African American	147		>or=60	mL/min
BUN/Creat Ratio	10.1		10.0-28.0	
Calcium	8.8		8.3-10.6	mg/dL
Uric Acid	4.2		3.7-9.2	mg/dL
Iron	149		65-175	ug/dL
Bilirubin, Total	0.7		0.3-1.2	mg/dL
LD	214		120-246	U/L

MR457318 - Lab Test Order

Ordered Date: 02/19/2018 Time: 07:47:01 AM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary
 Lab Test Ordered*: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC [BR-0855-7]

National PHE Code(s):
 Priority*: Special (Draw-cmnts;RsIts-48h)
 Lab Schedule Date*: 02/26/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100019ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 02/26/2018 Time: 07:52:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100011

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
HCT	39.4			39.3-52.5	Final Results	<input type="checkbox"/>
Albumin	3.8			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	0.7			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	9			9-23	Final Results	<input type="checkbox"/>
Calcium	8.5			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	26			20-31	Final Results	<input type="checkbox"/>
Chloride	108			99-109	Final Results	<input type="checkbox"/>
Cholesterol	143			<200	Final Results	<input type="checkbox"/>
HDL CHOL., DIRECT	49			>40	Final Results	<input type="checkbox"/>
Creatinine	0.76			0.70-1.30	Final Results	<input type="checkbox"/>
GGTP	66			<73	Final Results	<input type="checkbox"/>
Iron	173			65-175	Final Results	<input type="checkbox"/>
LD	163			120-246	Final Results	<input type="checkbox"/>
Phosphorus	3.2			2.4-5.1	Final Results	<input type="checkbox"/>
PLATELET COUNT	279			144-400	Final Results	<input type="checkbox"/>
Potassium	3.7			3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	6.4			5.7-8.2	Final Results	<input type="checkbox"/>
AST	70		Above High Normal	<34	Final Results	<input type="checkbox"/>
ALT	256		Above High Normal	10-49	Final Results	<input type="checkbox"/>
Sodium	140			132-146	Final Results	<input type="checkbox"/>
Triglycerides	107			<150	Final Results	<input type="checkbox"/>
Uric Acid	4.8			3.7-9.2	Final Results	<input type="checkbox"/>
Alk Phos	59			40-156	Final Results	<input type="checkbox"/>
LDLc/HDLc SerPI	1.49			<3.56	Final Results	<input type="checkbox"/>

CHOLESTEROL, IN LDL	73		<100	Final Results	Γ
A/G Ratio	1.5		1.1-2.9	Final Results	Γ
e-GFR	122		>or=60	Final Results	Γ
e-GFR, African American	141		>or=60	Final Results	Γ
CHOLESTEROL, TOTAL/CHOLESTEROL, IN HDL	2.9		<7.4	Final Results	Γ
UREA NITROGEN/CREATININE	11.8		10.0-28.0	Final Results	Γ
WBC	4.18		3.66-11.99	Final Results	Γ
RBC	4.30		4.20-5.90	Final Results	Γ
HGB	13.8		12.3-17.0	Final Results	Γ
MCHC	35.0		29.0-35.0	Final Results	Γ
MCV	91.6		80.0-100.0	Final Results	Γ
MCH	32.1		25.0-34.1	Final Results	Γ
POLYS	37.4		36.0-78.0	Final Results	Γ
LYMPHS	44.0		12.0-48.0	Final Results	Γ
EOS	9.6	Above High Normal	0.0-8.0	Final Results	Γ
BASOS	0.7		0.0-2.0	Final Results	Γ
MONOS	8.1		0.0-13.0	Final Results	Γ
RDW	12.8		10.9-16.9	Final Results	Γ
Globulin	2.6		1.7-3.7	Final Results	Γ
CHOLESTEROL, IN HDL/CHOLESTEROL, TOTAL	3.4		>14	Final Results	Γ
Glucose	129	Above High Normal	70-99	Final Results	Γ
IMMATURE GRANULOCYTES	0.2		0.0-1.6	Final Results	Γ
POLYS, ABS. COUNT	1.56		1.43-6.80	Final Results	Γ
LYMPHS, ABS. COUNT	1.84		0.98-3.46	Final Results	Γ
EOS, ABS. COUNT	0.40	Above High Normal	0.01-0.35	Final Results	Γ
BASOS, ABS. COUNT	0.03		0.00-0.07	Final Results	Γ
MONOS, ABS. COUNT	0.34		0.23-0.90	Final Results	Γ
VLDL, CALCULATED	21		7-32	Final Results	Γ
MPV	9.2		8.2-11.9	Final Results	Γ

Lab Test Site: Tested Off-Site
 Results Received Date: 02/27/2018
 Test Results: See Report

Vendor: EOHL7
 Time: 06:30:45 AM (MT)

BIOREFERENCE LABS

PAGE | 1

EDMO, MASON
 IDOC#: 94691

SEX: M DOB: [REDACTED]

Thurston, Gaylon
 COLLECTION DATE: 02/26/2018 06:52
 RECEIVED DATE: 02/27/2018 00:43
 INITIAL REPORT DATE: 02/27/2018 06:11
 ACCESSION NO.: 971322292

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
CH24/HDL, CBC/D/PLT				
Total Protein	6.4		5.7-8.2	g/dL
Albumin	3.8		3.2-4.8	g/dL
Globulin	2.6		1.7-3.1	g/dL
A/G Ratio	1.5		1.1-2.9	
Glucose		129 * HIGH *	70-99	mg/dL
Sodium	140		132-146	mmol/L
Potassium	3.7		3.5-5.3	mmol/L
Chloride	108		99-109	mmol/L
CO2	26		20-31	mmol/L
BUN	9		8-23	mg/dL
Creatinine	0.76		0.70-1.30	mg/dL
e-GFR	122		>or=60	mL/min
e-GFR, African American	141		>or=60	mL/min
BUN/Creat Ratio	11.8		10.0-28.0	
Calcium	8.5		8.3-10.6	mg/dL
Uric Acid	4.8		3.7-8.2	mg/dL
Iron	173		65-175	ug/dL
Bilirubin, Total	0.7		0.3-1.2	mg/dL
LD	163		120-246	U/L

BIOREFERENCE LABS

PAGE: 1

EDMO, MASON
IDOC#: 94691

SEX: M D/O/B: [REDACTED]

Thurston, Galyna
COLLECTION DATE: 03/06/2018 06:42
RECEIVED DATE: 03/07/2018 00:54
INITIAL REPORT DATE: 03/07/2018 15:01
ACCESSION NO.: 971333775

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Comprehensive Metabolic Panel				
Total Protein	6.9		5.7-8.2	g/dL
Albumin	4.1		3.2-4.8	g/dL
Globulin	2.8		1.7-3.7	g/dL
A/G Ratio	1.5		1.1-2.9	
Sodium	142		132-146	mmol/L
Potassium	3.9		3.5-5.5	mmol/L
Chloride	108		99-109	mmol/L
CO2	25		20-31	mmol/L
BUN	10		9-23	mg/dL
Creatinine	0.86		0.70-1.30	mg/dL
e-GFR	116		>or=60	ml/min
e-GFR, African American	134		>or=60	ml/min
BUN/Creat Ratio	11.6		10.0-28.0	
Calcium	9.1		8.3-10.6	mg/dL
Bilirubin, Total	0.8		0.3-1.2	mg/dL
Alk Phos	59		40-156	U/L
AST	21		<34	U/L
ALT	46		10-49	U/L

NOTE: ALT results may vary (falsely depressed or elevated) in patients taking sulfasalazine (Azulfidine(TM)) or sulfapyridine medications (Siemens Medical Device correction CHC16-06A, 6/29/17).

Glucose 103 * HIGH * 70-99 mg/dL
-- Complete --

Scanned Documents/Photos (1 - 1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	03/06/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 03/07/2018 Time: 05:28:31 PM (MT)
Review Staff: Eldredge, Summer
Inmate Notice:

Review Notes

reviewed

Status: Completed - Results Reviewed

As of Date*: 03/07/2018

HSD62318 - Lab Test Order						
Name: ELMQ, MALON D.			(DOC#: 2489)			
Ordered Date: 03/15/2018		Time: 09:43:25 AM (MT)				
Encounter Type: Nurse - Verbal/Telephone Orders						
Location: Idaho State Correctional Institution [ISCI]				Staff: Wise, Nicholas		
Ordering Practitioner*: Eldredge, Summer						
<input type="checkbox"/> Formulary <input checked="" type="checkbox"/> Non-Formulary Lab Test Ordered*: ESTRADIOL [BR-0516-5]						
National HIE Code(s)						
Priority*: Rout (Draw-10days;Rsits-48hrs)						
Lab Schedule Date*: 06/16/2018						
Fasting*: No						
Recurring Frequency*: No Repeat						
Order Number: 002756100021ME						
Instructions						
None						
Specimen Instructions						
Specimen Collected Date: _____ Time: _____ Staff: _____ Specimen Source: _____ Volume: _____ Unit: _____						
Specimen Comments						
None						
Lab Test Results						
Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
No Rows Found						
Lab Test Site: _____ Vendor: _____ Results Received Date: _____ Time: _____ Test Results: _____ Value: _____						
Scanned Documents/Photos						
Document Type	Date Scanned	Title	Source	Privacy Level		
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Standard Forms						
Type	Staff	Date	Time			
No Rows Found						
Results Comments						
None						
Results Review						
Reviewed Date: _____ Time: _____ Review Staff: _____ Inmate Notice: _____						
Review Notes						
None						
Status: Ordered			As of Date*: 03/15/2018			

HS827318 - Lab Test Order														
Name: EDHQ, MASON D.			IDOC# 91891											
Ordered Date: 03/15/2018			Time: 09:43:25 AM (MT)											
Encounter Type: Nurse - Verbal/Telephone Orders														
Location: Idaho State Correctional Institution [ISCI]			Staff: Wise, Nicholas											
Ordering Practitioner*: Eldredge, Summer														
<input checked="" type="radio"/> Formulary <input type="radio"/> Non-Formulary														
Lab Test Ordered*: COMP. METABOLIC (CMP) [BR-3427-2]														
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">National HIE Code(s)</div>														
Priority*: Rout (Draw-10days;RsIts-48hrs)														
Lab Schedule Date*: 06/16/2018														
Fasting*: No														
Recurring Frequency*: No Repeat														
Order Number: 002756100022ME														
Instructions														
None														
Specimen Instructions														
<table style="width:100%; border: none;"> <tr> <td style="width: 50%;">Specimen Collected Date:</td> <td style="width: 50%;">Time:</td> </tr> <tr> <td>Staff:</td> <td></td> </tr> <tr> <td>Specimen Source:</td> <td>Volume: Unit:</td> </tr> </table>							Specimen Collected Date:	Time:	Staff:		Specimen Source:	Volume: Unit:		
Specimen Collected Date:	Time:													
Staff:														
Specimen Source:	Volume: Unit:													
Specimen Comments														
None														
Lab Test Results														
Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze								
No Rows Found														
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Lab Test Site:	Vendor:													
Results Received Date:	Time:													
Test Results:														
Value:														
Scanned Documents/Photos														
Document Type	Date Scanned	Title	Source	Privacy Level										
No Rows Found														
Standard Forms														
Type	Staff	Date	Time											
No Rows Found														
Results Comments														
None														
Results Review														
<table style="width:100%; border: none;"> <tr> <td style="width: 50%;">Reviewed Date:</td> <td style="width: 50%;">Time:</td> </tr> <tr> <td>Review Staff:</td> <td></td> </tr> <tr> <td>Inmate Notice:</td> <td></td> </tr> </table>							Reviewed Date:	Time:	Review Staff:		Inmate Notice:			
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<table style="width:100%; border: none;"> <tr> <td style="width: 50%;">Status: Ordered</td> <td style="width: 50%;">As of Date*: 03/15/2018</td> </tr> </table>							Status: Ordered	As of Date*: 03/15/2018						
Status: Ordered	As of Date*: 03/15/2018													

M0202318 - Lab Test Order

Ordered Date: 02/28/2018 Time: 12:54:18 PM (MT)
 Encounter Type: Nurse Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary
 Lab Test Ordered*: COMP, METABOLIC (CMP) [BR-3427-2]

National HIE Code(s)

Priority*: Rout (Draw-10days;Rsults-48hrs)
 Lab Schedule Date*: 03/06/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100020ME

Instructions

None

Specimen Instructions

Specimen Collected Date: 03/06/2018 Time: 07:42:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100012

Specimen Comments

None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
Albumin	4.1			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	0.8			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	10			9-23	Final Results	<input type="checkbox"/>
Calcium	9.1			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	25			20-31	Final Results	<input type="checkbox"/>
Chloride	108			99-109	Final Results	<input type="checkbox"/>
Creatinine	0.86			0.70-1.30	Final Results	<input type="checkbox"/>
Potassium	3.9			3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	6.9			5.7-8.2	Final Results	<input type="checkbox"/>
AST	21			<34	Final Results	<input type="checkbox"/>
ALT	46			10-49	Final Results	<input type="checkbox"/>
Sodium	142			132-146	Final Results	<input type="checkbox"/>
Alk Phos	59			40-156	Final Results	<input type="checkbox"/>
A/G Ratio	1.5			1.1-2.9	Final Results	<input type="checkbox"/>
e-GFR	116			>or=60	Final Results	<input type="checkbox"/>
e-GFR, African American	134			>or=60	Final Results	<input type="checkbox"/>
UREA NITROGEN/CREATININE	11.6			10.0-28.0	Final Results	<input type="checkbox"/>
Globulin	2.8			1.7-3.7	Final Results	<input type="checkbox"/>
Glucose	103		Above High Normal	70-99	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 03/07/2018 Time: 03:30:33 PM (MT)
 Test Results: See Report

CHSS027J - Condensed Health Services Encounter	
Name: EDMO, MASON D.	IDOC#: 94691
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 05/18/2018 TIME: 11:26:15(MT) DURATION: minutes TYPE: MH - Psychiatrist - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.
O	NOTES: None
A	NOTES: None
P	DRUG PRESCRIPTION: VENLAFAXINE HCL XR CP24 150 Mg Cp24 VERBAL BY: Hutchison, Emily EFFECTIVE DT: 05/18/2018 RT: PO DOSE: 2 STRENGTH: 150 MG METHOD: Daily Dose FREQ: QAM FOR: 210 DAYS EXPIRATION DATE: 12/13/2018 REFILLS: 6 STATUS: Received from Pharmacy NOTES: None
E	NOTES: None
STAFF: Hutchison, Emily	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 05/18/2018 TIME: 11:06:17(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	H/S REQUEST RECEIVED: 05/04/2018 TYPE: Routine NOTES: Request Date: 05/04/2018 2018_5_04_HSR_1087504 MH Meds HSR was dated on 5/02/18 and it was received on 5/04/18. Inmate states on HSR that he wants to change MH med "Effexorxr" level from 450 mg to 300 mg. Scheduled for Psych Nurse TimeStamp: 4 May 2018 11:57:55 (MT) --- User: Dan Roe (ROEDA01)
Current symptoms: I'm doing "Alright," and mentions seeing a private consultant (Dr. Alviso- FMRI clinic who's treating her gender dysphoria/hormone tx) who brought up lowering Effexor dose given elevated LFTs (in Jan 2018, which resolved in Feb 2018, repeat labs ordered as well). Anxiety is worse than depressive symptoms. Describes a cycle of several day's long of having more energy then crashing for the next few days, and then repeating. When she's feeling more energy, she feels "On," with some racing thoughts, extra energy and she's more productive. She then "Crashes" for several days, with low mood, fatigue, and need for extra sleep. She cannot relate the above mood fluctuations to changes in her sleep, eating or work habits/behaviors; denies illicit drug use. Discussed at length medication options for her, since she believes the venlafaxine is helpful for her and yet doesn't want to harm her liver. Also discussed mood stabilizers for her description of cycling moods.	
O	NOTES: None
<input checked="" type="checkbox"/> Alert, Oriented x 3 <input checked="" type="checkbox"/> Calm/Cooperative <input checked="" type="checkbox"/> No Apparent Distress <input checked="" type="checkbox"/> Adequate Grooming/Hygiene Mood: <input checked="" type="checkbox"/> Euthymic <input type="checkbox"/> Labile <input type="checkbox"/> Dysphoric Affect: <input checked="" type="checkbox"/> Full <input type="checkbox"/> Restricted Suicidal Ideation: <input type="checkbox"/> N <input type="checkbox"/> Y Homicidal Ideation: <input type="checkbox"/> N <input type="checkbox"/> Y Speech: <input checked="" type="checkbox"/> Normal Rate/Rhythm Thought process: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable: Thought Content: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable Cognitive Functioning: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable:	
A	NOTES: None
Brief summary: 30 yo blo male who identifies as female, undergoing hormone treatment, who also has depression and anxiety. Based on her report today, she likely has cyclothymia with infrequent episodes of severe major depression. She acknowledges her cutting behaviors and gender dysphoria as contributing to her moods. Will honor her wishes to decrease venlafaxine, however her LFTs were not elevated at last test, thus it's unlikely that the SNRI is damaging her liver. Discussed tapering venlafaxine anyway, and then adding lithium to see if that helps stabilize her mood cycling, which she is in agreement with. Labs will be redrawn 6/16, thus with that data we can make a more informed decision regarding her liver functioning, as well as renal and thyroid.	
P	NOTES: Reduce dose of venlafaxine to 300 mg po daily; will then try to reduce further to 150 mg po given her concerns over liver function tests (after follow up in mid -July) IF her mood and anxiety are stable. Will likely start lithium in 1.5 months, after evaluating how she dose with reduced venlafaxine. She wants to read up on and think about lithium for a while, thus it's not being started today. RTC ~ mid-July MEDICATION DISCONTINUED VIA THIS ENCOUNTER- Medication Name: 'VENLAFAXINE HCL XR CP24', Order Number: 0183016, Authorized By: Hutchison, Emily. Timestamp: 05/18/2018 10:26:14
E	NOTES: med effects: indications and s/e of lithium treatment; w/d aspects of venlafaxine
STAFF: Hutchison, Emily	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 05/18/2018 TIME: 09:13:00(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Met with inmate Edmo in a private office in the Education Bldg for clinical contact per LDC. Edmo reported being "okay today." Edmo reported not liking the monastery at the weather today, but otherwise doing alright. Edmo reported work is going well and getting along okay in Edmo's housing unit. Edmo reported requesting a single cell and is waiting for it to be approved. Edmo stated that Edmo has been feeling a little more down and decided that Edmo may benefit from a Mood Mgmt group, which is why Edmo sent a concern form reporting a change of mind and requesting to be referred to that group. Edmo was informed that Edmo was added to the group recently and is on the call-out. Edmo reported intent to watch the call-out to attend group. We discussed the new workbooks recently provided in the GD process groups and Edmo was offered one; Edmo expressed interest in the workbook and inquired about returning to group again. Edmo expressed concern about not being able to get off work for the group and was provided with a signed note to inform Edmo's supervisor of the day/time.

of the group and to request that Edmo be able to attend. Edmo was provided a copy of the workbook and signed the workbook agreement (see attached). Edmo reported an additional stressor of working to have communication with Edmo's husband (married in December) approved due to Edmo's husband being housed at ISCC. Edmo reports staying in touch with Edmo's mother-in-law, but is looking forward to being able to communicate with Edmo's husband directly. Edmo denied additional MH concerns at this time and reported that most things are "the same."

O SCANNED DOCUMENT/PHOTO TYPE: Mental Health TITLE: 2018_05_18 MH Workbook Agreement
 NOTES: None

Person <input type="radio"/> Y <input type="radio"/> N	Place <input type="radio"/> Y <input type="radio"/> N	Time <input type="radio"/> Y <input type="radio"/> N
Situation <input type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good
Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:	Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene
<input checked="" type="checkbox"/> Guarded <input checked="" type="checkbox"/> Dysphoric	Speech: <input checked="" type="checkbox"/> Unremarkable	Thought Form: <input checked="" type="checkbox"/> Goal directed
<input checked="" type="checkbox"/> Logical	Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent

A NOTES: Edmo continues to be very guarded when we are meeting; however, it appears that Edmo may be cautiously willing to start sharing more slowly. Edmo would benefit from continuing to work on building Edmo's resilience as a transgender individual and working through the workbook provided, particularly in a group setting to continue to encourage/support pro-social skills.
 Provisional Diagnosis: N/A

P NOTES: Provided Transgender workbook. Signed agreement (see attached). Provided with note for work to attend GD process group. Emailed group facilitator to reenroll Edmo in the GD group. Follow-up per LOC. Edmo may access additional MH services via HSRs and open clinics as needed.

E NOTES:
 TimeStamp: 18 May 2018 10:03:15 (MT) — User: Krina Stewart (STEKR01)

STAFF: Stewart, Krina

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 05/14/2018 TIME: 17:12:59(MT) DURATION: minutes TYPE: Practitioner - Medication Renewal
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S H/S REQUEST RECEIVED: 05/02/2018 TYPE: Routine
 NOTES: Request Date: 05/02/2018
 HSR 1087506 need spironolactone renewed; dc'd was good until 1/29/19

O NOTES: None

A NOTES: None

P NOTES: MRD to patient: Spironolactone cannot be renewed due to history of elevated liver function tests - Dr. Alviso's current order is not to restart the Spironolactone

E NOTES: n/a
 STAFF: Eldredge, Summer

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 04/09/2018 TIME: 11:14:28(MT) DURATION: minutes TYPE: Practitioner - Medication Renewal
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.

O NOTES: None

A NOTES: None

P DRUG PRESCRIPTION: FINASTERIDE (UD) TABS 5 Mg Tabs VERBAL BY: Haggard, Rebekah
 EFFECTIVE DT: 04/09/2018 RT: PO DOSE: 1 STRENGTH: 5 Mg METHOD: Normal Dose
 FREQ: QD FOR: 90 DAYS EXPIRATION DATE: 07/07/2018 REFILLS: 1 STATUS: Received from Pharmacy
 DRUG COMMENTS: Why must this drug be used instead of one included on the formulary? Gender Dysphoria hormone regimen per Wellness Center specialist orders
 What formulary drugs have been tried? preferred agent Avodart not acceptable for this indication per Dr Alviso
 What was outcome? n/a

NOTES: None

E NOTES: None
 STAFF: Haggard, Rebekah

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 04/05/2018 TIME: 08:41:59(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S H/S REQUEST RECEIVED: 04/05/2018 TYPE: Routine
 H/S REQUEST RECEIVED: 04/05/2018 TYPE: Routine
 NOTES: Request Date: 04/05/2018
 HSR 1105103 spironolactone renewal; order made 1/30/18 1/29/19 but was discontinued?
 Dr. Alviso D/C per related lab values. No order to restart spironolactone at this time.
 Request Date: 04/05/2018
 HSR 1105104 Estradiol renewal; 1/4/18 - 4/3/18
 Being renewed today.

O NOTES: None

A NOTES: None

P DRUG PRESCRIPTION: ESTRADIOL TABS 2 Mg Tabs VERBAL BY: Eldredge, Summer
 EFFECTIVE DT: 04/05/2018 RT: PO DOSE: 2 STRENGTH: 2 Mg METHOD: Normal Dose

FREQ: BID FOR: 180 DAYS EXPIRATION DATE: 10/01/2018 REFILLS: 5 STATUS: Order Accepted at Pharmacy Vendor (SC)

DRUG PRESCRIPTION: FINASTERIDE (UD) TABS 5 Mg Tabs - VERBAL BY: Eldredge, Summer
EFFECTIVE DT: 04/05/2018 RT: PO DOSE: 1 STRENGTH: 5 Mg METHOD: Normal Dose
FREQ: QD FOR: 69 DAYS EXPIRATION DATE: 06/12/2018 REFILLS: 0 STATUS: Discontinued - Other
DRUG COMMENTS:

Corizon's preferred 5 Alpha-Reductase Inhibitor is dutasteride 0.5mg once daily. Serum DHT concentrations are reduced by 93 to 94 percent with 0.5 mg/day of dutasteride compared with around 70 percent with 5 mg/day of finasteride.

What if I do not agree with this decision? An appeal may be initiated by resubmitting the order, notating that this is an "Appeal Request" and providing additional clinical rationale/documentation to support the request. Please email IDNonForm@CorizonHealth.com with any questions or concerns.

Gender Dyphoric HRT previously approved

NOTES: None

E NOTES: admin only

STAFF: Wise, Nicholas

NURSE SIGNATURE:

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 04/04/2018 TIME: 07:35:04(MT) DURATION: minutes TYPE: Nurse - Medication Renewal
LOCATION: Idaho State Correctional Institution (ISCI) SETTING: Clinic

S NOTES: Estrace expired on 4-3-2018 Patient was seen on 3-8-2018 no notes were found about estrace being ordered or discontinued at that time.

TimeStamp: 4 April 2018 07:41:09 (MT) --- User: Penny Cleveland (CLEPE01)

O NOTES: None

A NOTES: None

P NOTES: None

E NOTES:

TimeStamp: 4 April 2018 07:41:29 (MT) --- User: Penny Cleveland (CLEPE01)

STAFF: Cleveland, Penny

NURSE SIGNATURE:

ER 2696

CHSS0277 - Condensed Health Services Encounter																	
Name: EDMO, MASON D.		IDOC#: 94691															
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 03/30/2018 TIME: 15:08:54(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic																	
S	NOTES: Met with inmate Edmo in a private office in the Education Bldg for clinical contact and to update Edmo's treatment plan. Edmo reported doing "good." Edmo reported working in CI now, which Edmo enjoys. Edmo reported doing okay in Edmo's current housing unit. Edmo reported specifically not wanting to move to ICIO; however, Edmo reported being okay with moving to ISCC if it happens. Edmo denied feeling strongly about moving to ISCC or remaining at ISCI, but is okay with either option. Edmo initially denied MH concerns aside from previously reported gender dysphoria related to Edmo's anatomy not matching Edmo's gender identity. I brought up Edmo's treatment plan and Edmo said to just keep it the same as it has been, nothing has changed. I challenged Edmo on whether the recent treatment plan is appropriate due to Edmo no longer engaging in MH treatment aside from MH medication (not attending call-outs with assigned clinician, no longer attending GD group, etc.). After discussing LOC and treatment plan options, Edmo said it doesn't matter what LOC because Edmo is still not engaging in those services. We discussed the option to sign a refusal for clinical services, including that services were recommended and being refused; Edmo expressed concern about how that would reflect on Edmo. Edmo questioned which services were being recommended that Edmo would be refusing. We discussed the previous recommendation to participate in a Mood Management group to help process and learn skills to manage/reduce depressive symptoms; I also feel that some coping skills learned in that group may also assist Edmo in managing gender dysphoria mood-related symptoms. Edmo appeared to consider attending, likely to prove the recommendation wrong. Discussed the importance of attitude and being open to the possibility that the group may be beneficial; Edmo denied believing it would be helpful and felt that there's no point in attending. I informed Edmo that I am not placing Edmo on the waitlist for the group at this time, but I do clinically believe that it would be helpful if Edmo chose to give it a chance. I informed Edmo that one of my concerns with reducing Edmo's level of care is that I feel that it is helpful for Edmo to have opportunities for clinical follow-up due to Edmo's reluctance to ask for help if needed. Edmo participated in updating Edmo's treatment plan, including being honest about what goals/interventions Edmo would realistically participate in. Edmo reported feeling intense hatred for Edmo's penis and believing that is the primary source of clinical distress for Edmo. Edmo reported trying to not self-castrate due to wanting to have gender reassignment surgery and having been told that the genitals must remain intact for that surgery to be successful. Edmo reported one of Edmo's recent coping skills to manage Edmo's desire to self-castrate has been cutting on other places on Edmo's body. Edmo reported not wanting to tell staff when this occurs due to expecting to be put on suicide watch and feeling punished for doing "what works." We discussed the dangers and possible risks of cutting behaviors. Edmo denied current SI/HI/SHB. We also discussed Edmo's distrust of clinical and security staff; Edmo reports not wanting to reach out to staff when having trouble because Edmo doesn't feel that staff will do anything helpful.																
O	NOTES: None																
	<table border="1"> <tr> <td>Person <input type="radio"/> Y <input type="radio"/> N</td> <td>Place <input type="radio"/> Y <input type="radio"/> N</td> <td>Time <input type="radio"/> Y <input type="radio"/> N</td> </tr> <tr> <td>Situation <input type="radio"/> Y <input type="radio"/> N</td> <td>Insight: <input type="radio"/> Poor <input checked="" type="radio"/> Fair <input type="radio"/> Good</td> <td>Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good</td> </tr> <tr> <td>Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:</td> <td>Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:</td> <td>Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene</td> </tr> <tr> <td><input checked="" type="checkbox"/> Guarded</td> <td>Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent</td> <td>Speech: <input checked="" type="checkbox"/> Unremarkable</td> </tr> <tr> <td>Thought Form: <input checked="" type="checkbox"/> Goal directed</td> <td>Thought Content: <input checked="" type="checkbox"/> No evident psychosis</td> <td>Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent</td> </tr> </table>		Person <input type="radio"/> Y <input type="radio"/> N	Place <input type="radio"/> Y <input type="radio"/> N	Time <input type="radio"/> Y <input type="radio"/> N	Situation <input type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input checked="" type="radio"/> Fair <input type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good	Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:	Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene	<input checked="" type="checkbox"/> Guarded	Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent	Speech: <input checked="" type="checkbox"/> Unremarkable	Thought Form: <input checked="" type="checkbox"/> Goal directed	Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent
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Thought Form: <input checked="" type="checkbox"/> Goal directed	Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent															
A	NOTES: Edmo appears to continue to struggle with gender dysphoria and depressed mood regularly. Edmo is unwilling to approach recommended treatment options with an open-mind. Although a Mood Mgmt MH group is clinically recommended to assist in treatment of Edmo's depressed and dysphoric mood symptoms, Edmo is likely to get very little benefit from attending with Edmo's current attitude. Edmo continues to be guarded and uncooperative during clinical contacts with me, but often opens up more throughout the contact as Edmo is challenged on thinking errors. Edmo appears able to manage Edmo's symptoms in general population at this time. Edmo would benefit from continued clinical follow-up. STANDARD FORM: MH Individualized Treatment Plan Provisional Diagnosis: N/A																
P	NOTES: Tx plan updated. Follow-up per LOC. Edmo can access additional MH services via HSRs and open clinics as needed.																
E	NOTES: TimeStamp: 30 March 2018 15:14:00 (MT) — User: Krina Stewart (STEKR01)																
	STAFF: Stewart, Krina																
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 03/17/2018 TIME: 15:54:45(MT) DURATION: minutes TYPE: MH - Clinician - DOR Recommendation LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic																	
S	NOTES: DOR Rec completed and uploaded to encounter																
O	SCANNED DOCUMENT/PHOTO TYPE: Mental Health TITLE: DOR Rec Edmo 94691 NOTES: DOR Rec Edmo 94691																
A	NOTES: DOR Rec Edmo 94691 STANDARD FORM: MH Individualized Treatment Plan																
P	NOTES: DOR Rec Edmo 94691																
E	NOTES: DOR Rec Edmo 94691 STAFF: Clemens, Erica																
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 03/15/2018 TIME: 09:43:25(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic																	
S	NOTES: Order updates per Alviso. check EST and TEST. in 3 months																
O	NOTES: None																
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan																
P	LAB TEST ORDERED: ESTRADIOL LAB TEST ORDERED: COMP. METABOLIC (CMP) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 06/16/2018 AT: 09:43:25(MT) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 06/16/2018 AT: 10:53:00(MT) NOTES: None																
E	NOTES: admin only																

STAFF: Wise, Nicholas NURSE SIGNATURE:		
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 03/14/2018 TIME: 18:30:52(MT) DURATION: minutes TYPE: MH - Clinician - DOR Recommendation LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S NOTES: TimeStamp: 14 March 2018 18:34:55 (MT) -- User: Bradley Raburn (RABBR01) Upload DOR Recommendation		
D SCANNED DOCUMENT/PHOTO TYPE: Mental Health TITLE: DOR Recommendation NOTES: N/A		
A NOTES: N/A STANDARD FORM: MH Individualized Treatment Plan		
P NOTES: N/A		
E NOTES: TimeStamp: 14 March 2018 18:35:18 (MT) -- User: Bradley Raburn (RABBR01)		
STAFF: Raburn, Bradley		
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 03/13/2018 TIME: 14:41:20(MT) DURATION: minutes TYPE: MH - Clinician - Assessment/Update LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S NOTES: Edmo was placed on the institutional call-out to complete clinical contact and an annual assessment update per LOC. Edmo did not show to the scheduled appointment. Edmo was confirmed on the institutional call out with no conflicts. Assessment update completed via records review. Failure to attend memo sent.		
Date of Initial MH Assessment: 04/26/2012 Current LOC: <input checked="" type="checkbox"/> CMHS-1 Reason for Update: <input type="checkbox"/> Change <input type="checkbox"/> Referral Update <input checked="" type="checkbox"/> Annual Review		
Change/Update due to legal situation or sentence: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Comment: FTRD: 07/03/2021 PED: 07/04/2014 Change/Update in Education: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Change/Update in Marital or Family Situation: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Change/Update in Current Medication: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Comment: Medication was recently increased Change/Update in Current Diagnosis: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
O SCANNED DOCUMENT/PHOTO TYPE: Mental Health TITLE: 2018_03_13 NS Memo NOTES: Unable to assess due to inmate not attending appointment; assessment update completed via records review		
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan		
Completed via records review: 30yo Inmate with diagnoses of MDD, GAD, Alcohol UD, and Gender Dysphoria. Edmo is currently prescribed MH medications and has follow-up with the psych provider. Edmo was last seen by the psych provider in Jan 2018 and was assessed as follows: "30 yo with depression, anxiety and GD undergoing hormone treatment with ongoing mood and anxiety symptoms. Has somewhat of a resigned affect about her stint in prison, just waiting it out." Venlafaxine was increased at that time. Edmo is not currently attend the Gender Dysphoria group, but has during the past year. Edmo has recently begun to no-show to clinical appointments more frequently. Edmo is current working at CI (hired as of 3/2/2018). Edmo appears to lack motivation to work on Edmo's mental health outside of medication management at this time. Edmo has been provided with multiple opportunities to engage in mental health treatment to work on anxiety, depression, and social skills and has refused to do so. Edmo remains focused on Edmo's gender dysphoria being the only mental health issues that need to be treated.		
P NOTES: None Remain CMHS-1 for continued clinical follow-up. Follow-up per LOC, Edmo can access additional MH services via HSR and open clinic as needed.		
E NOTES: TimeStamp: 13 March 2018 14:58:09 (MT) -- User: Krina Stewart (STEKR01)		
STAFF: Stewart, Krina		
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 03/08/2018 TIME: 14:32:00(MT) DURATION: minutes TYPE: Practitioner - Chronic Care-Follow-up LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S NOTES: Pt in for CDP f/u for GID. Pt reports that she is doing OK overall, she states that she is frustrated that we have not replaced the Spironolactone with another medication yet. Otherwise she denies any problems or concerns at this time		
1. GID _____ with medications? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A with diet? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A with exercise? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
O NOTES: A&O, NAD		
HEENT/neck: supple, no thymomeagly Heart: RRR, no MRG Lungs: CTAB with normal respiratory effort Extremities: no edema		
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan		
1. <input type="checkbox"/> G <input checked="" type="checkbox"/> F <input type="checkbox"/> C <input type="checkbox"/> P <input type="checkbox"/> NA <input type="checkbox"/> I <input checked="" type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> NA GID		
P NOTES: Reviewed that we will ensure her labs get to Dr. Alviso and plan to request further orders. LFT's greatly increased with Spironolactone, LFT's have returned to normal since discontinuing Spironolactone f/u with CDP in 90 days and with SC PRN - pt verbalized understanding of POC		
Reviewed Lab/Procedures/Reports with Patient: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA Indicated Treatment Plan changes discussed: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA		
E NOTES: see plan		
Education Provided: <input checked="" type="checkbox"/> Nutrition <input type="checkbox"/> Exercise <input checked="" type="checkbox"/> Test Results <input checked="" type="checkbox"/> Medication Management		

STAFF: Eldredge, Summer
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/28/2018 TIME: 18:52:05(MT) DURATION: minutes TYPE: Practitioner Review LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S NOTES: encounter created to ensure labs are forwarded to Dr. Alvizo
O NOTES: None
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P NOTES: None
E NOTES: n/a
STAFF: Eldredge, Summer
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/28/2018 TIME: 12:54:18(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S NOTES: continue weekly CMP until LFT are within normal values
O NOTES: None
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P LAB TEST ORDERED: COMP. METABOLIC (CMP) LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 03/06/2018 AT: 12:54:18(MT) NOTES: None
E NOTES: admin only
STAFF: Wise, Nicholas NURSE SIGNATURE:
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/28/2018 TIME: 08:12:28(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S NOTES: Edmo did not show to Edmo's scheduled appointment. Edmo was confirmed on the institutional call out with no conflicts.
O NOTES: None
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P NOTES: Edmo will be rescheduled on the call-out for clinical contact and to update MHA. Edmo can access MH services via HSRs and open clinics as needed.
E NOTES:
TimeStamp: 28 February 2018 08:17:12 (MT) — User: Krina Stewart (STEKR01)
STAFF: Stewart, Krina
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/23/2018 TIME: 13:18:26(MT) DURATION: minutes TYPE: Practitioner - Chronic Care-Follow-up LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S NOTES:
Pt in for CDP f/u for GID. Pt has been off the Spironolactone due to elevated LFT's, she reports that her moods have been more unstable since being off the Spironolactone, she would like this medication or another testosterone blocker started ASAP. Pt denies any other problems or concerns at this time
1. GID _____ with medications? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A _____ with diet? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A _____ with exercise? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A _____
O NOTES: A&O, NAD AST: 156 (2/14/18) 41 (1/29/18) 742 (1/12/18) ALT: 359 (2/14/18) 88 (1/29/18) 1782 (1/12/18) Pt was off Spironolactone from 1/17/18 - 1/29/18. Spironolactone was discontinued again on 2/19/18 due to elevated LFT's. Cholesterol: 149 (2/14/18) TG: 81 (2/14/18) HDL: 55 (2/14/18) LDL: 78 (2/14/18) HEENT/neck: supple, no thymomeagly _____ Heart: RRR, no MRG _____ Lungs: CTAB with normal respiratory effort _____ Abdomen: NT/ND, BT x 4, no organomeagly _____ Extremities: no edema _____
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan
1. <input type="checkbox"/> G <input checked="" type="checkbox"/> F <input type="checkbox"/> P <input type="checkbox"/> NA <input type="checkbox"/> I <input checked="" type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> NA GID
P DRUG PRESCRIPTION: VITAMIN B COMP W-C/FA TABS Tabs VERBAL BY: Eldredge, Summer EFFECTIVE DT: 02/23/2018 RT: PO DOSE: 1 STRENGTH: 1 METHOD: Normal Dose FREQ: D FOR: 365 DAYS EXPIRATION DATE: 02/22/2019 REFILLS: 11 STATUS: Received from Pharmacy DRUG COMMENTS: None APPT SCHEDULED: Practitioner - Chronic Care-Follow-up WITH: Eldredge, Summer ON: 03/08/2018 AT: 16:18:00(MT) NOTES: Spironolactone discontinued on 2/19/18 - CMP is ordered on 2/26/18. We will review further POC after those results are available. Pt is very eager to get back on a testosterone blocker due to mood instability since being off the Spironolactone. Pt will be scheduled for f/u in 7 days to review lab results and discuss POC going forward Pt verbalized understanding of POC
Reviewed Lab/Procedures/Reports with Patient: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA _____ Indicated Treatment Plan changes discussed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA _____
E NOTES:
see plan
Education Provided: <input checked="" type="checkbox"/> Nutrition _____ <input checked="" type="checkbox"/> Exercise <input checked="" type="checkbox"/> Test Results <input checked="" type="checkbox"/> Medication Management _____

STAFF: Eldredge, Summer	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/19/2018 TIME: 07:47:01(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S NOTES: PER DR. Alviso. 1) Stop Spironolactone now. 2) Redraw LFTS 2/26/18	
O NOTES: None	
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan	
P LAB TEST ORDERED: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 02/26/2018 AT: 07:47:01(MT) NOTES: None	
E NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/12/2018 TIME: 12:57:06(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S NOTES: GD clinic needed labs and updated orders per Dr. Alviso. 1) Estradiol to 2mg x2 tabs BID and make KOP. 2) CMP ASAP	
O NOTES: None	
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan	
P LAB TEST ORDERED: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 02/13/2018 AT: 12:57:06(MT) NOTES: None	
E NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/08/2018 TIME: 08:44:26(MT) DURATION: minutes TYPE: Practitioner - Review LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S NOTES: encounter created to ensure labs are sent to Dr. Alviso	
O NOTES: None	
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan	
P NOTES: None	
E NOTES: n/a STAFF: Eldredge, Summer	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 02/06/2018 TIME: 13:33:09(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S NOTES: Wellness center needs after med restart	
O NOTES: None	
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan	
P LAB TEST ORDERED: ESTRADIOL LAB INSTRUCTIONS: PLEASE OBTAIN 2/7/18 since system was down 2/6/18 APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 02/07/2018 AT: 13:33:09(MT) NOTES: None	
E NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/31/2018 TIME: 10:15:00(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S NOTES: Edmo did not show to Edmo's scheduled appointment. Edmo was confirmed on the institutional call out with no conflicts.	
O SCANNED DOCUMENT/PHOTO TYPE: Mental Health TITLE: 2018_01_31 NS Memo NOTES: None	
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan	
P NOTES: None	
E NOTES: TimeStamp: 31 January 2018 16:09:15 (MT) -- User: Krina Stewart (STEKR01)	
STAFF: Stewart, Krina	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/30/2018 TIME: 09:55:03(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S NOTES: VO for Wellness center. May restart spironolactone 25mg QD once LFTs are <100. As of 1/30/18 AST=41, ALT=88	
O NOTES: None	
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan	
P DRUG PRESCRIPTION: SPIRONOLACTONE (UD) TABS 25 Mg Tabs VERBAL BY: Eldredge, Summer EFFECTIVE DT: 01/30/2018 RT: PO DOSE: 1 STRENGTH: 25 Mg METHOD: Normal Dose FREQ: QD FOR: 365 DAYS EXPIRATION DATE: 01/29/2019 REFILLS: 11 STATUS: Discontinued - Other NOTES: None	

E	NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/29/2018 TIME: 10:17:00(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Inmate Edmo did not show to Edmo's scheduled appointment. Edmo was confirmed on the institutional call out and had a potential conflict with medical for labs (no end time was listed on the call-out for that appointment).
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: Edmo will be rescheduled on the call-out. Edmo can access MH services via HSRs and open clinics as needed.
E	NOTES: TimeStamp: 29 January 2018 13:02:34 (MT) --- User: Krina Stewart (STEKR01)
STAFF: Stewart, Krina	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/29/2018 TIME: 07:46:00(MT) DURATION: minutes TYPE: Lab Test (Unsolicited) LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: System Generated Encounter for Unsolicited Lab Test Order
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	LAB TEST ORDERED: CBC WITH DIFF LAB INSTRUCTIONS: None LAB TEST ORDERED: COMP: METABOLIC (CMP) LAB INSTRUCTIONS: None NOTES: None
E	NOTES: None
STAFF: Haggard, Rebekah	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/25/2018 TIME: 15:37:04(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: CC HRT med
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: FINASTERIDE (UD) TABS 5 Mg Tabs VERBAL BY: Haggard, Rebekah EFFECTIVE DT: 01/25/2018 RT: PO DOSE: 1 STRENGTH: 5 Mg METHOD: Normal Dose FREQ: QD FOR: 90 DAYS EXPIRATION DATE: 04/24/2018 REFILLS: 2 STATUS: Discontinued - Other NOTES: None
E	NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/23/2018 TIME: 10:51:43(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: updated Alviso orders. Continue to hold spronolactone until LFT <100
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	LAB TEST ORDERED: COMP: METABOLIC (CMP) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 01/29/2018 AT: 10:51:43(MT) NOTES: None
E	NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/23/2018 TIME: 09:22:00(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Edmo did not show to the scheduled appointment. Edmo was confirmed on the institutional call out with no conflicts.
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan Provisional Diagnosis: N/A
P	NOTES: Edmo will be rescheduled on the call-out. Edmo can access MH services via HSRs and open clinics as needed.
E	NOTES: TimeStamp: 23 January 2018 09:58:03 (MT) --- User: Krina Stewart (STEKR01)
STAFF: Stewart, Krina	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/22/2018 TIME: 11:57:33(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders	

LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: wellness center LFT CMP recheck five days for spironolactone
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: None
STAFF: Wise, Nicholas NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/22/2018 TIME: 09:06:16(MT) DURATION: minutes TYPE: Nurse - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: FINASTERIDE SMG EXPIRES 2-6-18 CAN WE GET A NEW ORDER? TimeStamp: 22 January 2018 09:11:12 (MT) --- User: Sheila Harrod (HARSH01)
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: TimeStamp: 22 January 2018 09:11:28 (MT) --- User: Sheila Harrod (HARSH01)
STAFF: Harrod, Sheila NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/21/2018 TIME: 08:51:56(MT) DURATION: minutes TYPE: Nurse - Chart Review LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Please review Effexor order, max daily dose is 375mg, prescribed 450mg.
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: TimeStamp: 21 January 2018 08:56:36 (MT) --- User: Alexis Peters (PETAL01)
STAFF: Peters, Alexis NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/17/2018 TIME: 14:35:50(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: VO per Alviso/Eldredge. Stop Spironolactone for 5 days. Repeat state CMP to eval LFTs. Send Alviso labs, If normal then restart same dose 1/23/18. If not get new orders from Alviso
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	LAB TEST ORDERED: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC LAB INSTRUCTIONS: STAT AM draw please APPT SCHEDULED: Nurse - Chart Note WITH: Wise, Nicholas ON: 01/22/2018 AT: 07:40:00(MT) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 01/22/2018 AT: 14:35:50(MT) NOTES: None
E	NOTES: TimeStamp: 17 January 2018 14:43:31 (MT) --- User: Nicholas Wise (WISN101)
STAFF: Wise, Nicholas NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/16/2018 TIME: 11:01:56(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: VO for stat CMP repeat and send to Wellness Center and wait for new orders based on results
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	LAB TEST ORDERED: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 01/16/2018 AT: 08:00:00(MT) NOTES: None
E	NOTES: None
STAFF: Wise, Nicholas NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/14/2018 TIME: 13:13:47(MT) DURATION: minutes TYPE: Practitioner - Review LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: encounter created to request an appointment to review lab results
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: n/a

STAFF: Eldredge, Summer	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/08/2018 TIME: 07:25:16(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	H/S REQUEST RECEIVED: 01/05/2018 TYPE: Routine NOTES: Request Date: 01/05/2018 HSR 1066298 DR ALVISO CHANGED MEDS- HAVE THEY BEEN UPDATED? New med entered late 1-4 and On 1-8 TimeStamp: 8 January 2018 07:29:05 (MT) — User: Nicholas Wise (WISNI01)
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: MEDROXYPROGESTERONE TABS 10 Mg Tabs VERBAL BY: Eldredge, Summer EFFECTIVE DT: 01/08/2018 RT: PO DOSE: 1 STRENGTH: 10 Mg METHOD: Normal Dose FREQ: QD FOR: 365 DAYS EXPIRATION DATE: 01/07/2019 REFILLS: 11 STATUS: Received from Pharmacy DRUG COMMENTS: None LAB TEST ORDERED: COMP. METABOLIC (CMP) LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 01/12/2018 AT: 07:25:16(MT) NOTES: None
E	NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/08/2018 TIME: 01:06:23(MT) DURATION: minutes TYPE: Pharmacy Order (Unsolicited) LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: System Generated Encounter for Unsolicited Pharmacy Prescription Order
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: MEDROXYPROGESTERONE TABS 5 Mg Tabs VERBAL BY: Unknown EFFECTIVE DT: 01/08/2018 RT: UN DOSE: 1 STRENGTH: METHOD: Normal Dose FREQ: UAD FOR: 0 DAYS EXPIRATION DATE: 01/08/2018 REFILLS: 11 STATUS: Order Discontinued at Pharmacy Vendor (DR) NOTES: None
E	NOTES: None STAFF: Unknown
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/05/2018 TIME: 08:59:39(MT) DURATION: minutes TYPE: MH - Psychiatrist - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: VENLAFAXINE HCL XR CP24 150 Mg Cp24 VERBAL BY: Hutchison, Emily EFFECTIVE DT: 01/05/2018 RT: PO DOSE: 3 STRENGTH: 150 MG METHOD: Daily Dose FREQ: QAM FOR: 210 DAYS EXPIRATION DATE: 08/02/2018 REFILLS: 6 STATUS: Discontinued - Other NOTES: None
E	NOTES: None STAFF: Hutchison, Emily
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/05/2018 TIME: 08:55:18(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: 3 month follow up Current symptoms: Still has depression and anxiety. Manages by watching TV. Spends time passing her day, is not interested in classes. No side effects from venlafaxine, is interested now is increasing does as it originally was helpful and she's hopeful that increasing could help more with episodes of feeling low, down. In a rush today as she has medical/sick call soon.
O	NOTES: None <input checked="" type="checkbox"/> Alert, Oriented x 3 <input checked="" type="checkbox"/> Calm/Cooperative <input checked="" type="checkbox"/> No Apparent Distress <input checked="" type="checkbox"/> Adequate Grooming/Hygiene Mood: <input checked="" type="radio"/> Euthymic <input type="radio"/> Labile <input type="radio"/> Dysphoric Affect: <input checked="" type="radio"/> Full <input type="radio"/> Restricted Suicidal Ideation: <input checked="" type="radio"/> N <input type="radio"/> Y Homicidal Ideation: <input checked="" type="radio"/> N <input type="radio"/> Y Speech: <input checked="" type="checkbox"/> Normal Rate/Rhythm Thought process: <input checked="" type="radio"/> Unremarkable <input type="radio"/> Remarkable: Thought Content: <input checked="" type="radio"/> Unremarkable <input type="radio"/> Remarkable:
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan Brief summary: 30 yo with depression, anxiety and GD undergoing hormone treatment with ongoing mood and anxiety symptoms. Has somewhat of a resigned affect about her stint in prison, just waiting it out.
P	NOTES: Will increase venlafaxine to 450 mg po qam. RTC 3 months MEDICATION DISCONTINUED VIA THIS ENCOUNTER- Medication Name: 'VENLAFAXINE HCL XR CP24', Order Number: 0159190, Authorized By: Hutchison, Emily. Timestamp: 01/05/2018 07:59:38
E	NOTES: -side effects, access to mh
STAFF: Hutchison, Emily	

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 01/04/2018 TIME: 14:58:07(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: orders from Dr Alviso's onsite apt
O	SCANNED DOCUMENT/PHOTO TYPE: Medical Records TITLE: 2018_1_2 Dr Alviso on site NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: ESTRADIOL TABS 2 Mg Tabs VERBAL BY: Haggard, Rebekah EFFECTIVE DT: 01/04/2018 RT: PO DOSE: 2 STRENGTH: 2 Mg METHOD: Normal Dose FREQ: BID FOR: 90 DAYS EXPIRATION DATE: 04/03/2018 REFILLS: 2 STATUS: Order Discontinued at Pharmacy Vendor (DR) LAB TEST ORDERED: TESTOSTERONE, TOT.,S. LAB INSTRUCTIONS: None LAB TEST ORDERED: ESTRADIOL (E2), SERUM LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Savell, Julie ON: 02/02/2018 AT: 14:58:07(MT) APPT SCHEDULED: Lab WITH: Savell, Julie ON: 02/02/2018 AT: 15:58:00(MT) APPT SCHEDULED: Nurse - Chart Review WITH: Generic, Nurse - ISCI CC ON: 02/05/2018 AT: 15:41:00(MT) NOTES: None
E	NOTES: TimeStamp: 4 January 2018 16:01:36 (MT) — User: Julie Savell (SAVJU01)
ADDENDUM: 01/05/2018 15:32:36 Savell, Julie awaiting clarification orders from Dr Alviso to complete rest of orders. STAFF: Savell, Julie NURSE SIGNATURE:	

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 12/27/2017 TIME: 10:17:00(MT) DURATION: minutes TYPE: Nurse - Sick Call - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	H/S REQUEST RECEIVED: 12/27/2017 TYPE: Routine NOTES: Request Date: 12/27/2017 HSR 1057443 COUGHING A LOT: POSSIBLE ASTHMA
Chief Complaint: Wheezing: noticed when exercising or in the cold weather Onset Date: Couple weeks <input checked="" type="checkbox"/> Nasal congestion Precipitating Factors: <input checked="" type="checkbox"/> Exercise	
O	CURR: 09:17:00 TEMP: 97.1 PULSE: 90 RP: 16 BP: 115/80 HT: 5 ft, 7 in. WT: 189 lb BLOOD SUGAR: NA WksGest: 0 LMP: 01/01/1000 EDD(Initial): 01/01/1000 EDD(Final): 01/01/1000 HT(Fundal): 0 WT(Cml): 0 FHR: 0 PRES: PROTEIN: GLUCOSE: NITRITES: LEUC: FETAL MOVEMENT: O2 SAT: 99.00% SOURCE: Room Air NOTES: None
Chronic care clinic: <input checked="" type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> N What Clinic(s): GD Eyes: <input checked="" type="checkbox"/> Normal Nose: <input checked="" type="checkbox"/> Normal Describe: CONGESTION Supple: <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> N Respiratory: <input checked="" type="checkbox"/> Normal R Lung <input checked="" type="checkbox"/> Clear L Lung <input checked="" type="checkbox"/> Clear Skin: <input checked="" type="checkbox"/> Warm <input checked="" type="checkbox"/> Dry	
A	NOTES: PATIENT COMPLAINED OF WHEEZING- NOTICES IT WHEN EXERCISING OR IN THE COLD WEATHER. STATES IT HAS BECOME MORE FREQUENT IN THE PAST COUPLE OF WEEKS. PATIENT STATES HAVING ASTHMA AS A CHILD- BELIEVES ASTHMA COULD BE A CURRENT FACTOR. LUNGS CLEAR TO AUSCULTATION, BILATERALLY. PATIENT IS CONGESTED BUT DENIES SORE THROAT, WATERY EYES. STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None List: Chlortrimeton, Acetaminophen, Ibuprofen, or Saline nasal spray <input checked="" type="checkbox"/> KOP Comments: TAB TUSSIN KOP GIVEN TO PATIENT. PATIENT EDUCATED ON HOW TO APPROPRIATELY USE IT.
E	NOTES: CONTACT MEDICAL STAFF IF SYMPTOMS WORSEN OR DO NOT RESOLVE. WATCH THE CALLOUT. TAKE MEDS AS DIRECTED. <input checked="" type="checkbox"/> Patient educated to contact medical if symptoms develop or worsen <input checked="" type="checkbox"/> Education given <input checked="" type="checkbox"/> Verbal education given <input checked="" type="checkbox"/> The patient demonstrates an understanding of self-care, symptoms to report and when to return for STAFF: Young, Danielle NURSE SIGNATURE:

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 12/19/2017 TIME: 16:15:19(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Prep for Alviso clinic
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	LAB TEST ORDERED: PROLACTIN, SERUM LAB INSTRUCTIONS: None LAB TEST ORDERED: TESTOSTERONE, TOT.,S. LAB INSTRUCTIONS: None LAB TEST ORDERED: CORIZON DIAGNOSTIC PANEL 3 CHEM 24, HDL,CBC LAB INSTRUCTIONS: None LAB TEST ORDERED: ESTRADIOL (E2), SERUM LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 12/21/2017 AT: 16:15:19(MT) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 12/21/2017 AT: 17:25:00(MT) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 12/21/2017 AT: 17:35:00(MT) APPT SCHEDULED: Lab WITH: Wise, Nicholas

ON: 12/21/2017 AT: 17:45:00(MT)
 NOTES: None
 E NOTES: admin only
 STAFF: Wise, Nicholas
 NURSE SIGNATURE:

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 12/12/2017 TIME: 08:13:00(MT) DURATION: minutes TYPE: MH - Clinician - Open Clinic
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: Inmate attended open clinic as inmate had been feeling "depressed and upset about the holidays I will not spend with my family". Inmate stated "my current coping skills are not really working and I cannot go to recreation". Inmate stated inmate wanted to see inmate's assigned clinician but "really just need a little help today to refocus". Inmate was given a handout for grounding and 3 Mandala's which inmate stated inmate would try until inmate was able to make contact with inmate's assigned clinician.

Medication compliant: Y N Side effects: N Y

D NOTES: Maintained appropriate eye contact

Person Y N Place Y N Time Y N
 Situation Y N Insight: Poor Fair Good Judgment: Poor Fair Good
 Sleep: Poor Fair Good Appetite: Poor Fair Good Abnormal movements: N Y
 Current Suicidal Ideation: N Y Appearance/Behavior: Adequate grooming & hygiene Calm & cooperative
 Mood/Affect: Stable affect/mood congruent Speech: Unremarkable Logical Coherent
 Thought Content: No evident psychosis Cognitive functioning: No gross cognitive deficits apparent

A NOTES: Inmate assessed as stable at this time. Inmate denied current MH concerns or SI/HI/SIB. Inmate stated symptoms of depression "come and go" with the holiday season.
 STANDARD FORM: MH Individualized Treatment Plan

Assessment: Stable Minimal improvement Moderate improvement Unchanged from last Provisional Diagnosis: None
 follow-up Other: Diagnosis: N Y

P NOTES:
 Inmate will receive clinical contact per LOC.
 Inmate may access MH staff via HSR or open clinic as needed.

Ongoing Patient Education about medications and illness: N Y Referrals entered into this encounter? N Y Next appointment entered into this encounter? N Y

E NOTES: Inmate may access MH staff via open clinic or HSR as needed.

STAFF: Maple, Heidi

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 12/04/2017 TIME: 14:01:28(MT) DURATION: minutes TYPE: MH - Clinician - DOR Recommendation
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: DOR Rec
 O SCANNED DOCUMENT/PHOTO TYPE: Medical Records TITLE: DOR REC
 NOTES: None
 A NOTES: None
 STANDARD FORM: MH Individualized Treatment Plan
 P NOTES: None
 E NOTES: DOR REC
 STAFF: Duty, Shane

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 11/29/2017 TIME: 10:39:57(MT) DURATION: minutes TYPE: Practitioner - Chronic Care-Follow-up
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: Pt in for CC f/u for GD. Pt reports that she is feeling well overall. She would like an increase in her estrogen medication. Otherwise no problems or concerns

1. GD with medications? Yes No N/A with diet? Yes No N/A
 with exercise? Yes No N/A

O NOTES: A&O, NAD

HEENT/neck: supple, no thyromegaly Heart: RRR, no MRG Lungs: CTAB with normal respiratory effort
 Abdomen: soft and nontender, BT x 4. Extremities: No edema GU/rectal: deferred

A NOTES: GID
 STANDARD FORM: MH Individualized Treatment Plan

1. G F P NA I S W NA GID

P APPT SCHEDULED: Practitioner - Chronic Care-Follow-up WITH: Eldredge, Summer
 ON: 02/23/2018 AT: 16:32:00(MT)
 NOTES: f/u with Dr. Alvist when he is on site in the next 3-5 weeks. No changes in POC at this time. Pt verbalized understanding of POC.

Reviewed Lab/Procedures/Reports with Patient: Yes No NA Indicated Treatment Plan changes discussed: Yes No NA

E NOTES: see plan

Education Provided: Nutrition Exercise Test Results Medication Management

STAFF: Eldredge, Summer

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 11/28/2017 TIME: 14:05:00(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: Met with Edmo per the request of Dr. Campbell to inform Edmo that Edmo would be receiving a memo that approves Edmo's hold to be pulled. Edmo expressed excitement over this stating Edmo was glad Edmo was going to be able to leave Edmo was "done with ISCI." I informed Edmo that I requested the hold to be removed today and received verification that it was pulled. I informed Edmo that I would not be moving Edmo anywhere and that Edmo could work with case management or the move coordinator to request a move. Edmo stated that Edmo was just tired of dealing with everything at ISCI and brought up that there was still a question about make-up. Edmo stated Edmo was "galled" on the makeup that Edmo was wearing and wanted to know the

<p>status of the new policy. I informed Edmo that the new GD policy was not finished. Edmo states being uncertain about whether or not Edmo can wear makeup. I informed Edmo that this was inaccurate as I have told Edmo many times myself that Edmo cannot wear makeup and Edmo has received DDRs over it. Edmo then stated a clinician stated that it was clinically recommended that Edmo wear makeup and even called unit 15 to verbalize the approval. I told Edmo I would look into this but if this was what was communicated, this was inaccurate as the current policy indicates this. Edmo states it is not clear in policy but we discussed "not dressing in a feminine manner" as part of the PREA policy. Edmo stated final interpretation was up to the warden. Again, I told Edmo I would look into the reports that a clinician approved this and make sure this is cleared up given this is not approved at this time. Edmo continued to express excitement moving over to ISCC. I asked Edmo if Edmo was still working on Edmo's own issues clinically and Edmo stated Edmo is fine but cannot really talk a lot about it given pending litigation.</p>		
Medication compliant: <input checked="" type="radio"/> Y <input type="radio"/> N:		
O NOTES: None		
Person <input checked="" type="radio"/> Y <input type="radio"/> N	Place <input checked="" type="radio"/> Y <input type="radio"/> N	Time <input checked="" type="radio"/> Y <input type="radio"/> N
Situation <input checked="" type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good
Abnormal movements: <input type="radio"/> N <input checked="" type="radio"/> Y:	Current Suicidal Ideation: <input type="radio"/> N <input checked="" type="radio"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene
Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent	Speech: <input checked="" type="checkbox"/> Unremarkable	<input checked="" type="checkbox"/> Logical
Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent	
A NOTES: Edmo appears stable at this time. It is unclear what was communicated to Edmo regarding makeup, but regardless. . . Edmo is well aware of the rules at ISCI and has received numerous C notes, write ups, warnings, etc. regarding Makeup so Edmo is aware. STANDARD FORM: MH Individualized Treatment Plan		
Assessment: <input checked="" type="radio"/> Stable <input type="radio"/> Minimal improvement <input type="radio"/> Moderate improvement <input type="radio"/> Unchanged from last follow-up <input type="radio"/> Other: Provisional Diagnosis: NA		
P NOTES: Edmo will continue to be followed by clinical staff congruent with LOC. I reached out to CS Nicodemus to inform her that Edmo's hold had been pulled and Edmo is likely to request a move to ISCC. Informed her that Edmo is diagnosed GD and on hormones but is currently living in GP with a male inmate and does not shower with the GD inmates.		
E NOTES: Edmo was educated on how to request a move and how to access services at other facilities.		
STAFF: Watson, Laura		
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 11/09/2017 TIME: 07:53:04(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S NOTES: cc med renewal		
O NOTES: None		
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan		
P DRUG PRESCRIPTION: FINASTERIDE (UD) TABS 5 Mg Tabs VERBAL BY: Haggard, Rebekah EFFECTIVE DT: 11/09/2017 RT: PO DOSE: 1 STRENGTH: 5 Mg METHOD: Normal Dose FREQ: QD FOR: 90 DAYS EXPIRATION DATE: 02/06/2018 REFILLS: 2 STATUS: Discontinued - Other		
NOTES: None		
E NOTES: TimeStamp: 9 November 2017 07:57:34 (MT) --- User: Nicholas Wise (WISNI01)		
STAFF: Wise, Nicholas NURSE SIGNATURE:		
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 11/03/2017 TIME: 08:08:00(MT) DURATION: minutes TYPE: MH - Clinician - Open Clinic LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S NOTES: TimeStamp: 3 November 2017 12:16:23 (MT) --- User: Bradley Raburn (RABBR01) Inmate was seen individually in a clinician's office in Education building at ISCI. Inmate Edmo was seen during Open Clinic to address current concerns/questions. Edmo requested that this clinician look to see if Edmo's MH hold was still in place. It was confirmed that it was. Edmo requested that this clinician contact Clinician Hahn regarding the MTC/ARC determination, and Edmo was directed to submit a concern form. Inmate Edmo also requested gender dysphoria handouts. This clinician was unaware of any such handouts and Edmo stated that Edmo believed Clinician Stewart had access to them. Edmo's request was emailed to Clinician Stewart.		
O SCANNED DOCUMENT/PHOTO TYPE: Mental Health TITLE: Open Clinic HSR NOTES: Eye contact was appropriate.		
Person <input checked="" type="radio"/> Y <input type="radio"/> N	Place <input checked="" type="radio"/> Y <input type="radio"/> N	Time <input checked="" type="radio"/> Y <input type="radio"/> N
Situation <input checked="" type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input checked="" type="radio"/> Fair <input type="radio"/> Good	Judgment: <input type="radio"/> Poor <input checked="" type="radio"/> Fair <input type="radio"/> Good
Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene	<input checked="" type="checkbox"/> Calm & cooperative	Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent
Speech: <input checked="" type="checkbox"/> Unremarkable	Thought Form: <input checked="" type="checkbox"/> Goal directed	Thought Content: <input checked="" type="checkbox"/> No evident psychosis
Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent		
A NOTES: Inmate Edmo presented with goal directed thought process in receiving answers and MH handouts. Edmo was provided minimal information, and Edmo's requests were forwarded appropriate. STANDARD FORM: MH Individualized Treatment Plan Provisional Diagnosis: See PMHA and/or psych note		
P NOTES: Inmate may contact MH through Open Clinic and/or HSR as needed.		
E NOTES: Inmate may contact MH through Open Clinic and/or HSR as needed.		
STAFF: Raburn, Bradley		

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 10/30/2017 TIME: 09:46:36(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: cc med renewal
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: SPIRONOLACTONE TABS 100 Mg Tabs VERBAL BY: Haggard, Rebekah EFFECTIVE DT: 10/30/2017 RT: PO DOSE: 1 STRENGTH: 100 Mg METHOD: Normal Dose FREQ: BID FOR: 365 DAYS EXPIRATION DATE: 10/29/2018 REFILLS: 11 STATUS: Discontinued - Other DRUG PRESCRIPTION: CALCIUM CARB 1250MG/VIT D TABS 1250 Mg Tabs VERBAL BY: Haggard, Rebekah EFFECTIVE DT: 10/30/2017 RT: PO DOSE: 1 STRENGTH: 1250 Mg METHOD: Normal Dose FREQ: QHS FOR: 365 DAYS EXPIRATION DATE: 10/29/2018 REFILLS: 11 STATUS: Received from Pharmacy DRUG COMMENTS: cc med renewal DRUG PRESCRIPTION: SPIRONOLACTONE TABS 50 Mg Tabs VERBAL BY: Haggard, Rebekah EFFECTIVE DT: 10/30/2017 RT: PO DOSE: 1 STRENGTH: 50 Mg METHOD: Normal Dose FREQ: BID FOR: 365 DAYS EXPIRATION DATE: 10/29/2018 REFILLS: 11 STATUS: Discontinued - Other NOTES: None
E	NOTES: TimeStamp: 30 October 2017 09:56:30 (MT) — User: Nicholas Wise (WISNI01)
STAFF: Wise, Nicholas NURSE SIGNATURE:	

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 10/30/2017 TIME: 08:24:48(MT) DURATION: minutes TYPE: Nurse Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: calcium carb expires on 11-25-17 TimeStamp: 30 October 2017 08:26:58 (MT) — User: Sheila Harrod (HARSH01)
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: TimeStamp: 30 October 2017 08:27:06 (MT) — User: Sheila Harrod (HARSH01)
STAFF: Harrod, Sheila NURSE SIGNATURE:	

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 10/24/2017 TIME: 11:31:46(MT) DURATION: minutes TYPE: Nurse - Immunizations LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: received flu shot on 10/24/17 TimeStamp: 6 November 2017 11:34:09 (MT) — User: Kelly Larsen (LARKE01)
O	SCANNED DOCUMENT/PHOTO TYPE: Refusals/Consent TITLE: 2017_10_24 Consent for flu shot NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	INDIVIDUAL IMMUNIZATIONS: Influenza Vaccine right deltoid NOTES: None
E	NOTES: TimeStamp: 6 November 2017 11:34:58 (MT) — User: Kelly Larsen (LARKE01)
STAFF: Larsen, Kelly NURSE SIGNATURE:	

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 10/23/2017 TIME: 09:00:00(MT) DURATION: minutes TYPE: Nurse - PPD Administration LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: None
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	LAB TEST ORDERED: PPD NOTES: None
E	NOTES: STAFF: Larsen, Kelly NURSE SIGNATURE:

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 10/20/2017 TIME: 11:33:31(MT) DURATION: minutes TYPE: Practitioner - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: VENLAFAXINE HCL XR CP24 150 Mg Cp24 VERBAL BY: Hutchison, Emily EFFECTIVE DT: 10/20/2017 RT: PO DOSE: 2 STRENGTH: 150 MG METHOD: Daily Dose FREQ: QAM FOR: 210 DAYS EXPIRATION DATE: 05/17/2018 REFILLS: 6 STATUS: Discontinued - Other NOTES: None
E	NOTES: STAFF: Hutchison, Emily

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 10/20/2017 TIME: 11:24:21(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic																				
S NOTES: TimeStamp: 20 October 2017 11:26:18 (MT) — User: Emily Hutchison (HUTEM02)																				
Current symptoms: "Same, nothing new." Mood is "Stable." Some anxiety, with apprehension, hypervigilance which she accepts as 'normal' given her surroundings. Effexor has helped, and she has concerns about tolerance. Says "I haven't reached that point yet," meaning that she is still finding some efficacy, especially for depression. Denies SI/HI																				
O NOTES: None																				
<input checked="" type="checkbox"/> Alert, Oriented x 3 <input checked="" type="checkbox"/> Calm/Cooperative <input checked="" type="checkbox"/> No Apparent Distress <input checked="" type="checkbox"/> Adequate Grooming/Hygiene Appearance/Behavior: Significant underbite Mood: <input checked="" type="checkbox"/> Euthymic <input type="checkbox"/> Labile <input type="checkbox"/> Dysphoric Suicidal Ideation: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y Homicidal Ideation: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y Speech: <input checked="" type="checkbox"/> Normal Rate/Rhythm Thought process: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable: Thought Content: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable: Cognitive Functioning: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable:																				
A NOTES: None STANDARD FORM: MH Individualized Treatment Plan																				
Brief summary: Doing well, with no major complaints other than ongoing gender dysphoria concerns and transition while in prison.																				
P NOTES: MEDICATION DISCONTINUED VIA THIS ENCOUNTER- Medication Name: 'VENLAFAXINE HCL XR CP24', Order Number: 0109419, Authorized By: Hutchison, Emily. Timestamp: 10/20/2017 10:33:29																				
E NOTES: Med s/e, complications with discontinuation																				
STAFF: Hutchison, Emily																				
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 10/04/2017 TIME: 09:42:57(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic																				
S NOTES: Met with inmate Edmo in my office in the Education Bldg for clinical contact and to review Edmo's treatment plan per LOC. Edmo was not in the foyer when called for, I found Edmo in the computer lab after checking the call-out for conflicting appointments. Edmo agreed to meet with me. Edmo was informed the decision to remove Edmo's facility hold is pending the ARC's approval, Edmo was informed the ARC will hopefully meet this week or next to review the recommendation. We reviewed Edmo's treatment plan, Edmo reported the problems have not changed. Edmo reported requesting information on Gender Reassignment Surgery from another clinician and was told that it would need to be treatment planned. Edmo's treatment plan was updated to include Edmo working with clinical staff on becoming more informed of GRS and the impacts it could have. Edmo reported some housing concerns in Edmo's current unit and reported another clinician was going to speak with the DW regarding Edmo's request to move to Unit 15 with another transgender inmate. Edmo inquired about the ability to borrow books on transgender from clinical staff. Edmo denied further mental health concerns at this time.																				
O NOTES: None																				
<table border="0"> <tr> <td>Person <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> <td>Place <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> <td>Time <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> </tr> <tr> <td>Situation <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> <td>Insight: <input type="checkbox"/> Poor <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good</td> <td>Judgment: <input type="checkbox"/> Poor <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good</td> </tr> <tr> <td>Abnormal movements: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y:</td> <td>Current Suicidal Ideation: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y:</td> <td>Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene</td> </tr> <tr> <td><input checked="" type="checkbox"/> Calm & cooperative</td> <td>Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent</td> <td>Speech: <input checked="" type="checkbox"/> Unremarkable</td> </tr> <tr> <td>Thought Form: <input checked="" type="checkbox"/> Goal directed</td> <td><input checked="" type="checkbox"/> Logical</td> <td>Thought Content: <input checked="" type="checkbox"/> No evident psychosis</td> </tr> <tr> <td>Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent</td> <td></td> <td></td> </tr> </table>			Person <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Place <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Time <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Situation <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Insight: <input type="checkbox"/> Poor <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good	Judgment: <input type="checkbox"/> Poor <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good	Abnormal movements: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y:	Current Suicidal Ideation: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene	<input checked="" type="checkbox"/> Calm & cooperative	Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent	Speech: <input checked="" type="checkbox"/> Unremarkable	Thought Form: <input checked="" type="checkbox"/> Goal directed	<input checked="" type="checkbox"/> Logical	Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent		
Person <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Place <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Time <input checked="" type="checkbox"/> Y <input type="checkbox"/> N																		
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Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent																				
A NOTES: Edmo appears to be maintaining Edmo's baseline level of functioning in GP at this time. STANDARD FORM: MH Individualized Treatment Plan																				
Provisional Diagnosis: N/A																				
P NOTES: Treatment plan updated. Follow-up per LOC. Edmo can access additional MH services via HSR and open clinics as needed. Will consult with Edmo's GD group facilitator regarding information on GRS and housing situation.																				
E NOTES: TimeStamp: 4 October 2017 09:52:32 (MT) — User: Krina Stewart (STEKR01)																				
STAFF: Stewart, Krina																				
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 09/30/2017 TIME: 13:16:39(MT) DURATION: minutes TYPE: Nurse - Sick Call - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic																				
S H/S REQUEST RECEIVED: 09/30/2017 TYPE: Routine NOTES: Request Date: 09/30/2017 HSR 1046882 RED STREAKS/SWELLING IN GROIN AREA																				
<table border="0"> <tr> <td>Chief Complaint: RED STREAKS/SWELLING IN GROIN AREA</td> <td>Onset Date: 3 DAYS AGO</td> <td>Have you had this problem before: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> </tr> <tr> <td>Describe: SAW POVAR, PA IN FEB 2017 FOR SAME ISSUE at worst 10</td> <td>Associated Factors: <input checked="" type="checkbox"/> Pain scale is now 8</td> <td></td> </tr> <tr> <td></td> <td>What makes it worse: <input checked="" type="checkbox"/> Redness</td> <td><input checked="" type="checkbox"/> Itching <input checked="" type="checkbox"/> Tenderness <input checked="" type="checkbox"/> Fever <input checked="" type="checkbox"/> Swelling <input checked="" type="checkbox"/> Athlete's foot</td> </tr> </table>			Chief Complaint: RED STREAKS/SWELLING IN GROIN AREA	Onset Date: 3 DAYS AGO	Have you had this problem before: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Describe: SAW POVAR, PA IN FEB 2017 FOR SAME ISSUE at worst 10	Associated Factors: <input checked="" type="checkbox"/> Pain scale is now 8			What makes it worse: <input checked="" type="checkbox"/> Redness	<input checked="" type="checkbox"/> Itching <input checked="" type="checkbox"/> Tenderness <input checked="" type="checkbox"/> Fever <input checked="" type="checkbox"/> Swelling <input checked="" type="checkbox"/> Athlete's foot									
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O CURR: 12:16:39 TEMP: 98.8 PULSE: 108 RP: 16 BP: 117/82 HT: 5 ft. 7 in. WT: 190 lb BLOOD SUGAR: NA WksGest: 0 LMP: 01/01/1000 EDD(Initial): 01/01/1000 EDD(Final): 01/01/1000 HT(Fundal): 0 WT(Crnl): 0 FHR: 0 PRES: PROTEIN: GLUCOSE: NITRITES: LEUC: FETAL MOVEMENT: 02 SAT: 100.00% SOURCE: Room Air NOTES: BP WNL, HRRR ELEVATED, LCTA BILAT A&OX4																				

Chronic care clinic: <input type="radio"/> Y <input type="radio"/> N	What Clinic(s): GD	Describe: SCROTUM
Skin: <input checked="" type="checkbox"/> Warm	<input checked="" type="checkbox"/> Dry <input checked="" type="checkbox"/> Swelling	Describe: ON BOTH SIDE OF TESTICLE
<p>A NOTES: TWO AREAS OF SLIGHT REDNESS/SWELLING ON UPPER SIDES OF TESTICLES- VERY TENDER TO TOUCH, NO TEMPERATURE DIFFERNECE. PT STATES "I WAS SEEN FOR THIS IN FEBRUARY AND NOW ITS BACK" NO STREAKING NOTED. PER PPT REPORT, "THE SAME THING IS ON MY BACK" NO ABNORMALITIES SEEN ON LOWER BACK. STANDARD FORM: MH Individualized Treatment Plan</p>		
<p>P APPT SCHEDULED: Practitioner - Sick Call Scheduled WITH: Provider, ISCI OPC ON: 10/09/2017 AT: 14:14:00(MT) NOTES: WILL FORWARD FOR FURTHER REVIEW</p>		
<p>Disposition: <input checked="" type="checkbox"/> Return to unit <input checked="" type="checkbox"/> Nursing Intervention <input checked="" type="checkbox"/> Referral to practitioner for current presenting complaint <input checked="" type="checkbox"/> KOP Comments: IBUPROFE X 1 BOX GIVEN</p>		
<p>E NOTES: PT EDUCATED TO WATCH CALL OUT TimeStamp: 30 September 2017 13:40:32 (MT) — User: Jean Buckles (BUCJE01)</p>		
<p><input checked="" type="checkbox"/> Patient educated to contact medical if symptoms develop or worsen <input checked="" type="checkbox"/> Verbal information given <input checked="" type="checkbox"/> The patient demonstrates an understanding of self-care, symptoms to report and when to return for</p>		
<p>STAFF: Buckles, Jean NURSE SIGNATURE:</p>		

<p>IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 09/25/2017 TIME: 15:15:00(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic</p>		
<p>S NOTES: Contact was made with the inmate at the request of Deputy Warden Valley, with Deputy Warden Valley present for the contact. The inmate contact was based on housing issues the inmate had mentioned. The inmate reported the last concerns reported were quite some time ago and the inmate was unaware of what might triggered the contact. The inmate reported the only current concern was the lack of call button in the tier the inmate is currently living. The inmate reported having heard other units had call buttons and expressed interest in one of these other units. The inmate also expressed interest in moving back to unit 15. This was the end of the contact with the inmate with no further or immediate concerns reported.</p>		
<p>O NOTES: None</p>		
Person <input type="radio"/> Y <input type="radio"/> N	Place <input type="radio"/> Y <input type="radio"/> N	Time <input type="radio"/> Y <input type="radio"/> N
Situation <input type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good
Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:	Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene
Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent	Speech: <input checked="" type="checkbox"/> Unremarkable	<input checked="" type="checkbox"/> Logical <input checked="" type="checkbox"/> Coherent
Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent	
<p>A NOTES: Oriented x4. Denied any active mental health concerns. Did not endorse any immediate concerns to either the clinician or DW. Inmate did not reported SI/SIB during the time of the clinician. Inmate did not appear to express emotion beyond what would be considered a normal range. STANDARD FORM: MH Individualized Treatment Plan</p>		
<p>Assessment: <input type="radio"/> Stable <input type="radio"/> Minimal improvement <input type="radio"/> Moderate improvement <input type="radio"/> Unchanged from last follow-up <input type="radio"/> Other: Provisional Diagnosis: n/a</p>		
<p>P NOTES: Inmate will have access to clinical staff via HSR or Open clinic and will receive follow-up as per the inmate's LOC</p>		
<p>E NOTES: contact</p>		
<p>STAFF: Duty, Shane</p>		

<p>IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 09/05/2017 TIME: 07:34:00(MT) DURATION: minutes TYPE: Lab Test (Unsolicited) LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic</p>		
<p>S NOTES: System Generated Encounter for Unsolicited Lab Test Order</p>		
<p>O NOTES: None</p>		
<p>A NOTES: None STANDARD FORM: MH Individualized Treatment Plan</p>		
<p>P LAB TEST ORDERED: CBC WITH DIFF LAB INSTRUCTIONS: None LAB TEST ORDERED: COMP. METABOLIC (CMP) LAB INSTRUCTIONS: None NOTES: None</p>		
<p>E NOTES: None STAFF: Rogers, William</p>		

<p>IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 08/31/2017 TIME: 09:44:01(MT) DURATION: minutes TYPE: Practitioner - Chronic Care-Follow-up LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic</p>		
<p>S NOTES: CC-GD</p>		
<p>Pt. reports everything is going well at this time. Asks about receiving panty memo to purchase off of commissary. Requests routine labwork. Requests to review most recent labwork.</p>		
1. GD	with medications? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	with diet? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

with exercise? Yes No N/A

O NOTES:
VSS
NAD
Exam deferred for discussion.
Reviewed recent hormone level results.

A NOTES: None
STANDARD FORM: MH Individualized Treatment Plan
1. G F P NA I S W NA GD

P LAB TEST ORDERED: PROLACTIN, SERUM
LAB INSTRUCTIONS: None
LAB TEST ORDERED: ESTROGEN PANEL
LAB INSTRUCTIONS: None
LAB TEST ORDERED: TESTOSTERONE FREE + TOTAL
LAB INSTRUCTIONS: None
APPT SCHEDULED: Lab WITH: Rogers, William
ON: 09/10/2017 AT: 09:44:01(MT)
APPT SCHEDULED: Lab WITH: Rogers, William
ON: 09/10/2017 AT: 10:44:00(MT)
APPT SCHEDULED: Lab WITH: Rogers, William
ON: 09/10/2017 AT: 10:54:00(MT)
NOTES: None

Reviewed Lab/Procedures/Reports with Patient: Yes No NA Indicated Treatment Plan changes discussed: Yes No NA

E NOTES: Patient education provided on recent lab work
Education Provided: Nutrition Exercise Test Results

STAFF: Rogers, William

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 08/30/2017 TIME: 12:48:32(MT) DURATION: minutes TYPE: MH - Clinician - Post-Watch Release Follow Up - Day 3
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: Met with inmate in unit 9 for 3 of 3 contact. Inmate reported inmate was doing well and denied any SI/ HI SIB. Inmate reported inmate went to an appointment with inmate's attorneys earlier this morning and was showering the last time clinician came by. Inmate reported medication compliance and acknowledge how to utilize open mental health clinic, HSRs and groups for additional clinical services.
Medication compliant: Y N: Side effects: N Y:

O NOTES: None

Person <input type="radio"/> Y <input type="radio"/> N	Place <input type="radio"/> Y <input type="radio"/> N	Time <input type="radio"/> Y <input type="radio"/> N
Situation <input type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good
Sleep: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Appetite: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:
Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:	<input checked="" type="checkbox"/> Calm & cooperative	Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent
Speech: <input checked="" type="checkbox"/> Unremarkable	<input checked="" type="checkbox"/> Coherent	Thought Content: <input checked="" type="checkbox"/> No evident psychosis
Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent		

A NOTES: Assessed as low risk for self harm at this point in time.
STANDARD FORM: MH Individualized Treatment Plan
Provisional Diagnosis: N/A

P NOTES: Inmate will be seen in accordance with LOC and housing placement.

E NOTES: Educated on how to receive additional clinical services as needed.

STAFF: Gruhot, Morgan

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 08/29/2017 TIME: 11:38:42(MT) DURATION: minutes TYPE: MH - Clinician - Post-Watch Release Follow Up - Day 2
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES:
Met with inmate Edmo in the Education Bldg to complete a 2 of 3 clinical contact following release from watch. Edmo reports feeling good today. Edmo was flirty and happy, reporting spending time with a new friend in the computer lab who was helping Edmo learn the software. Edmo reported feeling a moment of crisis, resulting in Edmo going on watch, but denies feeling that today. Edmo reports doing well in Unit 09, and has a good cellie. Edmo was told a clinician would follow up tomorrow for Edmo's 3 of 3. Edmo states understanding how the follow up process works. No signs of depression or risk for self harm were observed. Edmo reported a willingness to reach out to staff if mental health symptoms increase.
TimeStamp: 29 August 2017 11:43:27 (MT) — User: Elizabeth Adkisson (ADKEL01)
Medication compliant: Y N:

O NOTES:
Inmate presented as alert and oriented x 4. Maintained appropriate eye contact and behavior with a cooperative attitude. Edmo's affect and mood were congruent and assessed as appropriate to situation and WNL. Edmo's speech was clear with normal rate, tone and volume. Thought process was logical and goal driven with relevant content. Edmo's insight and judgment were assessed to be normal and intact. Edmo did not appear to be endorsing any hallucinations or delusions. No signs of SI/ HI were noted.
TimeStamp: 29 August 2017 11:43:58 (MT) — User: Elizabeth Adkisson (ADKEL01)

Person <input type="radio"/> Y <input type="radio"/> N	Place <input type="radio"/> Y <input type="radio"/> N	Time <input type="radio"/> Y <input type="radio"/> N
Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Sleep: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good
Appetite: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:	Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:
Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene	Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent	Speech: <input checked="" type="checkbox"/> Unremarkable
Thought Form: <input checked="" type="checkbox"/> Goal directed	<input checked="" type="checkbox"/> Logical <input checked="" type="checkbox"/> Coherent	Thought Content: <input checked="" type="checkbox"/> No evident psychosis

Cognitive functioning: No gross cognitive deficits apparent

A: NOTES: None
STANDARD FORM: MH Individualized Treatment Plan

Assessment: Stable Minimal improvement Moderate improvement Unchanged from last follow-up Other: Provisional Diagnosis: 2 of 3 Clinical Contact Diagnosis: N Y:

P: NOTES: None

E: NOTES:
Edmo will be seen tomorrow for a 3 of 3 Clinical Contact

TimeStamp: 29 August 2017 11:45:22 (MT) -- User: Elizabeth Adkisson (ADKELD1)

STAFF: Adkisson, Elizabeth

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 08/28/2017 TIME: 13:12:32(MT) DURATION: minutes TYPE: MH - Clinician - Post-Watch Release Follow Up - Day 1
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S: NOTES: Other contact was made with Inmate Edmo. The Inmate denied any current SI/SIB and reported having a good day today. When asked if there were any other clinical concern the inmate denied. Edmo reported the ability and willingness to contact clinical staff if needed.

O: NOTES: None

Person <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Place <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Time <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Situation <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Insight: <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good	Judgment: <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good
Abnormal movements: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y:	Current Suicidal Ideation: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene
Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent	Speech: <input checked="" type="checkbox"/> Unremarkable	<input checked="" type="checkbox"/> Coherent
Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent	

A: NOTES: The inmate reported stability and denied any mental health concerns. the inmate denied SI/SIB and reported the ability to maintain safety. The inmate did not express emotion beyond a normal range.
STANDARD FORM: MH Individualized Treatment Plan

Assessment: Stable Minimal improvement Moderate improvement Unchanged from last follow-up Other: Provisional Diagnosis: N/A

P: NOTES: The inmate will continued to receive daily contact for the next 48 hours.

E: NOTES: contact

STAFF: Duty, Shane

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 08/27/2017 TIME: 07:46:00(MT) DURATION: minutes TYPE: MH - Clinician - SRA - Initial
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S: NOTES:
Clinical contact while on NASW. Inmate denied SI/HI/SIB and stated that these thoughts were never present, only depression. Inmate stated inmate felt safe in all Units and had no MH concerns at this time.
Inmate removed from all watches.
TimeStamp: 27 August 2017 13:11:10 (MT) -- User: Heidi Maple (MAPHE01)

Date placed on Watch: 08/26/2017 Date Removed from Watch/Observation: 08/27/2017

Date of Report: 08/27/2017

Institution: Idaho State Correctional Institution South Idaho Correctional Institution East Boise Community Re-entry Center Nampa Community Re-entry Center Pocatello Womens Correctional Center Idaho Maximum Security Institution North Idaho Correctional Institution St. Anthony Work Camp Treasure Valley Community Re-entry Center Idaho Falls Community Re-entry Center Idaho Correctional Institution - Orofino Correctional Alternative Placement Program South Boise Womens Correctional Center Idaho State Correctional Center

Offense: Sexual Abuse of a Child Under 16 Years of Age

Regular Housing Unit: Unit 9

Current Housing Unit: Unit 16

MHC MHP MHMN CMHS1 CMHS2 ICMHS ACMHS Incoming (Initial) Only Exit Only Incoming/Exit Concurrent Follow-up Only Incoming/Follow-up Concurrent Intake/Transfer Statements of possible self-harm by cutting in the genital area to security staff

Interview: Inmate denied thoughts of SI/HI/SIB and stated that at no time were these thoughts present. Inmate denied thoughts of SI/HI/SIB and stated that at no time were these thoughts present. Inmate stated that inmate had "felt depression coming" and sought help per inmate's treatment plan rather than risking any type of self-injurious behaviors. Inmate stated that over 1 year ago, inmate had begun ? cutting in the genital area? when depression was present. Inmate stated that inmate had been working with the assigned clinician pertaining to seeking help from security rather than engaging in self-harm. Inmate stated that ?I did this and was placed on suicide watch?. Inmate stated that inmate wanted to continue to seek help independently without being placed on watch. Inmate stated that the reason for depression was due to the suicide of a friend.

Inmate stated "I have too many goals now to cut myself or kill myself". Inmate stated that inmate was excited to get married after being released and that inmate's fiancé "would be angry if I cut myself again, I don't want to ruin my relationship with him". Inmate was able to list several coping skills such as listening to music, exercising, reflecting and processing. Inmate felt staff had "lacked empathy" by placing her on NASW when asking for help. Inmate stated inmate felt "safe" in "any unit in GP". Inmate stated inmate had utilized the time in NASW as a "time-out to reflect on my grief and depression". Inmate stated depression was at a 4 on a scale of 1-10 with 10 being the highest and anxiety was almost "non-existent". Inmate stated that inmate was able to manage level 4 independently by utilizing coping skills. Inmate stated that inmate was on MH medications and had been med compliant. Inmate stated inmate's intent to contact inmate's assigned clinician via HSR and/or open clinic within the next 24 hours to seek advice per inmate's treatment plan.

Reason for Suicide Watch: Denies intent to die

Plan or Method: Denies plan or method

Access to Means: Consistent with housing

Inmate History of Suicide Attempts Other: Prior history of SIB Recent personal loss or crisis Inmate reported that over 1 year ago inmate had "begun cutting in the area of my genitals with the intent to castrate myself". Inmate stated there were no other instances of SIB. PSI report review highlighted 3 prior attempts of suicide, 1 of which resulted in hospitalization. PSI review showed inmate had reported attempted suicide by cutting inmate's arm 8-2010, and overdosing on alcohol and pills both on 9-2010 and 5-2011. Other: Warning given by Security staff

Psychological Factors: Inmate stated inmate had been having symptoms of depression due to inmate's friend completing suicide recently. Inmate stated inmate wanted to gain support and empathy from staff but had been placed on NASW. Record check shows that inmate had been given a verbal warning that same day for rubbing the shoulder of another inmate. No DOR was given at that time. Inmate gave prior history of sexual abuse with his step-brother which PSI confirmed. Inmate stated psychological symptoms from gender dysphoria that had caused issues with past relationships. Per PSI report inmate had met criteria and been diagnosed with major depressive disorder (NOS), Suicidal Ideation, Alcohol Dependence.

Protective Factors: Strong family support network, support from fiancé, medication compliant.

ONOTES: Inmate maintained appropriate eye contact.		
Orientation: <input checked="" type="checkbox"/> Person <input checked="" type="checkbox"/> Place <input checked="" type="checkbox"/> Time <input checked="" type="checkbox"/> Situation	Long Term Memory Problems: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Short Term Memory Problems: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Appearance: <input checked="" type="checkbox"/> Appropriate to situation	Motor Activity: <input checked="" type="checkbox"/> Appropriate to situation	Speech: <input checked="" type="checkbox"/> Appropriate to situation
<input checked="" type="checkbox"/> Quiet	Thought Process: <input checked="" type="checkbox"/> Appropriate to situation <input checked="" type="checkbox"/> Goal directed	Mood: <input checked="" type="checkbox"/> Appropriate to situation <input checked="" type="checkbox"/> Calm
Affect: <input checked="" type="checkbox"/> Appropriate to situation	Attitude: <input checked="" type="checkbox"/> Positive <input checked="" type="checkbox"/> Friendly <input checked="" type="checkbox"/> Cooperative	Insight: <input checked="" type="checkbox"/> Good
Judgment: <input checked="" type="checkbox"/> Intact		
ANOTES: Inmate did not present with symptoms of anxiety or depression during contact as evidenced by inmate's self-statements as well as non-verbal cues of calm demeanor and pleasant mood. Inmate was goal oriented to gain assistance when needed rather than indulge in self-harming behaviors. Inmate was goal oriented for pleasant future events which included getting married. Inmate was able to identify several coping skills during contact that would assist with depressive or anxious symptoms such as music, exercise, and processing with assigned clinician. Inmate denied SI/HI/SIB at this time. Inmate was assessed to be of low risk for self-harm.		
STANDARD FORM: MH Individualized Treatment Plan		
<input checked="" type="checkbox"/> The offender is currently a low risk for self harm <input type="checkbox"/> The offender is currently a moderate risk for self harm <input type="checkbox"/> The offender is currently a high risk for self harm		
Recommendations: It is clinically recommended that inmate be removed from all watches and placed in appropriate housing at this time. Inmate stated no intent at any time to indulge in self-harm and stated no suicidal ideation was present at any point within the past year. Inmate stated goals of working through MH with assigned clinician and seeking help rather than participating in self-injurious behaviors.		
PNOTES: Inmate will be released from all watches and have clinical contact per LOC. Inmate will receive 3 daily clinical follow-ups following NASW. Inmate will continue to attend all MH groups, clinical meetings, and remain medication compliant.		
PROBLEM (The problem(s) should be specific to the offender's current reporting issues) Edmo stated depression symptoms began to escalate due to the grieving process of a friend who had recently completed suicide. Inmate stated that in an attempt to gain help for the depression rather than engage in SIB due to past experiences, inmate had been placed on NASW.		
GOAL (There should be two (2) types of goals for each Problem: 1) Immediate goal(s) and 2) Short-term goal(s)) Edmo will utilize coping skills to manage depression and grief without self-harm Edmo will communicate his mental health symptoms to clinical staff via HSR, open clinic or to security staff.		
relate to the presenting problem(s) of the offender) Edmo will complete a list of mental health symptoms that he can provide to assigned clinician and submit an HSR within the next 24 hours for clinician to review. Inmate will participate in stated coping skills of exercise, listening to music, and reflecting. Inmate will make record of these skills to review and process with assigned clinician.		
Change is LOC Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> MHC <input type="checkbox"/> MHP <input type="checkbox"/> MHMN <input checked="" type="checkbox"/> CMHS1 <input type="checkbox"/> CMHS2 <input type="checkbox"/> ICMS <input type="checkbox"/> ACMHS		
Nature of Incident: <input type="checkbox"/> Verbal threat without action <input type="checkbox"/> Hanging <input type="checkbox"/> Cutting <input type="checkbox"/> OD <input checked="" type="checkbox"/> Other:	Describe Other: Verbal indication of possibility of cutting genitalia	Degree of Medical Intervention: <input checked="" type="checkbox"/> None <input type="checkbox"/> In-house medical <input type="checkbox"/> Hospital/ER
<input type="checkbox"/> Avoid disciplinary action/restrictive housing <input type="checkbox"/> Manipulate housing <input type="checkbox"/> Death <input type="checkbox"/> Move from tier <input checked="" type="checkbox"/> Desire to speak with someone <input type="checkbox"/> Other:	Last Suicide Watch: <input type="checkbox"/> <1 week <input type="checkbox"/> 1-4 weeks <input type="checkbox"/> 1-6 months <input type="checkbox"/> 6-12 months <input checked="" type="checkbox"/> > 12 months <input type="checkbox"/> Never	<input checked="" type="checkbox"/> The offender will return to their previous treatment plan upon stabilization <input type="checkbox"/> The offender's treatment plan will be updated based on change of their LOC <input type="checkbox"/> A treatment plan will be created based on the offender's current issues

E NOTES: Inmate may contact MH through Open Clinic or HSR as needed.	
STAFF: Maple, Heidi	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 08/26/2017 TIME: 19:14:29(MT) DURATION: minutes TYPE: Nurse - Chart Review LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: NON ACUTE SUICIDE WATCH Date/Time: 08/26/2017 18:30:00 MAKING STATEMENTS OF SELF HARM <input checked="" type="checkbox"/> Appropriate to situation Did the inmate require medical intervention at the facility? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A Did the inmate require treatment at a community hospital? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No N/A N/A
O	NOTES: None Orientation: <input checked="" type="checkbox"/> Person <input checked="" type="checkbox"/> Place <input checked="" type="checkbox"/> Time <input checked="" type="checkbox"/> Situation Long Term Memory Problems: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Short Term Memory Problems: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Appearance: <input checked="" type="checkbox"/> Appropriate to situation Motor Activity: <input checked="" type="checkbox"/> Appropriate to situation Speech: <input checked="" type="checkbox"/> Appropriate to situation Thought Process: <input checked="" type="checkbox"/> Appropriate to situation Mood: <input checked="" type="checkbox"/> Appropriate to situation Affect: <input checked="" type="checkbox"/> Appropriate to situation Attitude: <input checked="" type="checkbox"/> Negative Insight: <input checked="" type="checkbox"/> Good Judgment: <input checked="" type="checkbox"/> Impaired
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan Disposition: <input type="checkbox"/> Acute Suicide Watch <input checked="" type="checkbox"/> Non-Acute Suicide Watch
P	NOTES: None
E	NOTES: HOW TO ACCESS HEALTHCARE AND MH WHILE ON SUICIDE WATCH TimeStamp: 26 August 2017 19:21:59 (MT) — User: Nicholas Hoffman (HOFN101) STAFF: Hoffman, Nicholas NURSE SIGNATURE:
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 08/15/2017 TIME: 15:39:40(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Contact was made with inmate Edmo to discuss the completed suicide of a fellow GD inmate. Edmo reported Edmo was good friends with this inmate and expressed sadness regarding the issue. Edmo was able to process through this and reported stability when the contact was over. Inmate Edmo reported ality and desire to maintain safety. Inmate denied need for follow and reported ability to make use of open clinic as needed.
O	NOTES: None Person: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Place: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Time: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Situation: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Insight: <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good Judgment: <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good Abnormal movements: <input type="checkbox"/> N <input checked="" type="checkbox"/> Y: Current Suicidal Ideation: <input checked="" type="checkbox"/> N <input type="checkbox"/> Y: Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent Speech: <input checked="" type="checkbox"/> Unremarkable <input checked="" type="checkbox"/> Coherent Thought Content: <input checked="" type="checkbox"/> No evident psychosis Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent
A	NOTES: Inmate presented as stable and expressed emotion consistent with the situation. Inmate did not endorse si/sib. Inmate did not express any increase in mental health symptoms at the time of the contact. STANDARD FORM: MH Individualized Treatment Plan Assessment: <input checked="" type="checkbox"/> Stable <input type="checkbox"/> Minimal improvement <input type="checkbox"/> Moderate improvement <input type="checkbox"/> Unchanged from last follow-up <input type="checkbox"/> Other: Provisional Diagnosis: n/a
P	NOTES: Inmate can access clinical staff via concern form or open clinic. will receive follow-up as per loc.
E	NOTES: contact STAFF: Duty, Shane
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 08/13/2017 TIME: 11:15:16(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Renew CDP Medicaton
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	DRUG PRESCRIPTION: FINASTERIDE (UD) TABS 5 Mg Tabs VERBAL BY: Martin, Steve EFFECTIVE DT: 08/13/2017 RT: PO DOSE: 1 STRENGTH: 5 Mg METHOD: Normal Dose REQ: QD FOR: 90 DAYS EXPIRATION DATE: 11/10/2017 REFILLS: 2 STATUS: Discontinued - Other
E	NOTES: TimeStamp: 13 August 2017 11:17:39 (MT) — User: Veronica Ferro (FERVE01) STAFF: Ferro, Veronica NURSE SIGNATURE:

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 08/08/2017 TIME: 08:22:08(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S	NOTES: Met with inmate Edmo in my office in the Education building for clinical contact per LOC and to follow-up on increased anxiety reported to the psych provider. Edmo reported doing well today, although tired because it is earlier than Edmo prefers. Edmo denied questions or concerns, Edmo reported the appointment with the psych provider went well and nothing was changed, I asked about the increase in anxiety; Edmo reported some increase in general anxiety and believes it is related to Edmo's gender dysphoria. Edmo was offered to be enrolled in Mood Management to address anxiety and depression symptoms, which would be helpful in addition to the support Edmo received in the gender dysphoria group. Edmo denied wanting to participate in a Mood Mgmt group. Edmo reported being able to manage the anxiety by secluding Edmo's self briefly in Edmo's cell in order to re-center Edmo's self; Edmo reported this works well. Edmo denied significant increases in gender dysphoria recently and stated Edmo feels some hope for the future due to Edmo's current lawsuit, which helps decrease Edmo's dysphoria. Edmo denied thoughts of self-castration at this time. Edmo denied SI/HI/SHB. Edmo reported having requested to have Edmo's MH facility hold removed and is hoping that will be staffed at the next MTC meeting. Edmo reported trying to get a job and hoping to be able to move to SICI for a better chance at being able to work.	
O	NOTES: None	
	Person <input type="radio"/> Y <input type="radio"/> N Place <input type="radio"/> Y <input type="radio"/> N Time <input type="radio"/> Y <input type="radio"/> N Situation <input type="radio"/> Y <input type="radio"/> N Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good Abnormal movements: <input type="radio"/> N <input type="radio"/> Y: Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y: Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene <input checked="" type="checkbox"/> Calm & cooperative Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent Speech: <input checked="" type="checkbox"/> Unremarkable Thought Form: <input checked="" type="checkbox"/> Goal directed Thought Content: <input checked="" type="checkbox"/> No evident psychosis Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent	
A	NOTES: Edmo is assessed as calm and stable at this time and managing Edmo's MH in GP. Edmo would benefit from attendance in a Mood Mgmt group to process anxiety/depressive symptoms and learn additional coping skills. STANDARD FORM: MH Individualized Treatment Plan Provisional Diagnosis: N/A	
P	NOTES: It was recommended that Edmo participate in Mood Mgmt group; Edmo declined. CS Clark was emailed to request that Edmo's MH hold be added to the agenda at the next MTC meeting. Follow-up per LOC. Edmo can access additional MH services via HSRs and open clinics as needed.	
E	NOTES: TimeStamp: 8 August 2017 08:38:02 (MT) — User: Krina Stewart (STEKR01) STAFF: Stewart, Krina	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 07/26/2017 TIME: 10:56:23(MT) DURATION: minutes TYPE: Practitioner - Review LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S	NOTES: pt in to CDP to discuss changing Sublingual estradiol to transdermal.	
O	NOTES: pt AOX3 NAD, pt exam deferred for discussion. pt currently on recommended dose of estradiol by GD specialist 3mg BID.	
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan	
P	NOTES: cont POC, refer to GD specialist at next appointment.	
E	NOTES: pt edu on POC, pt states understanding and agrees to wait to speak with specialists in December. STAFF: Martin, Steve	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 07/25/2017 TIME: 07:25:58(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S	NOTES: TimeStamp: 25 July 2017 07:27:27 (MT) — User: Scott Eliason (ELISC01) Current symptoms: The inmate reported she is doing "alright." She said that her mood "still depressed- it is there. Sometimes it is bad and sometimes it is manageable." She complained about feeling anxious and constantly being watched. "It isn't anyone in particular but I just feel like everyone is watching me." She said that she thinks that maybe it has to do a little with her wanting to transition and not being able to do it. She is back in the gender dysphoria groups and feels more supported there. She denied suicidal thoughts, She reported good med compliance.	
O	NOTES: None <input checked="" type="checkbox"/> Alert, Oriented x 3 <input checked="" type="checkbox"/> Calm/Cooperative <input checked="" type="checkbox"/> No Apparent Distress <input checked="" type="checkbox"/> Adequate Grooming/Hygiene Mood: <input type="radio"/> Euthymic <input type="radio"/> Labile <input type="radio"/> Dysphoric Affect: <input type="radio"/> Full <input type="radio"/> Restricted Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y Homicidal Ideation: <input type="radio"/> N <input type="radio"/> Y Speech: <input checked="" type="checkbox"/> Normal Rate/Rhythm Thought process: <input type="radio"/> Unremarkable <input type="radio"/> Remarkable: Thought Content: <input type="radio"/> Unremarkable <input type="radio"/> Remarkable: Cognitive Functioning: <input type="radio"/> Unremarkable <input type="radio"/> Remarkable:	
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan Brief summary: The inmate reported she was doing "okay," Mood and anxiety appear fairly stable. She notes some continues anxiety and dysphoria about transitioning.	
P	NOTES: None	
E	NOTES: Gender dysphoria STAFF: Eliason, Scott	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/21/2017 TIME: 15:30:08(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S	NOTES: Met with inmate Edmo in my office in the Education Bldg for clinical contact per LOC. Edmo reported not doing very well lately and experiencing an increase in gender dysphoria. Edmo reported staying busy and trying not to dwell on it too much. Edmo reported doing okay in Edmo's housing unit and has continued to take Effexor; Edmo reported having experienced significant withdrawal symptoms when trying to discontinue Effexor in that past, so Edmo intends to continue taking it at this time. Edmo reported maybe it helps. Edmo reported attending the GD group every week and getting some possible benefit from it. Edmo was informed the MTC is aware of Edmo's refusal to attend Social Skills group as an intervention and support Edmo's continued	

attendance in the GD group. Edmo reported asking the group facilitator to request that the MTC provide an evaluation for gender reassignment surgery and was informed the request has been noted. Edmo reported expecting GRS to decrease Edmo's dysphoria/depression by about 80%. Edmo reported feeling that the GRS will address a significant piece of Edmo's dysphoria, allowing Edmo to manage stressors and depression more effectively. Edmo reported that the dysphoria often occurs without Edmo being aware of it until Edmo is experiencing it. Edmo identified some "touchy subjects" that often trigger Edmo's dysphoria, particularly subjects that are taken for granted by cisgender individuals (e.g. being able to carry a biological child). Edmo reported managing the dysphoria okay at this time, but it is constantly there. Edmo reported some struggles with trying to describe gender dysphoria to others because it is an indescribable feeling, which is difficult for Edmo. Edmo reported taking things one day at a time for now because having expectations/plans tends to lead to disappointment and depression, so staying in the present is more useful. Edmo inquired about when the MTC will meet again and confirmed that Edmo can send a concern form with questions Edmo would like addressed.

O NOTES: None

Person <input checked="" type="radio"/> Y <input type="radio"/> N	Place <input checked="" type="radio"/> Y <input type="radio"/> N	Time <input checked="" type="radio"/> Y <input type="radio"/> N
Situation <input checked="" type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input checked="" type="radio"/> Fair <input type="radio"/> Good	Judgment: <input type="radio"/> Poor <input checked="" type="radio"/> Fair <input type="radio"/> Good
Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:	Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene
<input checked="" type="checkbox"/> Calm & cooperative <input checked="" type="checkbox"/> Flat	Speech: <input checked="" type="checkbox"/> Unremarkable	<input checked="" type="checkbox"/> Logical
Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent	

A NOTES: Edmo appears to continue to experience symptoms of gender dysphoria and is focused on gender reassignment surgery as the only effective treatment option.
STANDARD FORM: MH Individualized Treatment Plan
Provisional Diagnosis: N/A

P APPT SCHEDULED: MH - Clinician - Individual Contact WITH: Stewart, Krina
ON: 08/21/2017 AT: 23:00:00(MT)
NOTES: Follow-up per LOC and Tx plan. Edmo can access additional MH services via concern form and open clinic as needed.

E NOTES:
TimeStamp: 21 June 2017 15:54:34 (MT) — User: Krina Stewart (STEKR01)

STAFF: Stewart, Krina

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 05/17/2017 TIME: 07:35:45(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: Chronic Care medication renewal

O NOTES: None

A NOTES: None
STANDARD FORM: MH Individualized Treatment Plan

P DRUG PRESCRIPTION: ESTRADIOL TABS 1 Mg Tabs VERBAL BY: Povar, Jared
EFFECTIVE DT: 05/17/2017 RT: PO DOSE: 3 STRENGTH: 1 Mg METHOD: Normal Dose
FREQ: BID FOR: 365 DAYS EXPIRATION DATE: 05/16/2018 REFILLS: 11 STATUS: Order Discontinued at Pharmacy Vendor (DR)

DRUG PRESCRIPTION: FINASTERIDE (UD) TABS 5 Mg Tabs VERBAL BY: Povar, Jared
EFFECTIVE DT: 05/17/2017 RT: PO DOSE: 1 STRENGTH: 5 Mg METHOD: Normal Dose
FREQ: QD FOR: 90 DAYS EXPIRATION DATE: 08/14/2017 REFILLS: 2 STATUS: Discontinued - Other

NOTES: None

E NOTES:
TimeStamp: 17 May 2017 07:39:54 (MT) — User: Ryan Douglas (DOURY01)

STAFF: Douglas, Ryan
NURSE SIGNATURE:

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 05/16/2017 TIME: 14:24:56(MT) DURATION: minutes TYPE: Practitioner - Chronic Care-Follow-up
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: CC - GD

1. GD
For all diseases since last visit, describe new symptoms: PT states "feels fine". Denies with _____ with _____
hot flashes, chills, palpitations, weight gain or loss. _____ medications? Yes No N/A diet? Yes No N/A
with exercise? Yes No N/A

O NOTES: VSS. NAD.

HEENT/neck: WNL	Heart: RRR	Lungs: CTA
Abdomen: bxs4	Extremities: WNL	GU/rectal: N/A
Other: N/A		

A RELATED PROBLEM: Other Diagnosis: Pt. Specific Chronic Condition Gender identity disorder, unspecified [F64.9]
MEDICAL DIAGNOSIS: Gender identity disorder, unspecified [F64.9]
NOTES: None
STANDARD FORM: MH Individualized Treatment Plan

1. G F P NA I S W NA GD

P APPT SCHEDULED: Practitioner - Chronic Care-Follow-up WITH: Rogers, William
ON: 08/31/2017 AT: 08:00:00(MT)
NOTES: Continue POC. Labs due in Dec.

Reviewed Lab/Procedures/Reports with Patient: Yes No NA Indicated Treatment Plan changes discussed: Yes No NA

E NOTES:
TimeStamp: 16 May 2017 14:35:18 (MT) — User: Jared Povar (POVJA01)

Education Provided: Nutrition Exercise Test Results Medication Management

STAFF: Povar, Jared

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 05/03/2017 TIME: 10:20:32(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: Met with inmate Edmo for clinical contact and to update Edmo's treatment plan per LOC. Edmo reported Edmo is attending the GD group and feels that it is going "okay." Edmo stated that Edmo doesn't feel that it is an "intervention," but that Edmo gets some new perspectives and feels that is helpful. Edmo stated Edmo informed the group clinician that Edmo is refusing to attend the Social Skills group and will appeal the MTC decisions to require it because it does not have anything to do with Edmo's gender dysphoria and does not treat the GD in any way. Edmo was reminded that we previously discussed the connection between the GD group, the requirement to attend the Social Skills group, and why that had been decided. Edmo acknowledged it was previously discussed; Edmo reported continued refusal to participate in the Social Skills group. Edmo reported attending open clinic previously and being told that Edmo's mental health transportation hold was removed. Edmo was informed that, per CIS, the MH transportation hold remains, as previously discussed, and is effective until July 2017. Edmo stated that Edmo doesn't care either way that it can be removed or can remain and Edmo doesn't have a preference either way. Edmo reported meeting with the psychiatrist yesterday and discontinuing Remeron due to pharmacy not providing the dosage correctly; Edmo reported continuing to take Effexor. Edmo identified that Edmo's desire to self-castrate is often triggered by "depression" (hopelessness, lack of self-worth), which then triggers Edmo's gender dysphoria, which then feeds the depression. Edmo stated that, even though Edmo feminizes anyway, being unable to feminize increases Edmo's dysphoria and depression. This contradiction was challenged; Edmo agreed to identify self-worth and self-image as triggers for Edmo's dysphoria rather than the inability to feminize within IDOC policy. Edmo's treatment plan was reviewed and updated to reflect Edmo's current identified problems and goals for treatment. Edmo signed the treatment plan and was provided with a printed copy per Edmo's request.

O NOTES: None

Person <input type="radio"/> Y <input type="radio"/> N	Place <input type="radio"/> Y <input type="radio"/> N	Time <input type="radio"/> Y <input type="radio"/> N
Situation <input type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good
Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:	Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene
<input checked="" type="checkbox"/> Guarded <input checked="" type="checkbox"/> Flat	Speech: <input checked="" type="checkbox"/> Unremarkable	Thought Form: <input checked="" type="checkbox"/> Goal directed <input checked="" type="checkbox"/> Perseverative
Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent	

A NOTES: Edmo appears to continue to struggle with self-worth and gender dysphoria. Edmo tends to focus on external factors as causes of Edmo's dysphoria and is hesitant to explore intrinsic factors. Edmo was able to identify the internal/emotional cycle that often contributes to Edmo's desire to self-harm, which can be helpful in continued work on Edmo's triggers/warning signs.
STANDARD FORM: MH Individualized Treatment Plan

Provisional Diagnosis: N/A

P APPT SCHEDULED: MH - Clinician - Individual Contact WITH: Stewart, Krina
ON: 07/03/2017 AT: 23:00:00(MT)
APPT SCHEDULED: MH - Treatment Plan Review WITH: Stewart, Krina
ON: 11/03/2017 AT: 23:00:00(MT)
NOTES: Follow-up per LOC and current treatment plan. Consult with MTC regarding Edmo's refusal to complete Social Skills group. Edmo can access additional MH services via concern forms and open clinics as needed.

E NOTES:

TimeStamp: 3 May 2017 11:35:31 (MT) — User: Krina Stewart (STEKR01)

ADDENDUM: 05/03/2017 14:51:15 Clark, Jeremy
This clinician is writing in the review notes about the follow up during the MTC meeting in June forgot to time stamp when that note was made. The note was added just before this addendum.

TimeStamp: 3 May 2017 15:51:54 (MT) — User: Jeremy Clark (CLAJE01)

STAFF: Stewart, Krina

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 05/02/2017 TIME: 09:45:53(MT) DURATION: minutes TYPE: MH - Psychiatrist - Medication Renewal
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.

O NOTES: None

A NOTES: None
STANDARD FORM: MH Individualized Treatment Plan

P DRUG PRESCRIPTION: VENLAFAXINE HCL XR CP24 150 Mg Cp24 VERBAL BY: Stoddart, Jeremy
EFFECTIVE DT: 05/02/2017 RT: PO DOSE: 2 STRENGTH: 150 MG METHOD: Daily Dose
FREQ: QAM FOR: 210 DAYS EXPIRATION DATE: 11/27/2017 REFILLS: 3 STATUS: Discontinued - Other

NOTES: None

E NOTES: None

STAFF: Stoddart, Jeremy

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 05/02/2017 TIME: 09:26:49(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES: Psychiatry follow up.

Current housing: <input checked="" type="radio"/> General population <input type="radio"/> Mental Health unit <input type="radio"/> Medical observation/infirmiry <input type="radio"/> Segregation <input type="radio"/> Crisis cell <input type="radio"/> Other:	Follow-up exam: <input checked="" type="radio"/> Routine <input type="radio"/> Urgent <input type="radio"/> Emergent <input type="radio"/> Patient requested	Exam conducted: <input checked="" type="radio"/> On site <input type="radio"/> Telemedicine
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Current symptoms: The inmate reported no change in clinical situation. Still perseverates a lot on gender dysphoria, feels frustrated that identity and anatomy differ from each other and has occasional thoughts of autocastration. Denied any intent and described intention to "just take it day by day and keep myself physically safe." Has no intention to parole because continues to get DORs for "looking too effeminate in violation of IDOC policy." Feels trapped between being true to self and obeying the rules. Did not take Remeron because nursing was dispensing a full 15mg pill instead of breaking it in half for 7.5mg dose. Described adequate sleep, appetite and energy. Reported good compliance with Effexor and denied side effects. "abandoned hope for future goals until I get out because of this gender dysphoria in the way."

O	NOTES: None
	<input checked="" type="checkbox"/> Alert, Oriented x 3 <input checked="" type="checkbox"/> Calm/Cooperative <input checked="" type="checkbox"/> No Apparent Distress <input checked="" type="checkbox"/> Adequate Grooming/Hygiene Appearance/Behavior: Mild application of makeup, Feminine Mood: <input checked="" type="checkbox"/> Euthymic <input type="checkbox"/> Labile <input type="checkbox"/> Dysphoric Affect: <input type="checkbox"/> Full <input checked="" type="checkbox"/> Restricted mannerisms. Somewhat dismissive of any attempts at validation. Suicidal Ideation: <input type="checkbox"/> N <input type="checkbox"/> Y Homicidal Ideation: <input type="checkbox"/> N <input type="checkbox"/> Y Speech: <input checked="" type="checkbox"/> Normal Rate/Rhythm Thought process: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable: Thought Content: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable: Cognitive Functioning: <input checked="" type="checkbox"/> Unremarkable <input type="checkbox"/> Remarkable:
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
	Brief summary: 29 year old with Gender Dysphoria, MDD and GAD related to this. Functioning well on Effexor and given constraints of prison. Acute risk of self-harm is low but higher than the general population given Risk Assessment of self-harm/harm to others: <input checked="" type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> High history of Impulsive attempts at autocastration.
P	APPT SCHEDULED: MH - Psychiatrist - Scheduled WITH: Eliason, Scott ON: 07/25/2017 AT: 09:15:00(MT) NOTES: MEDICATION DISCONTINUED VIA THIS ENCOUNTER- Medication Name: 'VENLAFAXINE HCL XR CP24', Order Number: 0084183, Authorized By: Stoddart, Jeremy. Timestamp: 05/02/2017 08:45:52
E	NOTES: Risks, benefits and alternatives discussed.
	STAFF: Stoddart, Jeremy

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 05/01/2017 TIME: 09:08:39(MT) DURATION: minutes TYPE: Practitioner - Sick Call - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Pt into OPC to follow up on STD screening. RPR, HIV, and HCV screenings were all negative. Pt denies any questions/concerns at this time.
O	NOTES: VSS. NAD. PE differed for discussion
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: RTC PRN TimeStamp: 1 May 2017 09:12:55 (MT) -- User: Jared Povar (POVJA01)
	STAFF: Povar, Jared

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 04/24/2017 TIME: 15:45:23(MT) DURATION: minutes TYPE: Dental - Sick call - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Request Date: 04/04/2017 DENTURES
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: None
	STAFF: Cammann, Susanna

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 04/20/2017 TIME: 07:41:23(MT) DURATION: minutes TYPE: Practitioner - Review LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: Please send MRD, negative for hepatitis and HIV.
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: TimeStamp: 20 April 2017 07:42:18 (MT) -- User: Anthony Bushnell (BUSAN01)
	STAFF: Bushnell, Anthony

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 04/18/2017 TIME: 12:52:39(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: bra memo renewal
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	MEDICAL SUPPLIES/SPECIAL EQUIPMENT: SPORTS BRA UNTIL: 02/28/2019 NOTES: None
E	NOTES: TimeStamp: 18 April 2017 12:54:31 (MT) -- User: Amanda Beck (BECAM01)
	STAFF: Beck, Amanda NURSE SIGNATURE:

IDOC#: 94691 Inmate Name: EDMO, MASON D.	
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ENCOUNTER DATE: 04/18/2017 TIME: 09:01:38(MT) DURATION: minutes TYPE: Practitioner - Sick Call - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: HSR 923788 HIV, Hep. a, b, c testing. Reports a great deal of sexual activity in January 2017
O	NOTES: GID patient in NAD Skin without visible sores
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	LAB TEST ORDERED: RPR LAB INSTRUCTIONS: None LAB TEST ORDERED: Hepatitis Screen LAB INSTRUCTIONS: None LAB TEST ORDERED: HIV Ag/Ab LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Bushnell, Anthony ON: 04/28/2017 AT: 09:01:38(MT) APPT SCHEDULED: Lab WITH: Bushnell, Anthony ON: 04/28/2017 AT: 10:11:00(MT) APPT SCHEDULED: Lab WITH: Bushnell, Anthony ON: 04/28/2017 AT: 10:21:00(MT) APPT SCHEDULED: Practitioner - Sick Call - Scheduled WITH: Povar, Jared ON: 05/04/2017 AT: 09:05:00(MT) NOTES: Given sexual activity, unprotected, will order HIV, Hepatitis Screen and RPR. F/U after labs returned.
E	NOTES: TimeStamp: 18 April 2017 09:04:51 (MT) --- User: Anthony Bushnell (BUSAN01) STAFF: Bushnell, Anthony

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 04/10/2017 TIME: 10:47:36(MT) DURATION: minutes TYPE: MH - Clinician - DOR Recommendation LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: DOR Rec
O	SCANNED DOCUMENT/PHOTO TYPE: Medical Records TITLE: Edmo DOR Rec NOTES: DOR Rec
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: DOR Rec STAFF: Duty, Shane

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 04/07/2017 TIME: 08:55:28(MT) DURATION: minutes TYPE: MH - Clinician - Open Clinic LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic																																											
S	NOTES: Ms. Edmo came to Open Clinic to inquire about whether or not her mental health hold had been lifted. Edmo is hoping to transfer to another facility maybe or even a CWC. Edmo and I had a good discussion about depression as it relates to gender dysphoria. Edmo said lately she has been wearing minimal make-up because she realizes she make up does not change her, it helps her to feel a little more confident but if she didn't have it she would still be a woman. She asked when Dr. Alviso would be out again, I told her I didn't have that information but she can send a concern form and respectfully ask. Edmo reported she discussed reassignment surgery with Dr. Eliason and at that time the doctor did not feel Edmo met the criteria. Edmo reports she is not upset or allowing that to stall her dreams. She reports missing several classes of CBISO, and will take the next programming block offered. The case managers were very complementary of Edmo and reported she was engaged and doing the work and adding value to the class. Edmo reports being depressed and that is why so many classes were missed. Edmo looks well and reports she is doing better in GP that at any other time in Edmo's incarceration. TimeStamp: 7 April 2017 09:05:16 (MT) --- User: Elizabeth Adkisson (ADKEL01) Medication compliant: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Side effects: <input type="checkbox"/> N <input type="checkbox"/> Y																																										
O	NOTES: Inmate presented as alert and oriented x 4. She maintained appropriate eye contact and behavior with a cooperative attitude. Her affect and mood were congruent and assessed as appropriate to situation and WNL. Her speech was clear with normal rate, tone and volume. Her thought process was logical and goal driven with relevant content. Her insight and judgment were assessed to be normal and intact. She did not appear to be endorsing any hallucinations or delusions. No signs of SI/HI were noted. TimeStamp: 7 April 2017 09:06:53 (MT) --- User: Elizabeth Adkisson (ADKEL01)																																										
<table border="1"> <tr> <td>Person</td> <td><input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> <td>Place</td> <td><input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> <td>Time</td> <td><input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> </tr> <tr> <td>Situation</td> <td><input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td> <td>Insight:</td> <td><input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good</td> <td>Judgment:</td> <td><input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good</td> </tr> <tr> <td>Sleep:</td> <td><input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good</td> <td>Appetite:</td> <td><input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good</td> <td>Abnormal movements:</td> <td><input type="checkbox"/> N <input type="checkbox"/> Y:</td> </tr> <tr> <td>Current Suicidal Ideation:</td> <td><input type="checkbox"/> N <input type="checkbox"/> Y:</td> <td>Appearance/Behavior:</td> <td><input checked="" type="checkbox"/> Adequate grooming & hygiene</td> <td><input checked="" type="checkbox"/> Calm & cooperative</td> <td></td> </tr> <tr> <td>Mood/Affect:</td> <td><input checked="" type="checkbox"/> Stable affect/mood congruent</td> <td>Speech:</td> <td><input checked="" type="checkbox"/> Unremarkable</td> <td><input checked="" type="checkbox"/> Soft spoken</td> <td></td> </tr> <tr> <td>Thought Form:</td> <td><input checked="" type="checkbox"/> Goal directed</td> <td><input checked="" type="checkbox"/> Logical <input checked="" type="checkbox"/> Coherent</td> <td></td> <td>Thought Content:</td> <td><input checked="" type="checkbox"/> No evident psychosis</td> </tr> <tr> <td>Cognitive functioning:</td> <td><input checked="" type="checkbox"/> No gross cognitive deficits apparent</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		Person	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Place	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Time	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Situation	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Insight:	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good	Judgment:	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good	Sleep:	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good	Appetite:	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Good	Abnormal movements:	<input type="checkbox"/> N <input type="checkbox"/> Y:	Current Suicidal Ideation:	<input type="checkbox"/> N <input type="checkbox"/> Y:	Appearance/Behavior:	<input checked="" type="checkbox"/> Adequate grooming & hygiene	<input checked="" type="checkbox"/> Calm & cooperative		Mood/Affect:	<input checked="" type="checkbox"/> Stable affect/mood congruent	Speech:	<input checked="" type="checkbox"/> Unremarkable	<input checked="" type="checkbox"/> Soft spoken		Thought Form:	<input checked="" type="checkbox"/> Goal directed	<input checked="" type="checkbox"/> Logical <input checked="" type="checkbox"/> Coherent		Thought Content:	<input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning:	<input checked="" type="checkbox"/> No gross cognitive deficits apparent				
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Cognitive functioning:	<input checked="" type="checkbox"/> No gross cognitive deficits apparent																																										
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan Assessment: <input checked="" type="checkbox"/> Stable <input type="checkbox"/> Minimal improvement <input type="checkbox"/> Moderate improvement <input type="checkbox"/> Unchanged from last follow-up <input type="checkbox"/> Other: Provisional Diagnosis: Gender Dysphoria, Diagnosis: <input type="checkbox"/> N <input type="checkbox"/> Y: Chronic Depression																																										
P	NOTES: None																																										
E	NOTES: Edmo intends to restart her programming classes during the next block offered. She understands how to use open clinic, she will continue to attend group, and will be seen by clinical staff per her assigned level of care. TimeStamp: 7 April 2017 09:10:23 (MT) --- User: Elizabeth Adkisson (ADKEL01) STAFF: Adkisson, Elizabeth																																										

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 04/04/2017 TIME: 16:45:33(MT) DURATION: minutes TYPE: MH - Clinician - DOR Recommendation LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: TimeStamp: 4 April 2017 16:46:16 (MT) — User: Janet Linder (LINJA01) Entered MH DOR Rec
O	SCANNED DOCUMENT/PHOTO TYPE: Medical Records TITLE: Edmo MH DOR Rec NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	NOTES: None
E	NOTES: MH DOR Rec
STAFF: Linder, Janet	

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 04/04/2017 TIME: 11:28:20(MT) DURATION: minutes TYPE: Practitioner - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: bra renewal
O	NOTES: None
A	NOTES: None STANDARD FORM: MH Individualized Treatment Plan
P	MEDICAL SUPPLIES/SPECIAL EQUIPMENT: Supplement UNTIL: 04/30/2018 bra
E	NOTES: TimeStamp: 4 April 2017 11:29:14 (MT) — User: Jared Povar (POVJA01)
STAFF: Povar, Jared	

IDOC Mental Health Screening

IDOC MENTAL HEALTH SCREENING		Date Of Report: 08/26/2017
Offender Name: EDMO, MASON D.		IDOC#: 94691 DOB: ██████████
<input type="checkbox"/> Intake/New Arrival <input type="checkbox"/> Inter Institutional Transfer		<input checked="" type="checkbox"/> Restrictive Housing
Current Risk Factors	1. Did the transporting officer report any concerns? If so, please explain:	<input type="radio"/> Yes <input checked="" type="radio"/> No
	2. Right now, do you have thoughts of hurting yourself? SELF HARM	<input checked="" type="radio"/> Yes <input type="radio"/> No
	3. Do you have any <u>immediate</u> plans to hurt yourself? Describe:	<input type="radio"/> Yes <input checked="" type="radio"/> No
	4. Right now, are you currently feeling hopeless about your future?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	5. Right now, do you have any mental health symptoms or complaints? On a 1 - 10 scale with 1 being none at all and 10 being <i>extremely serious</i> ; rate your symptoms. Describe symptoms: (if rated at "5" or above, refer for clinician follow-up) Rate: Describe:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Prior Emergent Treatment	6. Within the past year have you engaged in self-harm or attempted suicide? Date Means/Method Intent	<input type="radio"/> Yes <input checked="" type="radio"/> No
	7. Within the last 24 months, have you had a mental health hospitalization or been placed on a mental health observation/watch in a correctional facility? Date Hospital/Facility Reason	<input type="radio"/> Yes <input checked="" type="radio"/> No
Suicide/Self Harm History	8. Within the last 24 months, have you engaged in self-harm or attempted suicide? Date Means/Method Intent In custody <input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Medication	9. Are you currently taking mental health medications? Name Dose/Freq Last dose Pharm Prescriber	<input type="radio"/> Yes <input checked="" type="radio"/> No
	10. Have you ever taken mental health medications in the past? Name Dose/Freq Last dose Pharm Prescriber	<input type="radio"/> Yes <input checked="" type="radio"/> No
Mental Health Treatment	11. Prior to 24 months ago, have you been hospitalized for mental health reasons? Date Hospital/Facility Reason	<input type="radio"/> Yes <input checked="" type="radio"/> No
	12. Prior to 24 months ago, have you attempted suicide or engaged in self-harm? Date Means/Method Intent In custody <input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
	13. Do you have a history of outpatient mental health treatment? Date Care Provider Reason	<input type="radio"/> Yes <input checked="" type="radio"/> No
Substance Use	14. Have you ever used any type of substances: What? First Used: Last Used: How Much?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	Have you ever experienced drug/alcohol withdrawal symptoms including: <input type="radio"/> Drenching sweats <input type="radio"/> Nausea/vomiting <input type="radio"/> Tremors <input type="radio"/> Seizures <input type="radio"/> DTs <input type="radio"/> None Are you currently experiencing any of these symptoms? Describe:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Other Contributing Suicide Risk Factors	15. Is this your first time in prison?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	16. Have any family members or significant persons in your life attempted or committed suicide?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	17. Have you recently experienced a significant loss such as a death of a close family member or friend?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	18. Have you ever been arrested for a sex crime?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	19. Have you ever been a victim of sexual or physical abuse?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	20. Have you had a head injury? Describe:	<input type="radio"/> Yes <input checked="" type="radio"/> No
	21. Have you ever received special education services?	<input type="radio"/> Yes <input checked="" type="radio"/> No
	22. Are you worried about something other than your current legal situation? Describe:	<input type="radio"/> Yes <input checked="" type="radio"/> No
	23. Do you have a physical illness that is causing you distress or pain? Describe:	<input type="radio"/> Yes <input checked="" type="radio"/> No

Current Mental Health Status (Check all that apply)	<input checked="" type="checkbox"/> Alert, Oriented X <input type="checkbox"/> Disoriented <input type="checkbox"/> Reports Hallucinations <input type="checkbox"/> Endorses Delusions			
	Grooming/Hygiene <input checked="" type="checkbox"/> Appropriate to Situation <input type="checkbox"/> Neat/Clean <input type="checkbox"/> Unkempt <input type="checkbox"/> Dirty <input type="checkbox"/> Other:	Eye Contact <input checked="" type="checkbox"/> Appropriate to Situation <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> None	Affect <input checked="" type="checkbox"/> Appropriate to Situation <input type="checkbox"/> Flat <input type="checkbox"/> No Emotion <input type="checkbox"/> Tearful <input type="checkbox"/> Smiling <input type="checkbox"/> Depressed <input type="checkbox"/> Euphoric	Mood <input checked="" type="checkbox"/> Appropriate to Situation <input type="checkbox"/> Angry <input type="checkbox"/> Cheerful <input type="checkbox"/> Calm <input checked="" type="checkbox"/> Sad <input checked="" type="checkbox"/> Hopeless <input type="checkbox"/> Anxious
	Thought Process <input checked="" type="checkbox"/> Appropriate to Situation <input type="checkbox"/> Logical <input type="checkbox"/> Goal Directed <input type="checkbox"/> Disorganized <input type="checkbox"/> Moving from topic to topic quickly <input type="checkbox"/> Irrelevant <input type="checkbox"/> Distractible	Speech <input checked="" type="checkbox"/> Appropriate to Situation <input type="checkbox"/> Rapid <input checked="" type="checkbox"/> Slow <input type="checkbox"/> Pressured <input type="checkbox"/> Slurred <input type="checkbox"/> Loud <input type="checkbox"/> Quiet <input checked="" type="checkbox"/> Rambling	Movement/Activity <input checked="" type="checkbox"/> Appropriate to Situation <input type="checkbox"/> Restless <input type="checkbox"/> Slowed <input type="checkbox"/> Active <input type="checkbox"/> Agitated <input type="checkbox"/> Aggressive	
	Breathing <input type="checkbox"/> Persistent cough <input type="checkbox"/> Hyperventilation <input type="checkbox"/> Labored/Rapid Breathing <input checked="" type="checkbox"/> Normal	Skin <input type="checkbox"/> Lesions <input type="checkbox"/> Jaundice <input type="checkbox"/> Rash <input type="checkbox"/> Infestation <input type="checkbox"/> Bruising <input type="checkbox"/> Scars <input type="checkbox"/> Tattoos <input type="checkbox"/> Needle marks or other indications of drug abuse <input checked="" type="checkbox"/> Normal		
DISPOSITION	Action Taken <input checked="" type="checkbox"/> Emergent/Urgent: Referred to the Shift Commander under Policy 315 <input type="checkbox"/> Refer to Mental Health for follow up within 24 hours <input type="checkbox"/> Refer to Mental Health for follow up within 72 hours <input type="checkbox"/> Refer to Mental Health for follow up within 14 days if indicated following clinician review <input type="checkbox"/> Refer for detoxification <input type="checkbox"/> No need Mental Health follow up - cleared		Initial Housing Recommendation <input type="checkbox"/> Cleared for general housing placement <input type="checkbox"/> Not cleared - referred for holding cell placement <input type="checkbox"/> Medical placement <input checked="" type="checkbox"/> Other placement:	
			NON ACUTE SUICIDE WATCH	
Informed Consent	I acknowledge that I have answered all questions truthfully and have been informed about how to obtain mental health services. I consent to routine mental health care provided by facility healthcare professionals.			
	Offender Signature			Date
Screener/Reviewer	Screened by:	08/26/2017 07:23:57 PM Date Time	Nicholas Hoffman / Lic. Practical Nurse Printed Name/Title	N. Hoffman HOFN101 Signature H. Maple MAPHE01
	Screening Reviewed:	08/27/2017 12:55:10 PM Date Time	Heidi Maple / Mental Clinician Printed Name/Title	Clinician Signature
	<input type="checkbox"/> MH Secondary Assessment Completed: Date Completed	Date Time	Printed Name/Title	Signature
Clinical Follow Up	Follow Up SOAP Note/If Indicated:			
	Made contact with inmate in Unit 16 as inmate was placed on NASW. Inmate stated that there was at no time any thoughts of actual self-harm. Inmate stated that there was some depression and inmate was seeking help by talking to security about past ways inmate had reacted to depressive episodes. Inmate denied SI/HI/SIB at this time and stated that inmate felt safe being in GP. Inmate also listed several coping skills and future goals for returning to GP. Inmate stated the only intent was to talk to someone about the depression. Inmate was released from all watches and referred to seek assistance with inmate's assigned clinician if needed. Inmate reported currently being prescribed MH medications and is medication compliant. Inmate will receive clinical contact per inmate's LOC. Inmate may contact MH staff during open clinic or HSR as needed.			



IDAHO DEPARTMENT OF CORRECTION
*"Protecting Idaho through Safety, Accountability,
 Partnerships And Opportunities for Offender Change"*

Notice of Failure to Attend a Scheduled Appointment

Date: 1/31/2018

Inmate: Edmo
 IDOC#: 94691

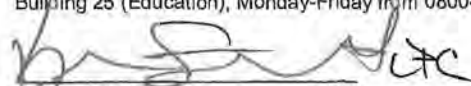
An appointment was scheduled for you with a clinician on 01/23/2018 & 01/31/2018. These appointments were listed on the institutional call out. The call out was reviewed and no institutional scheduling conflicts were present during the call out. The purpose of this meeting was to conduct one (or more) of the following:

- 60 day follow up appointment as required per assigned level of care
- Complete a treatment plan, mental health assessment, or level of care review
- Complete an assessment or report as requested by the Parole Board
- Appointment as requested by concern form, HSR, or via referral from a staff member
- Other: _____

It is your responsibility to attend appointments as scheduled on the institutional call out. As a result of your failure to attend this scheduled appointment, one (or more) of the following actions will be taken by the scheduling clinician:

- An appointment will be rescheduled in approximately 60 days for a follow up appointment with your assigned clinician as required per assigned level of care
- A treatment plan will be completed and placed in your medical file without your signature. If you wish to view this treatment plan it is your responsibility to contact your clinician and make necessary arrangements to view the treatment plan
- A non-contact review of your level of care will be completed using relevant information from your medical file, C-Notes, collateral contacts with security and clinical staff, and any other information source(s) that the reviewing clinician deems clinically significant
- The requested Parole Board assessment or report will be completed without your input due to failure to attend the appointment. This information will be notated on the requested report or assessment
- An appointment **will not** be rescheduled for this missed appointment. In order to reschedule this appointment, you must request to have the appointment rescheduled via HSR or by attending the open mental health clinic located in Building 25 (Education), Monday-Friday from 0800-0900
- Other: _____

The clinical staff of ISCI kindly reminds you that your mental health is ultimately your responsibility. If you feel you are in need of additional mental support, you are encouraged to attend an Open Mental Health Clinic located in Building 25 (Education), Monday-Friday from 0800-0900 or submit a HSR to your assigned clinician.


 K. Stewart, LPC B916

01/31/2018
 Date



IDAHO DEPARTMENT OF CORRECTION
*"Protecting Idaho through Safety, Accountability,
 Partnerships And Opportunities for Offender Change"*

Notice of Failure to Attend a Scheduled Appointment

Date: 3/13/2018

Inmate: EDMO
 IDOC#: 94691

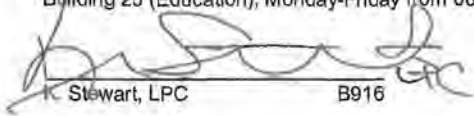
An appointment was scheduled for you with a clinician on 01/31/2018, 02/28/2018, & 03/13/2018. These appointments were listed on the institutional call out. The call out was reviewed and no institutional scheduling conflicts were present during the call out. The purpose of this meeting was to conduct one (or more) of the following:

- 60 day follow up appointment as required per assigned level of care
- Complete a treatment plan, mental health assessment, or level of care review
- Complete an assessment or report as requested by the Parole Board
- Appointment as requested by concern form, HSR, or via referral from a staff member
- Other: _____

It is your responsibility to attend appointments as scheduled on the institutional call out. As a result of your failure to attend this scheduled appointment, one (or more) of the following actions will be taken by the scheduling clinician:

- An appointment will be rescheduled in approximately 60 days for a follow up appointment with your assigned clinician as required per assigned level of care
- A treatment plan will be completed and placed in your medical file without your signature. If you wish to view this treatment plan it is your responsibility to contact your clinician and make necessary arrangements to view the treatment plan
- A non-contact review of your level of care will be completed using relevant information from your medical file, C-Notes, collateral contacts with security and clinical staff, and any other information source(s) that the reviewing clinician deems clinically significant
- The requested Parole Board assessment or report will be completed without your input due to failure to attend the appointment. This information will be notated on the requested report or assessment
- An appointment **will not** be rescheduled for this missed appointment. In order to reschedule this appointment, you must request to have the appointment rescheduled via HSR or by attending the open mental health clinic located in Building 25 (Education), Monday-Friday from 0800-0900
- Other: _____

The clinical staff of ISCI kindly reminds you that your mental health is ultimately your responsibility. If you feel you are in need of additional mental support, you are encouraged to attend an Open Mental Health Clinic located in Building 25 (Education), Monday-Friday from 0800-0900 or submit a HSR to your assigned clinician.


 K. Stewart, LPC B916

3/13/2018
 Date

MENTAL HEALTH DOR RECOMMENDATION

IDOC NUMBER	OFFENDER NAME	OFFENSE FACILITY
94691	Edmo	ISCC

OFFENSE DATE	OFFENSE DESCRIPTION	CLINICIAN
03/14/18	Unauthorized Communication 2 (Class C)	Clemens

Documented history of significant mental illness that would/could impair decision making and/or reality testing.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Presently prescribed medication for mental health issues?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
**If yes, is offender compliant?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Experienced significant increase in stressors prior to incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Documented increase in mental health symptoms prior to incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Mental illness contributing factor in incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Recommendations:		

Mental illness a mitigating factor?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Recommendations:		

Assignment of staff assistant recommended?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Mental illness not a factor in incident - no restrictions on proceedings are recommended.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Additional Recommendations:

Inmate's MH records have been reviewed. It does not appear that his MH symptoms have any contributing or mitigating factors for this specific incident.

If found guilty, he is able to complete segregation time in U8.

CLINICIAN SIGNATURE	DATE OF REPORT
<i>Clinician Clemens LMSW</i>	3/17/18

MENTAL HEALTH DOR RECOMMENDATION

IDOC NUMBER	OFFENDER NAME	OFFENSE FACILITY
94691	Edmo	ISCC

OFFENSE DATE	OFFENSE DESCRIPTION	CLINICIAN
03/14/18	Unauthorized Communication 2 (Class C)	Clemens

Documented history of significant mental illness that would/could impair decision making and/or reality testing.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Presently prescribed medication for mental health issues?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
**If yes, is offender compliant?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Experienced significant increase in stressors prior to incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Documented increase in mental health symptoms prior to incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Mental illness contributing factor in incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Recommendations:		


Mental illness a mitigating factor?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Recommendations:		

Assignment of staff assistant recommended?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Mental illness not a factor in incident - no restrictions on proceedings are recommended.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Additional Recommendations:

Inmate's MH records have been reviewed. It does not appear that his MH symptoms have any contributing or mitigating factors for this specific incident.

If found guilty, he is able to complete segregation time in U8.

CLINICIAN SIGNATURE	DATE OF REPORT
	3/17/18

MENTAL HEALTH DOR RECOMMENDATION		
IDOC NUMBER	OFFENDER NAME	OFFENSE FACILITY
94691	Edmo, Mason	ISCI
OFFENSE DATE	OFFENSE DESCRIPTION	CLINICIAN
03/30/2017	Assault	J. Llinder, LMSW 7605
Documented history of significant mental illness that would/could impair decision making and/or reality testing.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Presently prescribed medication for mental health issues.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
**If yes, is offender compliant?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Experienced significant increase in stressors prior to incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Documented increase in mental health symptoms prior to incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Mental illness contributing factor in incident?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Recommendations:		
Mental illness a mitigating factor?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Recommendations:		
Assignment of staff assistant recommended?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Mental illness not a factor in incident - no restrictions on proceedings are recommended.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Additional Recommendations:		
Apology letter to Resource Center/Stewart.		
CLINICIAN SIGNATURE		DATE OF REPORT
J. Llinder, LMSW 7605 <i>Jant Llinder, LMSW</i>		04/04/2017

Encounter Header

Date*: 05/18/2018 Start Time*: 09:13:00 AM (MT)
 End Date*: 05/18/2018 End Time*: 10:00:00 AM (MT)
 Category: Mental Health
 Type*: MH - Clinician - Individual Contact
 Location*: Iahoa State Correctional Institution [ISCI]
 Setting*: Clinic
 Staff Member*: Stewart, Krina
 Title: Mental Clinician
 Form Type: Mental Health Progress Note

Subjective

Related Health Service Requests

Request Date	Area of Interest	Request Type	Status
No Rows Found			

Subjective Notes

Met with inmate Edmo in a private office in the Education Bldg for clinical contact per LOC. Edmo reported being "okay today." Edmo reported not liking the inconsistency of the weather today, but otherwise doing alright. Edmo reported work is going well and getting along okay in Edmo's housing unit. Edmo reported requesting a single cell and is waiting for it to be approved. Edmo stated that Edmo has been feeling a little more down and decided that Edmo may benefit from a Mood Mgmt group, which is why Edmo sent a concern form reporting a change of mind and requesting to be referred to that group. Edmo was informed that Edmo was added to the group recently and is on the call-out. Edmo reported intent to watch the call-out to attend group. We discussed the new workbooks recently provided in the GD process groups and Edmo was offered one; Edmo expressed interest in the workbook and inquired about returning to group again. Edmo expressed concern about not being able to get off work for the group and was provided with a signed note to inform Edmo's supervisor of the day/time of the group and to request that Edmo be able to attend. Edmo was provided a copy of the workbook and signed the workbook agreement (see attached). Edmo reported an additional stressor of working to have communication with Edmo's husband (married in December) approved due to Edmo's husband being housed at ISCC. Edmo reports staying in touch with Edmo's mother-in-law, but is looking forward to being able to communicate with Edmo's husband directly. Edmo denied additional MH concerns at this time and reported that most things are "the same."

Mental Status Exam - Subjective

See the Patient Synopsis for current medications.

Medication compliant: Y N:

Side effects: N Y:

Inmate Comments/Chief Complaint:

Objective

Vital Signs

Time	Temp	Pulse	Resp	Height	Weight	BP Sys	BP Dia	Blood Sugar	BMI	O2	Comments
Not Taken											

Objective Notes

None

Mental Status Exam - Objective

Orientation:
 Person Y N Place Y N Time Y N Situation Y N

Insight: Poor Fair Good

Judgment: Poor Fair Good

Sleep: Poor Fair Good

Appetite: Poor Fair Good

Abnormal movements: N Y:

Current Suicidal Ideation: N Y: **Plan of action:**

Appearance/Behavior:

Adequate grooming & hygiene Calm & cooperative Angry/agitated
 Normal social rhythm Guarded Other:

Mood/Affect:

Stable affect/mood congruent Flat Expansive Dysphoric
 Euthymic mood Other:

Speech:

Unremarkable Pressured Loud Soft spoken
 Difficult to interrupt Other:

Thought Form:

Goal directed Logical Coherent Circumstantial
 Perseverative Obsessional Loosely associated Tangential
 Fragmented Other:

Thought Content:

No evident psychosis Delusional content Flight of Ideas
 Ideas of reference Auditory hallucinations Visual hallucinations
 Paranoia Other:

Cognitive functioning:

No gross cognitive deficits apparent
 Diminished ability to concentrate nearly everyday (cite Objective information to support, i.e. decline in work or school performance):
 Other:

Assessment

Active Allergies/Health Problems/Conditions (1 - 6 of 6)

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
001	Allergies - Medication	NKDA (No Known Drug Allergies)			Patient Reported	02/14/2017	
002	Other Diagnosis	Other Diagnosis	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder) 🗑️	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
003	Mental Health	Mental Health	SNOMED: 21897009 - Generalized anxiety disorder (disorder) 🗑️	Generalized anxiety disorder [F41.1]	Assessed	03/21/2017	03/21/2017
004	Mental Health	Mental Health	SNOMED: 66590003 - Alcohol dependence (disorder) 🗑️	Alcohol use disorder, Severe [F10.20]	Assessed	03/21/2017	03/21/2017
005	Mental Health	Mental Health	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder) 🗑️	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
006	Other Diagnosis	Pt. Specific Chronic Condition	SNOMED: 93461009 - Gender dysphoria (disorder) 🗑️	Gender identity disorder, unspecified [F64.9]	Assessed	05/16/2017	05/16/2017

Resolved Allergies/Health Problems/Conditions

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
No Rows Found							

Assessment Note:

Edmo continues to be very guarded when we are meeting; however, it appears that Edmo may be cautiously willing to start sharing more slowly. Edmo would benefit from continuing to work on building Edmo's resilience as a transgender individual and working through the workbook provided, particularly in a group setting to continue to encourage/support pro-social skills.

Assessment

Assessment: Stable
 Minimal improvement
 Moderate improvement
 Unchanged from last follow-up
 Other:

Provisional Diagnosis: N/A

Diagnosis: N Y

Plan

Active Drug Prescription Orders (1 - 6 of 6)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
FINASTERIDE (UD) TABS 5 Mg Tabs ↓	RxNorm: 310346 - FIN5C 5 MG Oral Tablet; Ⓢ	04/09/2018	1	EVERY DAY	07/07/2018	Received from Pharmacy
ESTRADIOL TABS 2 Mg Tabs ↓	RxNorm: 197659 - Estradiol 2 MG Oral Tablet; Ⓢ	04/05/2018	2	TWICE DAILY	10/01/2018	Received from Pharmacy
VITAMIN B COMP W-C/FA TABS Tabs ↓	RxNorm: 877466 - Ascorbic Acid 60 MG / Calcium Pantothenate 10 MG / D-BIOTIN 0.3 MG / Folic Acid 0.8... Ⓢ	02/23/2018	1	EVERY DAY	02/22/2019	Refill Ordered
MEDROXYPROGESTERONE TABS 10 Mg Tabs ↓	RxNorm: 1000114 - medroxyPROGESTERone acetate 10 MG Oral Tablet; Ⓢ	01/08/2018	1	EVERY DAY	01/07/2019	Received from Pharmacy
VENLAFAXINE HCL XR CP24 150 Mg Cp24 ↓	RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule; Ⓢ	01/05/2018	3	EVERY MORNING	08/02/2018	Received from Pharmacy
CALCIUM CARB 1250MG/VIT D TABS 1250 Mg Tabs ↓	RxNorm: 809536 - calcium carbonate 1250 MG (calcium 500 MG) / cholecalciferol 200 IU Oral Tablet; &nb... Ⓢ	10/30/2017	1	EVERY BEDTIME	10/29/2018	Received from Pharmacy

Ordered Drug Prescriptions:

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
No Rows Found						

Lab Test Orders

Lab Test Type	National HIE Code(s)	Priority	Status	Results	Value
No Rows Found					

X-Ray Orders

X-Ray Body Area	National HIE Code(s)	Priority	Status
No Rows Found			

Consultation Request

Request Type	Service Type	Priority	Status
No Rows Found			

Follow-up Appointments

Date	Time	Type	Staff	Location
No Rows Found				

Patient Transfer Holds

Type	Expiration Date	Status
No Rows Found		

Other Actions/Procedures

Group	Type	Approximate Begin Date	Approximate End Date	Specify Comments
No Rows Found				

Plan Notes

Provided Transgender workbook. Signed agreement (see attached). Provided with note for work to attend GD process group. Emailed group facilitator to reenroll Edmo in the GD group. Follow-up per LOC. Edmo may access additional MH services via HSRs and open clinics as needed.

Mental Health Progress Note - Plan

Plan:

Referral to other MH services or MH Clinician (Specify):

Ongoing Patient Education about medications and illness: N Y:

Plan for continued behavioral health treatment:

All referrals must be entered into the Consult Request area of this encounter.

Referrals entered into this encounter? N Y

Next appointment must be entered into the Follow-Up Appointments area of this encounter.

Next appointment entered into this encounter? N Y

Patient Education
Patient Education Notes
TimeStamp: 18 May 2018 10:03:15 (MT) --- User: Krina Stewart (STEKR01)

Health Classification
Medical: Unknown
SMI:
Dental:
Classification and Security Notes
None

Encounter Orders Review
Review Type*: No Review Required
Review Staff: Unknown
Review Notes
None

Scanned Documents/Photos (1 - 1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Mental Health	05/18/2018	2018_05_18 MH Workbook Agreement	Treatment Practitioner	Sensitive Information

Scanned Forms

Type	Staff
No Rows Found	

Encounter Header

Date*: 05/18/2018 Start Time*: 11:06:17 AM (MT)
 End Date*: 05/18/2018 End Time*: 11:34:18 AM (MT)
 Category: Mental Health
 Type*: MH - Psychiatrist - Scheduled
 Location*: Idaho State Correctional Institution [ISCI]
 Setting*: Clinic
 Staff Member*: Hutchison, Emily
 Title: Psychiatrist
 Form Type: Psychiatrist Progress Note

Subjective

Related Health Service Requests (1 - 1)

Request Date	Area of Interest	Request Type	Status
05/04/2018	Mental Health	Routine	Encounter Held

Subjective Notes

Request Date: 05/04/2018
 2018_5_04_HSR_1087504 MH Meds
 HSR was dated on 5/02/18 and it was received on 5/04/18.
 Inmate states on HSR that he wants to change MH med "Effexorxr" level from 450 mg to 300 mg.
 Scheduled for Psych Nurse
 TimeStamp: 4 May 2018 11:57:55 (MT) --- User: Dan Roe (ROEDA01)

Psychiatrist Progress Note - Subjective

Current housing:

- General population
- Medical observation/infirmary
- Crisis cell
- Mental Health unit
- Segregation
- Other:

Follow-up exam: Routine Urgent Emergent Patient requested

Exam conducted: On site Telemedicine

Legal/Court Status:

Current symptoms:

I'm doing "Alright," and mentions seeing a private consultant (Dr. Alviso-FMRI clinic who's treating her gender dysphoria/hormone tx) who brought up lowering Effexor dose given elevated LFTs (in Jan 2018, which resolved in Feb 2018, repeat labs ordered as well).

Anxiety is worse than depressive symptoms. Describes a cycle of several days long of having more energy then crashing for the next few days, and then repeating. When she's feeling more energy, she feels "On," with some racing thoughts, extra energy and she's more productive. She then "Crashes" for several days, with low mood, fatigue, and need for extra sleep. She cannot relate the above mood fluctuations to changes in her sleep, eating or work habits/behaviors; denies illicit drug use.

Discussed at length medication options for her, since she believes the venlafaxine is helpful for her and yet doesn't want to harm her liver. Also discussed mood stabilizers for her description of cycling moods.

Drug allergies verified: NKDA Y

See Patient Synopsis for Current Medication list.

Time	Temp	Pulse	Resp	Height	Weight	BP Sys	BP Dia	Blood Sugar	BMI	O2	Comments
10:12(MT)				5 7	202			NA	31.63		MH provider visit

Objective Note:
None

Psychiatrist Progress Note - Objective

Alert, Oriented x 3 Paranoid
 Calm/Cooperative Hypervigilant
 No Apparent Distress Distracted
 Adequate Grooming/Hygiene Agitated
 Other:

Appearance/Behavior:

Mood: Euthymic Labile Dysphoric **Affect:** Full Restricted
Suicidal Ideation: N Y
Homicidal Ideation: N Y
Speech: Normal Rate/Rhythm Pressured Slow Slurred Rapid
Thought process: Unremarkable Remarkable:
 Flight of Ideas Preservative Circumstantial
 Tangential Racing Loose Association
Thought Content: Unremarkable Remarkable:
 Delusions Obsessions Paranoid
 Compulsions Poverty of Content Visual Hallucinations
 Auditory Hallucinations Command Auditory Hallucinations
Cognitive Functioning: Unremarkable Remarkable:
 Poor Judgement Poor Insight
 Poor Impulse Control Borderline Intellectual
 Retardation Memory Not Intact

Other Findings:

Lab review: N Y:
MAR Review: N Y:

Assessment

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
001	Allergies - Medication	NKDA (No Known Drug Allergies)			Patient Reported	02/14/2017	

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
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004	Mental Health	Mental Health	SNOMED: 66590003 - Alcohol dependence (disorder)	Alcohol use disorder, Severe [F10.20]	Assessed	03/21/2017	03/21/2017
005	Mental Health	Mental Health	SNOMED: 33135002 - Recurrent major depression in partial remission (disorder)	Major depressive disorder, recurrent, in partial remission [F33.41]	Assessed	03/21/2017	03/21/2017
006	Other Diagnosis	Pt. Specific Chronic Condition	SNOMED: 93461009 - Gender dysphoria (disorder)	Gender identity disorder, unspecified [F64.9]	Assessed	05/16/2017	05/16/2017

Related Allergies/Health Problems/Conditions

ID Number	Category	Type	National HIE Code(s)	Diagnosis Code	Status	Status Date	Onset Date
No Rows Found							

Assessment Notes

None

Psychiatrist Progress Note - Assessment

Brief summary:

30 yo bio male who identifies as female, undergoing hormone treatment, who also has depression and anxiety. Based on her report today, she likely has cyclothymia with infrequent episodes of severe major depression. She acknowledges her cutting behaviors and gender dysphoria as contributing to her moods. Will honor her wishes to decrease venlafaxine, however her LFTs were not elevated at last test, thus it's unlikely that the SNRI is damaging her liver. Discussed tapering venlafaxine anyway, and then adding lithium to see if that helps stabilize her mood cycling, which she is in agreement with. Labs will be redrawn 6/16, thus with that data we can make a more informed decision regarding her liver functioning, as well as renal and thyroid.

Risk Assessment of self-harm/harm to others: Minimal Moderate High

Outcome tools:

EPS: N Y Date of AIMS:

Other:

Plan

Active Drug Prescription Orders (1 - 6 of 6)

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
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ESTRADIOL TABS 2 Mg Tabs	RxNorm: 197659 - Estradiol 2 MG Oral Tablet;	04/05/2018	2	TWICE DAILY	10/01/2018	Received from Pharmacy
VITAMIN B COMP W-C/FA TABS Tabs	RxNorm: 877466 - Ascorbic Acid 60 MG / Calcium Pantothenate 10 MG / D-BIOTIN 0.3 MG / Folic Acid 0.8...	02/23/2018	1	EVERY DAY	02/22/2019	Order Accepted at Pharmacy Vendor (SC)
MEDROXYPROGESTERONE TABS 10 Mg Tabs	RxNorm: 1000114 - medroxyPROGESTERone acetate 10 MG Oral Tablet;	01/06/2018	1	EVERY DAY	01/07/2019	Received from Pharmacy
VENLAFAXINE HCL XR CP24 150 Mg Cp24	RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule;	01/05/2018	3	EVERY MORNING	08/02/2018	Received from Pharmacy
CALCIUM CARB 1250MG/VIT D TABS 1250 Mg Tabs	RxNorm: 809536 - calcium carbonate 1250 MG (calcium 500 MG) / cholecalciferol 200 IU Oral Tablet;	10/30/2017	1	EVERY SECTIME	10/29/2018	Received from Pharmacy

Ordered Drug Prescriptions

Prescription/Medication	National HIE Code(s)	Effective Date	Dosage	Frequency	Expiration	Status
No Rows Found						

Review Notes
None

Scanned Documents/Photos				
Document Type	Date Scanned	Title	Source	Privacy Level
No Rows Found				

Standard Forms	
Type	Staff
No Rows Found	

IDAHO DEPARTMENT OF CORRECTION
Behavior Observation Log/Suicide Watch

Team #: 5
Patient IDOC #: 94691

Shift #: 5 Location: 416 SCH 31
Date: 8-26-17 Watch #: 3872

Companion Name: Geisler
Companion IDOC #: 32614

Companion Name: _____
Companion IDOC #: _____

Time	Acting Out	Sitting	Lying	Pacing	Gazing	Talking	Emotional	Stemming	Standing	Notes/Comments (Including staff checks)	Initials
17 :00											
:05											
:10											
:15											
:20											
:25											
:30											
:35											
:40											
:45											
:50											
:55											
18 :00											
:05											
:10											
:15											
:20											
:25											
:30										watch began @ 1835 HR	AG
:35		X								Sitting on bed looking ground	AG
:40		X								Sitting on bed looking ground	AG
:45					X					standing at door looking out	AG
:50					X					standing at door looking out	AG
:55					X					standing at door looking out	AG
18 31										watch began @ 1835 HR	
18 57										watch transferred from Geisler to Fallis END of ACPT	AG

Breakfast: _____ Lunch: _____ Dinner: _____ Shower: _____ Coffee: _____

IDAHO DEPARTMENT OF CORRECTION
Behavior Observation Log/Suicide Watch

Team #: 5
Patient IDOC #: 94691

Shift #: 2 Location: 16A HC31
Date: 8/27/17 Watch #: 3872

Companion Name: Minton
Companion IDOC #: 64558

Companion Name: _____
Companion IDOC #: _____

Time	Acting Out	Sitting	Lying	Pacing	Gazing	Talking	Emotional	Stemming	Standing	Notes/Comments (including staff checks)	Initials
5:00			X							Fully covered on back	
:05			X							Fully covered on back	
:10			X							Fully covered on back, movement	
:15			X							turning to face door	
:20			X							Fully covered, facing door	
:25			X							Fully covered, facing door	
:30			X							Fully covered, facing door	
:35			X							Fully covered, facing door	
:40			X							Fully covered, facing door	
:45			X							Fully covered, facing door	
:50			X							Fully covered, facing door	
:55			X							Fully covered, facing door	
6:00			X							Fully covered, facing door	
:05			X							Fully covered, facing door, movement	
:10			X							Fully covered, facing door, sitting	
:15			X							Sitting on bed	
:20			X							Fully covered, on back	
:25			X							Fully covered, on back	
:30			X							Fully covered, on back	
:35			X							Fully covered, on back	
:40			X							Fully covered, on back	
:45			X							Fully covered, on back	
:50			X							Fully covered, on back	
:55			X							Getting breakfast	
<i>Continued on next page</i>											

Breakfast: 6:35 Lunch: _____ Dinner: _____ Shower: _____ Coffee: 1

Vital Signs - 1344111												
Date	Time	Temp	Pulse	Resp	Height	Weight	Sys	Dia	Blood Sugar	Body Mass Index	O2	Comments
03/08/2018	14:10(MT)	97.9 F	96	16	5 ft 7 in	196 lb	127	74	NA	30.69	98.00	
02/23/2018	13:08(MT)	97.0 F	102	16	5 ft 7 in	195 lb	123	81	NA	30.54	100.00	
01/05/2018	08:20(MT)				5 ft 7 in	187 lb			NA	29.29	0.00	
12/27/2017	11:06(MT)	97.1 F	90	16	5 ft 7 in	189 lb	115	80	NA	29.60	99.00	
11/29/2017	08:17(MT)	97.3 F	90	16	5 ft 7 in	188 lb	123	79	NA	29.44	97.00	
10/20/2017	11:13(MT)				5 ft 7 in	182 lb			NA	28.50	0.00	
09/30/2017	13:18(MT)	98.8 F	108	16	5 ft 7 in	190 lb	117	82	NA	29.75	100.00	
08/31/2017	09:18(MT)	97.2 F	102	16	5 ft 7 in	192 lb	125	82	NA	30.07	97.00	
07/26/2017	10:30(MT)	98.5 F	81	12	5 ft 7 in	189 lb	119	82	NA	29.60	97.00	
07/25/2017	08:36(MT)				5 ft 7 in	189 lb			NA	29.60	0.00	
05/16/2017	14:06(MT)	97.9 F	84	16	5 ft 7 in	190 lb	125	79	NA	29.75	99.00	
05/02/2017	09:19(MT)				5 ft 7 in	185 lb			NA	28.97	0.00	
05/01/2017	09:09(MT)	97.6 F	93	14	5 ft 7 in	180 lb	116	76	NA	28.19	100.00	
04/18/2017	08:10(MT)	97.7 F	97	14	5 ft 7 in	180 lb	125	82	NA	28.19	97.00	

INSTITUTIONAL EYE CARE

P.O. Box 390
Lewisburg, PA 17837

(570) 523-3493
FAX (570) 524-2817

PATIENT <i>Edmo, Mason</i>			DATE <i>4/10/17</i>		
NUMBER <i>94691</i>			INSTITUTION <i>1587-814</i>		
	SPHERE	CYLINDER	AXIS	PRISM	BASE
OD	<i>-0.25</i>	<i>-0.75</i>	<i>X03</i>		
OS	<i>-0.50</i>	<i>sphere</i>			
	ADD	HEIGHT	DIST PD	NEAR PD	SBG STYLE
OD			<i>69</i>		
OS					
LENS COLOR/COATINGS					
FRAME <i>Galley</i>		STYLE <i>rick</i>		FRAME COLOR <i>gray</i>	
EYE SIZE <i>56</i>	BRIDGE	TEMPLE	HEAT	CHEM	
DATE RECD	DROP BALL		FINAL INSPECTION		

LENSES: _____

FRAME: _____

OVERSIZE: _____

TINT/PGX: _____

CHEM. TEMP. GLASS: _____

DIOPTERS: _____

S/H: _____

TOTAL DUE (\$): _____

WEAR SAFETY NOTICE:

- Your lenses meet or exceed American National Standard Z80.1 and FDA requirements 21 CFR Sec 907.410 for impact resistance but are not unbreakable or shatterproof. Of all the materials that lenses can be made from polycarbonate is the most impact resistant.

- If struck with sufficient force, the lenses can break into sharp pieces that can cause serious injury to the eye, or blindness. Even if the lenses do not break, the force of impact may cause the lenses or spectacle frame to contact the eye or surrounding area causing injury.

- The continued impact resistance of your lenses depends on how well you protect them from physical shocks and abuse. For your own protection, scratch and glued lenses should be replaced immediately.

- If your occupational or recreational activities expose you to the risk of flying objects or physical impacts, your eye safety requires special safety spectacles with safety lenses, side shields, strapped under a full face shield.

INSTITUTIONAL EYE CARE

P.O. Box 390
Lewisburg, PA 17837

(570) 523-3493
FAX (570) 524-2817

PATIENT Edmo, Mason			DATE 3/13/18		
NUMBER 94691			INSTITUTION ISC1-814		
	SPHERE	CYLINDER	AXIS	PRISM	BASE
OD	-0.25	-0.75	X03		
OS	-0.50	sph			
	ADD	HEIGHT	DIST PD	NEAR PD	SEG STYLE
OD			69		
OS					
LENS COLOR/COATINGS					
FRAME Galley		STYLE NICK		FRAME COLOR Gray	
EYE SIZE 56	BRIDGE	TEMPLE	HEAT	CHEM	
DATE REC'D		DROP BALL	FINAL INSPECTION		

LENSES: _____

FRAME: _____

OVERSIZE: _____

TINT/PGX: _____

CHEM. TEMP. GLASS: _____

DIOPTERS: _____

S/H: _____

TOTAL DUE (\$): _____

VISION SAFETY NOTICE

* Your lenses must conform to American National Standard Z80.1 and FDA requirements (21 CFR Part 801.410) for impact resistance but are not unbreakable or shatterproof. Of all the materials that lenses can be made from polycarbonate is the most break resistant.

* If struck with sufficient force, the lenses can break into sharp pieces that can cause serious injury to the eye or elsewhere. Even if the lenses do not break, the force of impact may cause the lenses or fragments to become airborne or dislodge from the eye or surrounding area causing injury.

* The continued impact resistance of your lenses depends on how well you protect them from physical abuse and abuse. For your own protection, scratched or broken lenses should be replaced immediately.

* If your occupation or recreational activities expose you to the risk of flying objects or physical impacts, your eye safety requires special safety spectacles with safety lenses, side shields, goggles or other suitable eye wear.

SCANNED



RECEIPT FOR MEDICAL PRODUCT

Inmate Name: Edmo ID: 94691
Institution: ISCI Housing Unit: 9
Medical Product: glasses/case Date Received: 5/2/17

I verify that I have received the medical product named above. I understand I am fully responsible for the care of this item. I further understand that I may be required to pay for any repair or replacement.

Edmo
Inmate Signature

K. Larsen Kelly Larsen, LPN
Signature of Health Care Staff Dispensing Product



RECEIPT FOR MEDICAL PRODUCT

Inmate Name: Edmo ID: 97691
Institution: ISC1 Housing Unit: 11
Medical Product: glasses/case Date Received: 7/9/18

I verify that I have received the medical product named above. I understand I am fully responsible for the care of this item. I further understand that I may be required to pay for any repair or replacement.

Edmo

Inmate Signature

K. Loren LPR

Signature of Health Care Staff Dispensing Product

**PERIODIC PHYSICAL EXAM
HEALTH INFORMATION
MALE OFFENDERS**

It is time for your periodic history and physical exam.

This may include:

- * An interview with a medical provider regarding your health
- * Height, weight, pulse, blood pressure and temperature
- * Heart assessment
- * Lab tests may include: cholesterol check, diabetes screen, anemia screen, infection screen
- * Vaccinations
- * Cancer screening

A review of current health practices

Provider health information

This exam may require that your blood be drawn and that you participate in a health evaluation session, which includes health related questions and a physical examination.

If you are 50 years of age or older you will have a prostate exam completed. If you do not agree to a prostate exam please inform the medical staff and sign a refusal form.

Once the results are back, you will be notified of the results of your screening tests.

There is no cost to you for this examination.

Please sign below:

Yes, I want an examination	
Name: <u>Edmo</u>	IDOC# <u>94691</u>
Date: <u>10/23/17</u>	
NO, I do not want an examination	
Name: _____	IDOC# _____
Date: _____	

WITNESS: K. Larsen Date: 10/23/17
Kelly Larsen, LPN

****See back of this form for Prostate Informed Refusal Form****

ANNUAL PHYSICAL ASSESSMENT MALE 2011

Edmo # 94691



Influenza Campaign 2017-18
Patient
 Consent or Refusal for Vaccine

DEMOGRAPHICS			
Facility <u>JSCI</u>			Inmate Number <u>94691</u>
Inmate Name <u>EDMO</u>			Date of Birth [REDACTED]
Housing Location	<input checked="" type="checkbox"/> General Population	<input type="checkbox"/> Segregation	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
	<input type="checkbox"/> Infirmary	<input type="checkbox"/> Other	
HISTORY			
1. Have you had a flu shot before? (¿Le han aplicado una inyección contra la Influenza anteriormente?)			
			<input checked="" type="radio"/> YES(SI) <input type="radio"/> NO
<i>If you answer yes to any of the following questions, we will not administer a flu shot. (Si responde "sí" a alguna de las siguientes preguntas, no le administraremos la inyección contra la Influenza.)</i>			
2. Have you ever had a severe allergic reaction to a flu shot? Guillian-Barre Syndrome (GBS)? (¿Alguna vez ha tenido una reacción alérgica grave a una inyección contra la Influenza?)			
			<input type="radio"/> YES(SI) <input checked="" type="radio"/> NO
3. Do you have a severe egg allergy? (¿Es alérgico al huevo?)			
			<input type="radio"/> YES(SI) <input checked="" type="radio"/> NO
4. Have you ever had an allergic reaction to any vaccine? (¿Ha tenido alguna reacción alérgica a alguna vacuna?)			
			<input type="radio"/> YES(SI) <input checked="" type="radio"/> NO
<i>If you answer yes to any of the following questions, we will not administer a flu shot TODAY. (Si responde "sí" a alguna de las siguientes preguntas, no le administraremos la inyección contra la Influenza HOY.)</i>			
5. Are you currently taking an antibiotic for infection? (¿Actualmente está tomando algún antibiótico para una infección?)			
			<input type="radio"/> YES(SI) <input checked="" type="radio"/> NO
6. Do you feel ill today or do you have a fever? (¿Se siente enfermo o tiene fiebre hoy?)			
			<input type="radio"/> YES(SI) <input checked="" type="radio"/> NO
I state that the above history is true and complete to the best of my knowledge. I received the Vaccine Information Statement: "Influenza (Flu) Vaccine (Inactivated or Recombinant): What You Need To Know" CDC form number 42 U.S.C. (8/07/2015) §300aa-26 on ___/___/___ and have been given the opportunity to ask questions.			
(Afirmo que los antecedentes anteriores son verdaderos y completos a mi leal saber y entender. Recibí la Declaración de Información de la Vacuna: La Influenza (gripe) vacunas inactivadas o recombinante): Lo que usted necesita saber "CDC 42 U.S.C. (8/07/2015), Sección 300aa-26, el ___/___/___ y se me dio la oportunidad de hacer preguntas.)			
<input checked="" type="checkbox"/> I understand the benefits and risks of Influenza vaccine, and ask that the vaccine be given to me. (Comprendo los beneficios y los riesgos de la vacuna contra la Influenza y solicito que se me administre).			
<input type="checkbox"/> I decline the Influenza vaccine and understand the risk of doing so. (Después de rechazar la vacuna contra el virus de la influenza y entender el riesgo de hacerlo.)			
Patient Signature (Firma del paciente) <u>[Signature]</u>			Date (Fecha) <u>10/24/2017</u>
INJECTION INFORMATION (INFORMACIÓN DE INYECCIÓN)			
Vaccine:			Manufacturer:
Lot Number:			Vaccine Expiration Date:
Site	<input checked="" type="checkbox"/> Right Deltoid	<input type="checkbox"/> Left Deltoid	Other:
Administered by: <u>[Signature]</u>	Title: <u>Kelly Larsen, LPN</u>		Date: <u>10/24/17</u>

**PERIODIC PHYSICAL EXAM
HEALTH INFORMATION
MALE OFFENDERS**

SCANNED

It is time for your periodic history and physical exam.

This may include:

- * An interview with a medical provider regarding your health
- * Height, weight, pulse, blood pressure and temperature
- * Heart assessment
- * Lab tests may include: cholesterol check, diabetes screen, anemia screen, infection screen
- * Vaccinations
- * Cancer screening

A review of current health practices

Provider health information

This exam may require that your blood be drawn and that you participate in a health evaluation session, which includes health related questions and a physical examination.

If you are 50 years of age or older you will have a prostate exam completed. If you do not agree to a prostate exam please inform the medical staff and sign a refusal form.

Once the results are back, you will be notified of the results of your screening tests.

There is no cost to you for this examination.

Please sign below:

Yes, I want an examination	
Name: <u>Edmo</u>	IDOC# <u>94691</u>
Date: <u>10/23/17</u>	
NO, I do not want an examination	
Name: <u>Edmo</u>	IDOC# <u>94691</u>
Date: <u>10/31/2017</u>	

WITNESS: Kelly Larsen Date: 10/23/17
Kelly Larsen, LPN

****See back of this form for Prostate Informed Refusal Form****

ANNUAL PHYSICAL ASSESSMENT MALE 2011

Edmo# 94691



Refusal of Clinical Services

DEMOGRAPHICS	
Inmate Name: <u>Edmo, Mason</u>	ID Number: <u>94691</u>
Facility Name: <u>ISCI</u>	Date of Birth: [REDACTED]
Housing Location: <input checked="" type="checkbox"/> General Population <input type="checkbox"/> Segregation <input type="checkbox"/> Infirmary <input type="checkbox"/> Other:	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
CURRENT CONDITION	
I, <u>Edmo, Mason</u> have been told that I have <u>MH provider appt.</u>	
Name of Inmate	
Indicating a need for _____	
The risks and benefits have been explained to me and I am refusing:	
<input type="checkbox"/> Medication (List) _____	<input type="checkbox"/> Chronic Care Clinic _____
<input type="checkbox"/> Laboratory Services _____	<input type="checkbox"/> X-Ray Services _____
<input type="checkbox"/> Physical Examination (H&P) _____	<input checked="" type="checkbox"/> Mental Health _____
<input type="checkbox"/> Other Diagnostic Tests: _____	<input type="checkbox"/> Offsite Appointments _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Sick Call _____
<input type="checkbox"/> Dental Care <input type="checkbox"/> Extraction <input type="checkbox"/> Exam <input type="checkbox"/> Other: _____	
REASON / POTENTIAL CONSEQUENCES	
Reason for refusal: <u>X money changes, everything still same</u>	
I understand there are the following possible risks, complications, and/or side effects involved in refusing clinical services.	
Potential risks explained to Patient (describe): <u>PT educated to see M.H when scheduled</u>	
ACKNOWLEDGEMENT CLAUSE	
I acknowledge that I have been fully informed of and understand the above recommendation(s), and the risks involved in refusing them. I hereby release and agree to hold harmless the City/County/State/, statutory authority, all correctional personnel, my health care provider, and all medical personnel from all responsibility and any ill effects which may result from this action/refusal and I personally assume all responsibility for my refusal.	
I understand that I will continue to have access to health care, and may resubmit a request for this service.	
SIGNATURE / WITNESS	
I understand the information on this form and have had the opportunity to ask questions.	
<u>X Edmo</u> Signature of Inmate	_____ Additional Witness (if required)
<u>4.6.18</u> <u>1009</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	_____ Date Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Date	Time
<input type="checkbox"/> Patient has refused to sign this form. This requires the signature of at least one witness in addition to that of the medical staff.	
INTERVIEWER	REFERRAL
<u>M Beck</u> Signature	Referral for additional follow up: <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>Amanda Beck</u> Printed / Stamped	Describe: _____
<u>4.6.18</u> <u>1009</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
Date	Time

I, Arree Edmo, have been given a copy of *The Queer and Transgender Resilience Workbook* by IDOC clinical staff. I acknowledge that I will only be provided with one copy of this workbook. If this workbook is lost/damaged/stolen/misplaced/etc., I am aware that I will not be provided with a second copy and will be responsible for purchasing my own replacement copy.

Edmo
Offender's Signature

5/18/18
Date

EDMO
Offender's Printed Name

[Signature]
Clinical Staff Signature

5/18/18
Date

K. Stewart LAC B916
Clinical Staff Printed Name

FMHC - Emerald Clinic
6565 W. Emerald St. Boise, ID 83704
2085142510 Fax: 2083752217

January 4, 2018

94691

Office Visit

Adree Edmo Snow
Female DOB: [REDACTED]

Home: (208) 000-0000

PID: 174233 174233/Ins: Corizon ID Correctional Inmate

01/03/2018 - Office Visit: HRT Follow up
Provider: Marvin Anthony C Alviso MD
Location of Care: FMHC - Emerald Clinic

VITAL SIGNS

Preferred Language: English

Weight: 195 lb.

Temperature: 97.3 deg F.

Pulse sitting: 91 / minute **BP sitting:** 124 / 78 (L arm)

Resp: 16 / minute

Resting O2 Sat: 99%

DEPRESSION SCREENING

HPI

Visit Type: Annual visit

PCP: Marvin Anthony C Alviso MD

Chief Complaint: HRT follow up

History of Present Illness:

MTF

Preferred Name: Adree

Preferred Pronoun: Her/She

Counselor : Yes

Physical Changes Noted

- Body structure changes which she is happy about
- slower hair growth

Mental Health Changes

- no regrets with current treatment plan
- denies any suicidal/homicidal thoughts or ideas
- reviewed suicide hotline with patient

Tucking: yes. has issues with chaffing since they are not able to wear women panties

REVIEW OF SYSTEMS:

No headaches, No fevers, no chills,

No blurry vision, no ear pain

No chest pain, no shortness of breath

FMHC - Emerald Clinic
6565 W. Emerald St. Boise, ID 83704
2085142510 Fax: 2083752217

January 4, 2018

Office Visit

Adree Edmo Snow
Female DOB: [REDACTED]

Home: (208) 000-0000
PID: 174233 174233Ins: Corizon ID Correctional Inmate

No abdominal pain, no diarrhea, no constipation
No dysuria, no urinary frequency
No lower extremity edema
No depression, no anxiety

PHYSICAL EXAM

Gen: awake, alert, NIAD
HEENT: NCAT, EOMI, no nasal d/c
Lungs: non labored breathing
Extremities/Skin: No visible rash
Neuro: CN II-XII intact, normal gait
Psych: dressed appropriately, speech not pressured

Vitals Reviewed By: Marvin Anthony C Alviso MD (January 3, 2018 2:26 PM)

Medication Reconciliation Changes:

Changed medication from ESTRADIOL 1 MG ORAL TABLET (ESTRADIOL) Take 1 tab BID to
ESTRADIOL 2 MG ORAL TABLET (ESTRADIOL) Take 2 tablets twice a day - Signed
Added new medication of MEDROXYPROGESTERONE ACETATE 5 MG ORAL TABLET
(MEDROXYPROGESTERONE ACETATE) Take 1 tab daily - Signed
Rx of ESTRADIOL 2 MG ORAL TABLET (ESTRADIOL) Take 2 tablets twice a day; #120 x 6; Signed;
Entered by: Marvin Anthony C Alviso MD ; Authorized by: Marvin Anthony C Alviso MD ; Method used:
Historical
Rx of MEDROXYPROGESTERONE ACETATE 5 MG ORAL TABLET (MEDROXYPROGESTERONE
ACETATE) Take 1 tab daily; #30 x 6; Signed; Entered by: Marvin Anthony C Alviso MD ; Authorized by:
Marvin Anthony C Alviso MD ; Method used: Historical

PAST MEDICAL HISTORY

MTF -

ASSESSMENT AND PLAN

Problem # 1: Gender dysphoria in adult (ICD-302.85) (ICD10-F64.0) - *New Problem*

MTF

NO history of intersex disorder

Medication Estradiol 6 mg, Spironolactone 150 mg BID, Finasteride 5 mg, Medroxyprogesterone 5 mg
daily

Medication changes; Increase Estradiol to 8 mg daily. Continue Finasteride, Spironolactone and
Medroxyprogesterone's current dose

Follow up Recommendations

Recommend: Vitamin supplement with Biotin .

Medical Memo for women's bras and panties if possible, per patient's request

FMHC - Emerald Clinic

6565 W. Emerald St. Boise, ID 83704
2085142510 Fax: 2083752217

January 4, 2018

Office Visit

Adree Edmo Snow

Female DOB: [REDACTED]

Home: (208) 000-0000

PID: 174233 174233Ins: Corizon ID Correctional Inmate

Please check Testosterone and Estradiol levels 1 month after being on 8 mg total daily dose. If still suboptimal (Goal of estradiol 100-200 pg/ml and testosterone < 50 nG/DL)
Please check BMP in 1 week. If normal, can increase spironolactone to 200 mg BID, Check BMP again in 1 week to make sure electrolytes are still normal

Please do not hesitate to contact me at the clinic 208 5142510 for any questions, concerns about her treatment plan

Medications: MEDROXYPROGESTERONE ACETATE 5 MG ORAL TABLET
[MEDROXYPROGESTERONE ACETATE] (Take 1 tab daily), ESTRADIOL 2 MG ORAL TABLET
[ESTRADIOL] (Take 2 tablets twice a day), SPIRONOLACTONE 50 MG ORAL TABLET
[SPIRONOLACTONE] (Take 1 tab BID), SPIRONOLACTONE 100 MG ORAL TABLET
[SPIRONOLACTONE] (Take 1 tab twice a day), FINASTERIDE 5 MG ORAL TABLET [FINASTERIDE]
(Take 1 tab daily)

Follow-Up:

Return to clinic: 12 months for: HRT follow up .

Care Management

New Orders:

- 1) Ofc Vst New Level III [99203] [CPT-99203]
- 2) Ofc Vst Est Level III [99213] [CPT-99213]

Return to clinic: 12 months for: HRT follow up .

Prescriptions:

MEDROXYPROGESTERONE ACETATE 5 MG ORAL TABLET (MEDROXYPROGESTERONE ACETATE) Take 1 tab daily #30 x 6

Entered and Authorized by: Marvin Anthony C Alviso MD
Electronically signed by: Marvin Anthony C Alviso MD on 01/03/2018
Method used: Historical
RxID: 1830607082893890

ESTRADIOL 2 MG ORAL TABLET (ESTRADIOL) Take 2 tablets twice a day #120 x 6

Entered and Authorized by: Marvin Anthony C Alviso MD
Electronically signed by: Marvin Anthony C Alviso MD on 01/03/2018
Method used: Historical
RxID: 1830607082893850

Demographics

Language: English

From:FMHC - Emerald

208 514 2511

01/04/2018 10:56

#824 P.009/032

FMHC - Emerald Clinic
6565 W. Emerald St. Boise, ID 83704
2085142510 Fax: 2083752217

January 4, 2018

Office Visit

Adree Edmo Snow
Female DOB: [REDACTED]

Home: (208) 000-0000
PID: 174233 174233Ins: Corizon ID Correctional Inmate

]

Electronically signed by Marvin Anthony C Alviso MD on 01/04/2018 at 9:53 AM

ER 2756

FMHC - The Wellness Center
The Wellness Center 6565 W. Emerald Boise, ID 83704
2085142505 Fax: 2085142504

January 22, 2018

Phone Note

Mason Edmo

Female DOB [REDACTED]

Home: (208) 000-0000

PID: 174233 174233Ins: Corizon ID Correctional Inmate

✓ 01/17/2018 - Phone Note: stop spironolactone recheck labs 1/22

Provider: Angle Jenkins RMA

Location of Care: FMHC - The Wellness Center

Status: ON HOLD DOCUMENT. Contents are preliminary

--- Converted from Care Alert ---

--- 01/17/2018 1:14 PM, Marvin Anthony C. Alviso MD wrote:

Labs are trending down, Hold Spironolactone x 5 days, Check CMP on 1/22/18

Follow-up for Phone Call

Details for Follow-up Action Taken: I tried to call nick at prison and no answer. will try a different number 424-3726. I got ahold of Nick and he will do the orders per Alviso requested. Electronically signed by Angle Jenkins RMA January 17, 2018

Additional Follow-up for Phone Call

Details for Additional Follow-up Action Taken: Weekly CMP until LFTs < 100
Then can restart Spironolactone at 25 daily.

Additional Follow-up by: Marvin Anthony C. Alviso MD (January 18, 2018 8:49 AM)

send 1-22-18

X Done

Nick Wise, RN

RECEIVED 01/09/2018 10:28PM
page 2

Jan 22 2018 07:56AM Wellness Center 2085142504

ER 2757



HEALTH SERVICES REQUEST

1122391

Chronic Care

Requester: [Redacted]

Date: JUN 26 2018

Time: 1307

Administrative Use Only		
<input type="checkbox"/> Inmate Initiated Visit	<input type="checkbox"/> Medical Issue	<input type="checkbox"/> Mental Health Issue

Patient Name: Adriano Falmo Initials: AME Inmate ID: 94691
 Date of Birth: [Redacted] Housing Location: ISCLBAC1A

I consent to be treated by health staff for the condition described below.

Inmate Signature: [Signature] Date: 6/26/2018 ^{JUN 26 2018}

Nature of Complaint/Problem: To reduce further risk to my liver I request to be prescribed estradiol cypionate (2-10 mg weekly) if denied, please send me reason for denial.

PLACE THIS SLIP IN MEDICAL BOX OR DESIGNATED AREA. Do Not Write Below This Line.
 Original - Inmate file Yellow - DOC Pink - Accounting Goldenrod - Patient

HEALTH CARE DOCUMENTATION

Mental Health care requests should be referred to mental health staff. HSR forms that indicate a threat of harm to self or others should be addressed by initiation of the suicide risk management policy.

Referred to mental health Suicide risk management policy initiated

Subjective:

Objective: BP _____ P _____ R _____ T _____ Wt _____

Assessment:

Plan:

- Inmate Education Sheet on _____ provided
- Verbal education provided on _____
- Use of Nursing Protocols Refer to: PA/NP/Physician Nurse/Corizon Mental Health Dental Optometry

Medical Signature: Kassidee Barne ^{fn} ID#: _____ Title: _____ Date: 6/26/18 Time: _____

Mental Health Signature: _____ ID#: _____ Title: _____ Date: _____ Time: _____

CP716610

Issued 09/2012, Revised 6/2017

CH550808 - Health Service Request

Name: EDMO, MASON D. IDOC#: 94691

Triage Date*: 06/26/2018 Triage Time*: 01:09:00 PM (MT)
 Received Date*: 06/26/2018 Received Time*: 01:09:00 PM (MT)
 Patient Request Date*: 06/26/2018 Patient Request Time*: 01:09:00 PM (MT)
 Location*: Idaho State Correctional Institution [ISCI]
 Reviewed by Staff*: Barney, Kassidee
 Area of Interest*: Practitioner Request Type*: Routine

Inmate Health Issue*

HSR 1122391
ESTRADIOL CHANGE R/T LIVER CONCERNS

Reviewer Comments

None

Status*: Encounter Held As of Date*: 07/02/2018

Refer to Staff*: Eldredge, Summer
 Encounter Type*: Practitioner - Review
 Appointment Scheduled Date*: 06/26/2018 Time*: 07:00:00 PM (MT)

Related Encounters

Date	Time	Area	Type	Staff	Location
07/02/2018	14:06:20(MT)	Medical Practitioner	Practitioner - Chronic Care-Follow-up	Eldredge, Summer	Idaho State Correctional Institution [ISCI]

Scanned Documents/Photos (1 - 1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Health Needs Request	06/26/2018	2018_06_26 MED CHANGE ESTRADIOL	Inmate	Sensitive Information



HEALTH SERVICES REQUEST

1122390

Chronic Care

JUN 26 2018

Administrative Use Only		
<input type="checkbox"/> Inmate Initiated Visit	<input type="checkbox"/> Medical Issue	<input type="checkbox"/> Mental Health Issue

Patient Name: Adro Edmo Initials: AME Inmate ID: 941091
 Date of Birth: [REDACTED] Housing Location: 15C1 13A09A

I consent to be treated by health staff for the condition described below.

Inmate Signature: [Signature] Date: 6/26/2018

Nature of Complaint/Problem: Today NP Summers told me my testosterone is 939 & my estrogen is 54. I request my spironolactone increased ASAP! My high testosterone is causing me: headaches, blurred vision, erections, oily skin.

PLACE THIS SLIP IN MEDICAL BOX OR DESIGNATED AREA. Do Not Write Below This Line.
 Original - Inmate file Yellow - DOC Pink - Accounting Goldenrod - Patient

HEALTH CARE DOCUMENTATION

Mental Health care requests should be referred to mental health staff. HSR forms that indicate a threat of harm to self or others should be addressed by initiation of the suicide risk management policy.

Referred to mental health Suicide risk management policy initiated

Subjective:

Objective: BP _____ P _____ R _____ T _____ Wt _____

Assessment:

Plan:

- Inmate Education Sheet on _____ provided
- Verbal education provided on _____
- Use of Nursing Protocols Refer to: PA/NP/Physician Nurse/Corizon Mental Health Dental Optometry

Medical Signature: [Signature] ID#: _____ Title: _____ Date: JUN 26 2018 Time: 1:07

Mental Health Signature: _____ ID#: _____ Title: _____ Date: _____ Time: _____

CHSS0808 - Health Service Request
 Name: EDMO, MASON D. IDOC#: 94691

Triage Date*: 06/26/2018 Triage Time*: 01:07:00 PM (MT)
 Received Date*: 06/26/2018 Received Time*: 01:07:00 PM (MT)
 Patient Request Date*: 06/26/2018 Patient Request Time*: 01:07:00 PM (MT)
 Location*: Idaho State Correctional Institution [ISCI]
 Reviewed by Staff*: Barney, Kassidee
 Area of Interest*: Practitioner Request Type*: Routine

Inmate Health Issue*
 HSR 1122390
 REQ. FOR MEDICATION INCREASE

Reviewer Comments
 PT WAS TOLD BY PROVIDER (AS NOTED IN HSR) THAT LEVELS WERE HIGH AND THAT IS THE CAUSE OF S/S THAT PT IS FEELING. PT DENIED NEED TO BE SEEN FOR SYMPTOMS HOWEVER WANTS THE ALDACTONE INCREASED R/T INFORMATION TOLD TO PT AT THAT TIME
 TimeStamp: 26 June 2018 15:22:52 (MT) --- User: Kassidee Barney (BARKA03)

Status*: Encounter Held As of Date*: 07/02/2018

Refer to Staff*: Eldredge, Summer
 Encounter Type*: Practitioner - Review
 Appointment Scheduled Date*: 06/26/2018 Time*: 06:00:00 PM (MT)

Related Encounters

Date	Time	Area	Type	Staff	Location
07/02/2018	14:06:20(MT)	Medical Practitioner	Practitioner - Chronic Care-Follow-up	Eldredge, Summer	Idaho State Correctional Institution [ISCI]

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Health Needs Request	06/26/2018	2018_06_26 HSR 1122390 MED INCREASE REQ	Inmate	Sensitive Information

CHSS0378 - Drug Prescription Order	
Name: EDMO, MASON D.	IDOC#: 94691
Ordered Date: 06/18/2018	Time: 09:07:09 AM (MT)
Encounter Type: Nurse - Verbal/Telephone Orders	
Location: Idaho State Correctional Institution [ISCI]	Staff: Wise, Nicholas
Order Number: 0237865	Rx Number: 41223630
Ordering Practitioner*: Eldredge, Summer	Sequence Number: 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary

Drug Type: SPIRONOLACTONE (UD) TABS 25 Mg Tabs
 National HIE Code(s)
 RxNorm: 313096 - Spironolactone 25 MG Oral Tablet;

Effective Date: 06/18/2018
 Generic Acceptable
 Profile Only:
 Dosage*: 1 Dosage Form: Tabs
 Strength*: 25 Mg
 Frequency*: QD-EVERY DAY
 for*: 180 days (Total duration)

Route of Administration*: PO-By Mouth Method*: Normal Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?*: No Expiration: 12/14/2018
 Delivery Trm Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 5 # Refills Issued: 0
 Received From Pharmacy: 06/19/2018
 Status*: Discontinued - Other As of Date*: 06/28/2018
 Authorized By*: Eldredge, Summer

Pharmacy Medication Substitution

Name= Same As Above

Comments

At 06/28/2018 10:01:30 a prescription order message from the Pharmacy, with a status of "Order Discontinued at Pharmacy Vendor (DR)", was not processed because the prescription status in eOMIS was "Discontinued - Other" at the time the pharmacy message was received.

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
06/27/2018	17:03(MT)	1.00	Patient Specific	Administered	
06/26/2018	18:19(MT)	0.00	Patient Specific	No Show	
06/25/2018	17:17(MT)	1.00	Patient Specific	Administered	
06/24/2018	17:43(MT)	1.00	Patient Specific	Administered	
06/23/2018	16:56(MT)	1.00	Patient Specific	Administered	
06/22/2018	17:01(MT)	1.00	Patient Specific	Administered	
06/21/2018	17:19(MT)	1.00	Patient Specific	Administered	
06/20/2018	17:16(MT)	1.00	Patient Specific	Administered	
06/19/2018	17:20(MT)	1.00	Patient Specific	Administered	
06/18/2018	18:22(MT)	0.00	Patient Specific	No Show	

Receipt Date/Time	Dispensed Qty	Received By	Status	Status Date	Substitution
06/19/2018 / 11:41:39	30.00	Brown, Lyndsey	Received from Pharmacy	06/19/2018	No substitute was dispensed.

CHSS037B - Drug Prescription Order	
Name: EDMO, MASON D.	IDOC#: 94691
Ordered Date: 06/22/2018	Time: 10:52:38 AM (MT)
Encounter Type: MH - Psychiatrist - Medication Renewal	
Location: Idaho State Correctional Institution (ISCI)	Staff: Hutchison, Emily
Order Number: 0239861	Rx Number: 41248873
Ordering Practitioner*: Hutchison, Emily	Sequence Number: 01

Prescription

Diagnosis Code*: Major depressive disorder, recurrent, in partial remission [F33.41]
 Formulary Non-Formulary

Drug Type: VENLAFAXINE HCL XR CP24 150 Mg Cp24
 National HIE Code(s):
 RxNorm: 313581 - 24 HR venlafaxine 150 MG Extended Release Oral Capsule;

Effective Date: 06/22/2018
 Generic Acceptable:
 Profile Only:
 Dosage*: 3 Dosage Form: Cp24
 Strength*: 150 MG
 Frequency*: QAM-EVERY MORNING
 for*: 210 days (Total duration)
 Route of Administration*: PO-By Mouth Method*: Dally Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: No Expiration: 01/17/2019
 Delivery Tm Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 6 # Refills Issued: 0
 Received Fm Pharmacy: 06/23/2018
 Status*: Received from Pharmacy As of Date*: 06/23/2018

Pharmacy Medication Substitution

Name= Same As Above

Comments

None

Medication Administration Record (1 of 11)

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
07/03/2018	07:10(MT)	3.00	Patient Specific	Administered	
07/02/2018	07:07(MT)	3.00	Patient Specific	Administered	
07/01/2018	08:20(MT)	3.00	Patient Specific	Administered	
06/30/2018	08:10(MT)	3.00	Patient Specific	Administered	
06/29/2018	07:18(MT)	3.00	Patient Specific	Administered	
06/28/2018	07:01(MT)	3.00	Patient Specific	Administered	
06/27/2018	07:48(MT)	3.00	Patient Specific	Administered	
06/26/2018	07:33(MT)	3.00	Patient Specific	Administered	
06/25/2018	07:05(MT)	3.00	Patient Specific	Administered	
06/24/2018	08:15(MT)	3.00	Patient Specific	Administered	
06/23/2018	08:09(MT)	3.00	Patient Specific	Administered	

Medication Receipt History (1 of 1)

Receipt Date/Time	Dispensed Qty	Received By	Status	Status Date	Substitution
06/23/2018 / 09:49:11	90.00	Harrod, Sheila	Received from Pharmacy	06/23/2018	No substitute was dispensed.

CHSS037B - Drug Prescription Order	
Name: EDMO, MASON D.	IDOC#: 9469L
Ordered Date: 06/28/2018	Time: 11:25:22 AM (MT)
Encounter Type: Nurse - Verbal/Telephone Orders	
Location: Idaho State Correctional Institution [ISCI]	Staff: Wise, Nicholas
Order Number: 0242034	Rx Number: 41276022
Ordering Practitioner*: Eldredge, Summer	Sequence Number: 01

Prescription

Diagnosis Code*: Gender identity disorder, unspecified [F64.9]
 Formulary Non-Formulary

Drug Type: SPIRONOLACTONE TABS 50 Mg Tabs
 National HIE Code(s)
 RxNorm: 198223 - Spironolactone 50 MG Oral Tablet; ⓘ

Effective Date: 06/28/2018
 Generic Acceptable:
 Profile Only:
 Dosage*: 1 Dosage Form: Tabs
 Strength*: 50 Mg
 Frequency*: BID-TWICE DAILY
 for*: 180 days (Total duration)

Route of Administration*: PO-By Mouth Method*: Normal Dose
 Pill Call* AM: Noon: PM: Bed Time:
 Keep on Person?: No Expiration: 12/24/2018
 Delivery Trn Frame*: Routine Drug on hold until:

Order Information

Pharmacy Indicated # Refills: 5 # Refills Issued: 0
 Received From Pharmacy: 06/30/2018
 Status*: Received from Pharmacy As of Date*: 06/30/2018

Pharmacy Medication Substitution

Name= Same As Above

Comments

None

Medication Administration Record 11 of 10

Date	Time	Quantity Dispensed	Source	Outcome	Comments/Addendums
07/03/2018	07:10(MT)	1.00	Patient Specific	Administered	
07/02/2018	16:46(MT)	1.00	Patient Specific	Administered	
07/02/2018	07:07(MT)	1.00	Patient Specific	Administered	
07/01/2018	16:55(MT)	1.00	Patient Specific	Administered	
07/01/2018	08:20(MT)	1.00	Patient Specific	Administered	
06/30/2018	16:52(MT)	1.00	Patient Specific	Administered	
06/30/2018	08:10(MT)	1.00	Patient Specific	Administered	
06/29/2018	17:05(MT)	1.00	Clinic Stock	Administered	
06/29/2018	07:18(MT)	1.00	Clinic Stock	Administered	
06/28/2018	17:24(MT)	1.00	Clinic Stock	Administered	

Medication Receipt History 1 of 1

Receipt Date/Time	Dispensed Qty	Received By	Status	Status Date	Substitution
06/30/2018 / 04:47:31	60.00	Harrod, Sheila	Received from Pharmacy	06/30/2018	No substitute was dispensed.



Req #: ID302,002756100013EM

Drawn By:
Thurston, Galyna

BioReference Laboratories
481 Edward H. Ross Drive
Elmwood Park, NJ 07407
(800) 229-5227



General

INSURANCE	Patient ID 94691	Housing 1100A	Fasting N	Priority Routine	ID302 Idaho State Correctional Institution 208-386-9672	
	Name Last: EDMO	First MASON	Age 30	Sex M		
	Street	Apt. #	Phone	DOB	Ordering Provider Eldredge, Summer Ordering Physician NPI # 1831557438	
	City	State	ZIP	Coll. date 06/15/2018		Time 06:25
	BILL TO:					D R D X

Code	Test
0516-5 Instructions/ Comments:	ESTRADIOL
2052-9 Instructions/ Comments:	CORIZON DIAGNOSTIC PANEL 2 - CHEM 24,HDL,CBC,T3,T4,TSH
7301-5 Instructions/ Comments:	TESTOSTERONE FREE + TOTAL

EDMO, MASON 10/29/1987 94691 002756100013 ID302 06/15/2018	EDMO, MASON 10/29/1987 94691 002756100013 ID302 06/15/2018
EDMO, MASON 10/29/1987 94691 002756100013 ID302 06/15/2018	EDMO, MASON 10/29/1987 94691 002756100013 ID302 06/15/2018
EDMO, MASON 10/29/1987 94691 002756100013 ID302 06/15/2018	EDMO, MASON 10/29/1987 94691 002756100013 ID302 06/15/2018

INTERNAL CONTROL (LAB USE ONLY)

<input type="checkbox"/> L-Lav	<input type="checkbox"/> Cultrt	<input type="checkbox"/> R-Red	<input type="checkbox"/> S-SST	<input type="checkbox"/> GY-Grey	<input type="checkbox"/> BL-Blue
<input type="checkbox"/> G-Green	<input type="checkbox"/> Y-Yellow	<input type="checkbox"/> W-PP1	<input type="checkbox"/> RB-RJ BL	<input type="checkbox"/> Strl Cup	<input type="checkbox"/> Viral C
<input type="checkbox"/> O&P	<input type="checkbox"/> BLD Cut	<input type="checkbox"/> FS-Froz	<input type="checkbox"/> Sldc	<input type="checkbox"/> Thiaprep	<input type="checkbox"/> Foruatin
<input type="checkbox"/> Rand Uln	<input type="checkbox"/> 24 Hr	<input type="checkbox"/> C-Uln Tb	<input type="checkbox"/> Timed	<input type="checkbox"/> BORICULT	<input type="checkbox"/>

Lab ID No. _____

Uric Acid	5.5		3.7-9.2	Final Results	Γ
Alk Phos	61		40-136	Final Results	Γ
(DL)/HDLc SerP)	1.54		<3.56	Final Results	Γ
CHOLESTEROL.TN LDL	88		<100	Final Results	Γ
A/G Ratio	1.4		1.1-2.9	Final Results	Γ
B0656-B	2.4		1.5-3.8	Final Results	Γ
e-GFR	123		>or=60	Final Results	Γ
e-GFR_African American	143		>or=60	Final Results	Γ
CHOLESTEROL.TOTAL /CHOLESTEROL.TN HDL	2.9		<7.4	Final Results	Γ
UREA NITROGEN/CREATININE	9.3	Below Low Normal	10.0-28.0	Final Results	Γ
WBC	4.14		3.66-10.60	Final Results	Γ
RBC	4.35		3.94-5.76	Final Results	Γ
HGB	13.7		12.0-16.9	Final Results	Γ
MCHC	33.7		31.7-35.3	Final Results	Γ
MCV	93.3		78.0-98.0	Final Results	Γ
MCH	31.5		25.8-33.1	Final Results	Γ
POLYS	27.4	Below Low Normal	34.9-75.3	Final Results	Γ
LYMPHS	57.0	Above High Normal	14.0-51.8	Final Results	Γ
EOS	7.5	Above High Normal	0.3-6.0	Final Results	Γ
BASOS	0.2		0.1-1.0	Final Results	Γ
MONOS	7.2		4.5-12.2	Final Results	Γ
RDW	12.1	Below Low Normal	12.2-15.3	Final Results	Γ
Globulin	2.8		1.7-3.7	Final Results	Γ
CHOLESTEROL.TN HDL/CHOLESTEROL.TOTAL	3.5		>14	Final Results	Γ
Glucose	101	Above High Normal	70-99	Final Results	Γ
IMMATURE GRANULOCYTES	0.2		0.0-1.0	Final Results	Γ
POLYS_ABS_COUNT	1.13	Below Low Normal	1.30-7.00	Final Results	Γ
LYMPHS_ABS_COUNT	2.36		0.80-3.00	Final Results	Γ
EOS_ABS_COUNT	0.31		0.00-0.40	Final Results	Γ
BASOS_ABS_COUNT	0.03		0.00-0.70	Final Results	Γ
MONOS_ABS_COUNT	0.20		0.00-1.00	Final Results	Γ
VLDL_CALCULATED	20		7-32	Final Results	Γ
MPV	8.4	Below Low Normal	8.6-12.1	Final Results	Γ

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received Date: 06/17/2018 Time: 02:00:36 AM (MT)
 Test Results: See Report

BIOREFERENCE LABS

PAGE 1

EDMO, WASH DC
 (1000 3100)
 BACK IN 3/20/18

Pharmacy Billing
 COLLECTION DATE: 06/15/2018 09:15
 RECEIVED DATE: 06/18/2018 00:42
 INITIAL KEYCH: DATE: 06/19/2018 01:03
 ACCESSION No.: 091191394

DESCRIPTION	RESULT	UNIT OF MEAS	REF RANGE	LAB UNIT
PANEL 205				
Total Protein	1.1		2.7-8.2	g/dL
Albumin	2.2		3.2-8.3	g/dL
Globulin	2.8		1.7-5.1	g/dL
A/G Ratio	1.4		2.7-2.0	
Glucose		g/dL		mg/dL
Sodium	144	mEq/L	137-145	mmol/L
Potassium	3.4	mEq/L	3.5-5.1	mmol/L
Chloride	101	mEq/L	95-106	mmol/L
CO2	33	mEq/L	23-31	mmol/L
BUN		mg/dL	7-21	mg/dL
Creatinine	1.02	mg/dL	0.7-1.3	mg/dL
e-GFR	123	ml/min/1.73m2	>or=60	ml/min/1.73m2
e-GFR_African American	143	ml/min/1.73m2	>or=60	ml/min/1.73m2

SBP/DBP Ratio		4.3 * LOW *	26.8-24.8	
Calcium	8.8		8.3-10.6	mg/dL
Uric Acid	5.5		2.7-9.2	mg/dL
Iron	138		65-175	ug/dL
Bilirubin, Total	0.7		0.3-1.2	mg/dL
LD	172		120-246	U/L
Alk Phos	61		40-156	U/L
ADP	25		<34	U/L
Phosphorus	4.0		2.4-5.1	mg/dL
ALT	55		10-19	U/L

NOTE: ALT results may vary (falsely depressed or elevated) in patients taking sulfasalazine (Azulfidine®) or sulfapyridine medications (Selmens Medical Device correction CRC16-06A, 6/29/17).

GGTP	38		<73	U/L
Cholesterol	165		<200	mg/dL
Triglycerides	102		<150	mg/dL
WBC	4.14		3.8-10.60	x10(3)/uL
RBC	4.39		3.9-5.76	x10(6)/uL
HGB	13.7		12.0-18.9	gm/dL
HCT	40.6		34.6-49.6	%
MCV	93.3		78.0-98.0	fL
MCH	31.9		25.8-33.1	pg
MCHC	33.7		31.7-35.3	gm/dL
RDW		12.1 * LOW *	12.2-15.3	%
POLYS		27.4 * LOW *	38.9-75.3	%
POLYS, ABS. COUNT		1.13 * LOW *	1.30-7.00	x10(3)/uL
LYMPHS		57.0 * HIGH *	14.0-51.8	%
LYMPHS, ABS. COUNT	2.36		0.80-3.00	x10(3)/uL
MONOS	7.2		4.5-12.2	%
MONOS, ABS. COUNT	0.30		0.00-1.00	x10(3)/uL
EOS		7.5 * HIGH *	0.3-6.0	%
EOS, ABS. COUNT	0.31		0.00-0.40	x10(3)/uL
BASOS	0.7		0.1-1.0	%
BASOS, ABS. COUNT	0.03		0.00-0.70	x10(3)/uL
IMMATURE GRANULOCYTES	0.2		0.0-1.0	%
PLATELET COUNT	249		140-425	x10(3)/uL
MPV		8.4 * LOW *	8.6-12.1	fL

NOTE: New reference ranges for CBC with and without diff for adult males and females implemented 6-4-18.

HDL CHOL., DIRECT	57		>40	mg/dL
Chol/HDL Ratio	2.9		<7.4	

Evaluation: BELOW AVERAGE RISK

HDL as % of Cholesterol	35		>14	%
-------------------------	----	--	-----	---

Evaluation: BELOW AVERAGE RISK

LDL/HDL Ratio	1.54		<3.50	
LDL Cholesterol	88		<100	mg/dL
VLDL, CALCULATED	28		7-32	mg/dL
Thyroxine (T4)	5.7		4.9-12.9	ug/dL
T3 Uptake (T3U)	27.9		24.3-33.0	%
TSH	1.559		0.550-4.780	uIU/mL
FREE T4 INDEX	2.4		1.5-2.8	

-- Complete --

Scanned Documents/Photos (1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	06/15/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 06/18/2018 Time: 09:00:32 PM (MT)
 Review Staff: Eldredge, Summer
 Inmate Notice:

Review Notes

TimeStamp: 18 June 2018 21:04:59 (MT) --- User: Summer Eldredge (ELDSU01)

Status: Completed - Results Reviewed

As of Date*: 05/18/2018

ER 2769

MSS5031B - Lab Test Order

Name: EDMOND, MASON D. IDOC#: 94691

Ordered Date: 06/07/2018 Time: 01:18:06 PM (MT)
 Encounter Type: Practitioner - Chronic Care-Follow-up
 Location: Idaho State Correctional Institution [ISCI] Staff: Eldredge, Summer
 Ordering Practitioner*: Eldredge, Summer

Lab Test Ordered*: Formulary Non-Formulary
 TESTOSTERONE FREE + TOTAL [BR-7301-5]
 National HIE Code(s):
 Priority*: Special (Draw-cmnts;RsIts-48h)
 Lab Schedule Date*: 06/16/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 002756100024ME

Instructions:
 None

Specimen Instructions:

Specimen Collected Date: 06/15/2018 Time: 07:25:00 AM (MT)
 Staff: Thurston, Galyna
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100013

Specimen Comments:
 None

Lab Test Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
Albumin	3.9			3.2-4.8	Final Results	<input type="checkbox"/>
TESTOSTERONE_TOT,S	939.6		Above High Normal	249.0-836.0	Final Results	<input type="checkbox"/>
SEX_HORM_BIND_GLOB	151		Above High Normal	10-57	Final Results	<input type="checkbox"/>
FREE TESTOSTERONE	65.35			30.00-150.00	Final Results	<input type="checkbox"/>

Lab Test Site: Tested Off-Site Vendor: EOHL7
 Results Received: 06/17/2018 Time: 02:00:36 AM (MT)
 Date: 06/17/2018
 Test Results: See Report

BIOREFERENCE LABS

PAGE: 1

MSS5031B (06/2008)
 IDOC#: 94691

SEX: M D/O/B: XXXXXXXXXX

Thurston, Galyna
 COLLECTION DATE: 06/15/2018 07:25
 RECEIVED DATE: 06/16/2018 06:42
 INITIAL REPORT DATE: 06/17/2018 01:42
 ACCESSION NO.: 971441394

DESCRIPTION	RESULT	UNIT OF RANGE	REF RANGE	UNIT
Testosterone Free + Total				
Albumin	3.9		3.2-4.8	g/dL
TESTOSTERONE, TOT, S	939.6	High	249.0-836.0	ng/dL

NOTE: Patients receiving the drug Nabilone cannot be tested for TESTOSTERONE, total using the EIA method (test code 007248) due to a strong interference with the drug. Clinicians are asked to request Testosterone Total by LC/MS/MS (test code JESS-0113) when patients.

SEX: M, HORM BIND, GLOB- 251 * HIGH * 10-57 nmol/L
 FREE TESTOSTERONE 65.35 -- Complete -- 30.00-350.00 pg/mL

Scanned Documents / Photos (1 - 1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	06/15/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 06/18/2018 Time: 09:00:35 PM (MT)
 Review Staff: Eldredge, Summer
 Inmate Notice:

Review Notes
 TimeStamp: 18 June 2018 21:05:05 (MT) --- User: Summer Eldredge (ELDSU01)

Status: Completed - Results Reviewed As of Date*: 06/18/2018



Req #: ID302 ,002756100014EM

Drawn By:
Ferro, Veronica

BioReference Laboratories
481 Edward H. Ross Drive
Elmwood Park, NJ 07407
(800) 229-5227



General

P I E N T I Z S U R A N C E	Patient ID	Housing	Fasting	Priority	U N I T R D X
	94691	1300A	N	Routine	
	Name Last:	First	Age	Sex	
	EDMO	MASON	30	M	
	Street	Apt. #	Phone	DOB	
City	State	ZIP	Coll. date	Time	
			06/26/2018	09:48	
BILL TO:					
ID302 Idaho State Correctional Institution 208-386-9672					
Ordering Provider Eldredge, Summer Ordering Physician NPI # 1831557438					

Code	Test
3427-2	COMP. METABOLIC (CMP)
Instructions/ Comments:	

EDMO, MASON 10/29/1987 94691 002756100014 ID302 06/26/2018	EDMO, MASON 10/29/1987 94691 002756100014 ID302 06/26/2018
EDMO, MASON 10/29/1987 94691 002756100014 ID302 06/26/2018	EDMO, MASON 10/29/1987 94691 002756100014 ID302 06/26/2018
EDMO, MASON 10/29/1987 94691 002756100014 ID302 06/26/2018	EDMO, MASON 10/29/1987 94691 002756100014 ID302 06/26/2018

INTERNAL CONTROL (LAB USE ONLY)

<input type="checkbox"/> L-Lav	<input type="checkbox"/> Cultm	<input type="checkbox"/> R-Red	<input type="checkbox"/> S-SST	<input type="checkbox"/> GY-Grey	<input type="checkbox"/> BL-Blue
<input type="checkbox"/> G-Green	<input type="checkbox"/> Y-Yellow	<input type="checkbox"/> W-PPT	<input type="checkbox"/> RB-RTBL	<input type="checkbox"/> Std Cup	<input type="checkbox"/> Viral C
<input type="checkbox"/> OAP	<input type="checkbox"/> BLD Cul	<input type="checkbox"/> FS-Froz	<input type="checkbox"/> Slide	<input type="checkbox"/> Thinprep	<input type="checkbox"/> Formalin
<input type="checkbox"/> Road Um	<input type="checkbox"/> 24 Hr	<input type="checkbox"/> U-Um Tb	<input type="checkbox"/> Timed	<input type="checkbox"/> BORICULT	<input type="checkbox"/>
Lab ID No. <input type="text"/>					

Printed: Jun 26 2018 9:44AM

Page: 1 / 1

BIOREFERENCE LABS

PAGE: -

EDMC, WASH DC
IDOC#: 94691

SEX: M D/O/B: [REDACTED]

Ferro, Veronica
COLLECTION DATE: 06/26/2018 09:48
RECEIVED DATE: 06/27/2018 11:32
INITIAL REPORT DATE: 06/27/2018 21:58
ACCESSION NO.: 971456356

DESCRIPTION	RESULT	OUT OF RANGE	REF RANGE	UNITS
Comprehensive Metabolic Panel				
Total Protein	6.6		5.7-8.2	g/dL
Albumin	4.0		3.2-4.8	g/dL
Globulin	2.6		1.7-3.7	g/dL
A/G Ratio	1.5		1.1-2.9	
Sodium	140		132-148	mmol/L
Potassium	4.3		3.5-5.5	mmol/L
Chloride	108		89-109	mmol/L
CO2	22		20-31	mmol/L
BUN	10		9-23	mg/dL
Creatinine	0.75		0.70-1.30	mg/dL
e-GFR	123		>or=60	mL/min
e-GFR, African American	143		>or=60	mL/min
BUN/Creat Ratio	13.3		10.0-28.0	
Calcium	8.9		8.3-10.6	mg/dL
Bilirubin, Total	0.5		0.3-1.2	mg/dL
Alk Phos	63		40-156	U/L
AST	21		<34	U/L
ALT	19		10-49	U/L
NOTE: ALT results may vary (falsely depressed or elevated) in patients taking sulfasalazine (Azulfidin(TM)) or sulfapyridine medications (Siemens Medical Device correction: CHC16-06A, 6/29/17).				
Glucose	83		70-99	mg/dL

-- Complete --

Scanned Documents/Photos (1 of 1)

Document Type	Date Scanned	Title	Source	Privacy Level
Lab Test Order Form	06/26/2018	Lab Test Order Form	Medical Practitioner	Sensitive Information

Standard Forms

Type	Staff	Date	Time
No Rows Found			

Results Comments

None

Results Review

Reviewed Date: 07/01/2018 Time: 02:15:58 PM (MT)
Review Staff: Eldredge, Summer
Inmate Notice:

Review Notes

TimeStamp: 1 July 2018 14:20:40 (MT) --- User: Summer Eldredge (ELDSU01)

Status: Completed - Results Reviewed

As of Date*: 07/01/2018

Name: EDMO, MASON D.		MSS031B - Lab Test Order	JDOC#: 94691											
Ordered Date: 06/28/2018 Encounter Type: Nurse - Verbal/Telephone Orders Location: Idaho State Correctional Institution [ISCI] Ordering Practitioner*: Eldredge, Summer	Time: 11:25:22 AM (MT) Staff: Wise, Nicholas													
<input checked="" type="checkbox"/> Formulary <input type="checkbox"/> Non-Formulary Lab Test Ordered*: COMP. METABOLIC (CMP) [BR-3427-2]														
National IITE Code(s) <input style="width: 100%;" type="text"/>														
Priority*: Special (Draw-cmnts;Rsults-48h) Lab Schedule Date*: 12/28/2018 Fasting*: No Recurring Frequency*: No Repeat Order Number: 002756100026ME														
Instructions														
None														
Specimen Instructions														
Specimen Collected Date: _____ Time: _____ Staff: _____ Volume: _____ Unit: _____ Specimen Source: _____														
Specimen Comments														
None														
Lab Test Results														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Observation Code</th> <th style="width: 25%;">Result</th> <th style="width: 10%;">Unit</th> <th style="width: 15%;">Abnormal Flag</th> <th style="width: 15%;">Reference</th> <th style="width: 10%;">Result Status</th> <th style="width: 10%;">Analyze</th> </tr> </thead> <tbody> <tr> <td colspan="7" style="text-align: center;">No Rows Found</td> </tr> </tbody> </table>	Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze	No Rows Found						
Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze								
No Rows Found														
Lab Test Site: _____ Vendor: _____ Results Received Date: _____ Time: _____ Test Results: _____ Value: _____														
Scanned Documents/Photos														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Document Type</th> <th style="width: 20%;">Date Scanned</th> <th style="width: 15%;">Title</th> <th style="width: 15%;">Source</th> <th style="width: 20%;">Privacy Level</th> </tr> </thead> <tbody> <tr> <td colspan="5" style="text-align: center;">No Rows Found</td> </tr> </tbody> </table>	Document Type	Date Scanned	Title	Source	Privacy Level	No Rows Found								
Document Type	Date Scanned	Title	Source	Privacy Level										
No Rows Found														
Standard Forms														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Type</th> <th style="width: 20%;">Staff</th> <th style="width: 20%;">Date</th> <th style="width: 30%;">Time</th> </tr> </thead> <tbody> <tr> <td colspan="4" style="text-align: center;">No Rows Found</td> </tr> </tbody> </table>	Type	Staff	Date	Time	No Rows Found									
Type	Staff	Date	Time											
No Rows Found														
Results Comments														
None														
Results Review														
Reviewed Date: _____ Time: _____ Review Staff: _____ Inmate Notice: _____														
Review Notes														
None														
Status: <i>Ordered</i> As of Date*: 06/28/2018														

MSS5031B - Lab Test Order

Name: EDMO, MASON D. IDOC#: 94691

Ordered Date: 06/19/2018 Time: 09:07:09 AM (MT)
 Encounter Type: Nurse - Verbal/Telephone Orders
 Location: Idaho State Correctional Institution [ISCI] Staff: Wise, Nicholas
 Ordering Practitioner*: Eldredge, Summer

Formulary Non-Formulary

Lab Test Ordered*: COMP. METABOLIC (CMP) [BR-3427-2]

National HIE Code(s):

Priority*: Rout (Draw-10days;Rsits-48hrs)
 Lab Schedule Date*: 06/26/2018
 Fasting*: No
 Recurring Frequency*: No Repeat
 Order Number: 00275610002SME

Instructions

None

Specimen Instructions

Specimen Collected Date: 06/26/2018 Time: 10:48:00 AM (MT)
 Staff: Ferro, Veronica
 Specimen Source: Blood (Venous) Volume: Unit:
 Control Number: 002756100014

Specimen Comments

None

Laboratory Results

Observation Code	Result	Unit	Abnormal Flag	Reference	Result Status	Analyze
Albumin	4.0			3.2-4.8	Final Results	<input type="checkbox"/>
Bilirubin, Total	0.5			0.3-1.2	Final Results	<input type="checkbox"/>
BUN	10			9-23	Final Results	<input type="checkbox"/>
Calcium	8.9			8.3-10.6	Final Results	<input type="checkbox"/>
CO2	22			20-31	Final Results	<input type="checkbox"/>
Chloride	108			99-109	Final Results	<input type="checkbox"/>
Creatinine	0.75			0.70-1.30	Final Results	<input type="checkbox"/>
Potassium	4.3			3.5-5.5	Final Results	<input type="checkbox"/>
Total Protein	6.6			5.7-8.2	Final Results	<input type="checkbox"/>
AST	21			<34	Final Results	<input type="checkbox"/>
ALT	19			10-49	Final Results	<input type="checkbox"/>
Sodium	140			132-146	Final Results	<input type="checkbox"/>
Alk. Phos	63			40-156	Final Results	<input type="checkbox"/>
A/G Ratio	1.5			1.1-2.9	Final Results	<input type="checkbox"/>
e-GFR	123			>or=60	Final Results	<input type="checkbox"/>
e-GFR, African American	143			>or=60	Final Results	<input type="checkbox"/>
UREA NITROGEN/CREATININE	13.3			10.0-26.0	Final Results	<input type="checkbox"/>
Globulin	2.6			1.7-3.7	Final Results	<input type="checkbox"/>
Glucose	83			70-99	Final Results	<input type="checkbox"/>

Lab Test Site: Testou Riv-Sitz Vendor: EOHL7
 Results Received: 06/23/2018 Time: 10:04:03 PM (MT)
 Date:
 Test Results: See Report

I, Alfred Edmo, have been given a copy of *The Queer and Transgender Resilience Workbook* by IDOC clinical staff. I acknowledge that I will only be provided with one copy of this workbook. If this workbook is lost/damaged/stolen/misplaced/etc., I am aware that I will not be provided with a second copy and will be responsible for purchasing my own replacement copy.

Edmo
Offender's Signature
EDMO
Offender's Printed Name

5/18/18
Date

[Signature]
Clinical Staff Signature
K. Stewart LAC B916
Clinical Staff Printed Name

5/18/18
Date



Refusal of Clinical Services

DEMOGRAPHICS	
Inmate Name: <u>1501</u>	ID Number: <u>94691</u>
Facility Name: <u>Edmo, Mason</u>	Date of Birth: [REDACTED]
Housing Location: <input checked="" type="checkbox"/> General Population <input type="checkbox"/> Segregation <input type="checkbox"/> Infirmary <input type="checkbox"/> Other:	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
CURRENT CONDITION	
I, <u>Edmo, Mason</u> <small>Name of Inmate</small> have been told that I have <u>MH appt.</u>	
indicating a need for _____	
The risks and benefits have been explained to me and I am refusing:	
<input type="checkbox"/> Medication (List) _____ <input type="checkbox"/> Laboratory Services <input type="checkbox"/> Chronic Care Clinic <input type="checkbox"/> X-Ray Services <input type="checkbox"/> Physical Examination (H&P) <input checked="" type="checkbox"/> Mental Health <input type="checkbox"/> Offsite Appointments <input type="checkbox"/> Other Diagnostic Tests: _____ <input type="checkbox"/> Sick Call <input type="checkbox"/> Other: _____ <input type="checkbox"/> Dental Care <input type="checkbox"/> Extraction <input type="checkbox"/> Exam <input type="checkbox"/> Other: _____	
REASON / POTENTIAL CONSEQUENCES	
Reason for refusal: <u>NO change - Need PHARMACY ↑ increase to US Drug</u>	
I understand there are the following possible risks, complications, and/or side effects involved in refusing clinical services. Potential risks explained to Patient (describe): <u>pt educated that refusing to see MH provider could possibly lead to discontinuation of meds & pt unable to monitor pt with meds</u>	
ACKNOWLEDGEMENT CLAUSE	
I acknowledge that I have been fully informed of and understand the above recommendation(s), and the risks involved in refusing them. I hereby release and agree to hold harmless the City/County/State/, statutory authority, all correctional personnel, my health care provider, and all medical personnel from all responsibility and any ill effects which may result from this action/refusal and I personally assume all responsibility for my refusal.	
I understand that I will continue to have access to health care, and may resubmit a request for this service.	
SIGNATURE / WITNESS	
I understand the information on this form and have had the opportunity to ask questions.	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><u>Edmo</u> Signature of Inmate</p> <p><u>10-15-18</u> <u>0848</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM Date Time</p> </div> <div style="width: 45%;"> <p>_____ Additional Witness (if required)</p> <p>_____ Date Time <input type="checkbox"/> AM <input type="checkbox"/> PM</p> </div> </div>	
<input type="checkbox"/> Patient has refused to sign this form. This requires the signature of at least one witness in addition to that of the medical staff.	
INTERVIEWER	REFERRAL
<p><u>Amber Beck RD</u> Signature</p> <p><u>Amber Beck</u> Printed / Stamped</p> <p><u>10-15-18</u> <u>0848</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM Date Time</p>	<p>Referral for additional follow up: <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Describe: _____</p>

CHSS027J - Condensed Health Services Encounter	
Name: EDMO, MASON D. IDOC#: 94691	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 07/02/2018 TIME: 14:06:20(MT) DURATION: minutes TYPE: Practitioner - Chronic Care-Follow-up LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S H/S REQUEST RECEIVED: 06/26/2018 TYPE: Routine H/S REQUEST RECEIVED: 06/26/2018 TYPE: Routine NOTES: 30 year old transgender female in for CDP appointment. Pt has filed 2 HSR's regarding GID medications - these will also be addressed today. Pt submitted one HSR requesting Estradiol Cypionate as she thinks this would be better than the PO Estradiol for her liver. Pt denies any other problems or concerns at this time	
1. GID with medications? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A with diet? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A with exercise? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	
O NOTES: A&O, NAD Liver function 6/26/18: AST 21, ALT 19 HEENT/neck: supple, no thyromegaly Heart: RRR, no MRG Lungs: CTAB with normal respiratory effort Extremities: no edema	
A NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan 1. <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P <input type="radio"/> NA <input type="radio"/> I <input checked="" type="radio"/> S <input type="radio"/> W <input type="radio"/> NA GID	
P NOTES: stable, continue Estradiol 4 mg PO BID - reviewed that the Spironolactone was causing her elevated LFT's not the estradiol so changing to an injectable form of the medication would be of no benefit to the liver per Dr. Alviso order: labs indicate pt is stable on reintroduction of Spironolactone, increase Spironolactone to 50 mg PO BID and schedule next labs in 6 months reviewed Dr. Alviso's orders with patient /u with next CDP appointment and with SC PRN - pt verbalized understanding Reviewed Lab/Procedures/Reports with Patient: <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA Indicated Treatment Plan changes discussed: <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA	
E NOTES: see plan Education Provided: <input checked="" type="checkbox"/> Nutrition <input checked="" type="checkbox"/> Exercise <input checked="" type="checkbox"/> Test Results <input checked="" type="checkbox"/> Medication Management STAFF: Eldredge, Summer	
IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/28/2018 TIME: 11:25:22(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S NOTES: Per Dr. Alviso: labs indicate patient is stable on reintroduction of spironolactone. Increase spironolactone to 50mg BID and repeat CMP, EST, and TEST in 6 months (12/28) Request Date: 06/26/2018 HSR 1122390 REQ. FOR MEDICATION INCREASE	
O NOTES: None	
A NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan	
P DRUG PRESCRIPTION: SPIRONOLACTONE TABS 50 Mg Tabs VERBAL BY: Eldredge, Summer EFFECTIVE DT: 06/28/2018 RT: PO DOSE: 1 STRENGTH: 50 Mg METHOD: Normal Dose FREQ: BID FOR: 180 DAYS EXPIRATION DATE: 12/24/2018 REFILLS: 5 STATUS: Received from Pharmacy LAB TEST ORDERED: TESTOSTERONE, TOT.,S. LAB TEST ORDERED: ESTRADIOL LAB TEST ORDERED: COMP. METABOLIC (CMP) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 12/28/2018 AT: 11:25:22(MT) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 12/28/2018 AT: 12:35:00(MT) APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 12/28/2018 AT: 12:45:00(MT) NOTES: None	
E NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:	
IDOC#: 94691 Inmate Name: EDMO, MASON D.	

ENCOUNTER DATE: 06/28/2018 TIME: 08:48:29(MT) DURATION: minutes TYPE: MH - Clinician - Open Clinic
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES:
 Met with Edmo in a private office at ISCI during open mental health clinic. Edmo reported being upset because Edmo's attorney reported to Edmo, the attorney came across a private declaration signed by Edmo's assigned clinician disclosing Edmo's mental health concerns and personal history. Edmo reported sharing the information during a clinical encounter under the understanding what Edmo disclosed would be kept confidential. Edmo said the lawyer is sending Edmo a copy of the declaration. I referred Edmo to Clinical Supervisor Watson, I dictated an email to Ms. Watson alerting her to the situation and provided Edmo with a copy for Edmo's records at Edmo's request. Edmo said Edmo will follow up with Ms. Watson by sending a concern form to schedule a meeting once Edmo has a copy of the declaration from Edmo's attorney. Edmo asked what should be done about call outs with Edmo's assigned clinician. Because of the sensitive nature of Edmo's concerns I encouraged Edmo to speak with Clinical Supervisor Watson and ask for direction. I encouraged Edmo to continue group therapy and continue the progress Edmo has made, I encouraged Edmo to try and not become emotionally reactive to this situation and to wait and see what the document is that lawyer was referring to. I told Edmo that Edmo's assigned clinician is a very professional counselor and would not willfully breach Edmo's confidence, Edmo was in agreement. Edmo also processed some of Edmo's emotions about the encounter in Unit 13 and thanked this clinician for being there and lending support to the situation. We spoke a little more about trans-phobia, and also about the fact that not everybody is going to like her or be accepting and that would be true regardless of gender identity, we spoke about what Edmo did right and if given the opportunity what Edmo might have changed to avoid the negative encounter in Unit 13 with security staff all together. We also spoke about self-love and acceptance and how powerful that can be. We did not speak of the declaration Edmo's attorney allegedly found and I informed Edmo at the start of this contact that I do not give legal advice and as a professional I will not speak about another clinician's documentation, Edmo communicated that Edmo understood.

TimeStamp: 28 June 2018 09:08:14 (MT) --- User: Elizabeth Adkisson (ADKEL01)

Medication compliant: Y N:

O NOTES: Inmate presented as alert and oriented x 4. He maintained appropriate eye contact and behavior with a cooperative attitude. His affect and mood were congruent and assessed as appropriate to situation and WNL. His speech was clear with normal rate, tone and volume. His thought process was logical and goal driven with relevant content. His insight and judgment were assessed to be normal and intact. He did not appear to be endorsing any hallucinations or delusions. No signs of SI/HI were noted.

Person <input checked="" type="radio"/> Y <input type="radio"/> N	Place <input checked="" type="radio"/> Y <input type="radio"/> N	Time <input checked="" type="radio"/> Y <input type="radio"/> N
Situation <input checked="" type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good
Sleep: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Appetite: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Abnormal movements: <input checked="" type="radio"/> N <input type="radio"/> Y:
Current Suicidal Ideation: <input checked="" type="radio"/> N <input type="radio"/> Y:	Appearance/Behavior: <input checked="" type="radio"/> Adequate grooming & hygiene	<input checked="" type="radio"/> Calm & cooperative <input type="radio"/> Normal social rhythm
Mood/Affect: <input checked="" type="radio"/> Stable affect/mood congruent	Speech: <input checked="" type="radio"/> Unremarkable	Thought Form: <input checked="" type="radio"/> Goal directed
<input checked="" type="radio"/> Logical <input checked="" type="radio"/> Coherent <input checked="" type="radio"/> Circumstantial	Thought Content: <input checked="" type="radio"/> No evident psychosis	Cognitive functioning: <input checked="" type="radio"/> No gross cognitive deficits apparent

A NOTES: Edmo presented very genuine and was open to feedback. The increase in maturity seen in Edmo was validated, and Edmo reported being happy. Edmo enjoys the work Edmo is doing in CI and it helps the time pass more quickly.
 STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan

Assessment: Stable Minimal improvement Moderate Improvement Unchanged from last follow-up Other: Provisional Diagnosis: N Y: Clinical Contact

P NOTES:
 Edmo was asked to follow up with clinical supervisor Watson and I informed Edmo that I was reading Ms. Watson in on this encounter so she can be in the loop as Edmo's concerns are processed and resolved. Edmo said that would be fine.

TimeStamp: 28 June 2018 09:17:32 (MT) --- User: Elizabeth Adkisson (ADKEL01)

E NOTES: Edmo will obtain a copy of the declaration and speak with Clinical Supervisor Watson.
 STAFF: Adkisson, Elizabeth

IDOC#: 94691 Inmate Name: EDMO, MASON D.
 ENCOUNTER DATE: 06/26/2018 TIME: 18:19:57(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact
 LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S NOTES:
 Met with Edmo in Unit 08 at the request of Sgt. Martin after Edmo was sent to Unit 08 for wearing makeup. Sgt. Martin asked Edmo to wash it off and Edmo was compliant with Sgt. Martin's request. Edmo responded appropriately and respectfully to Sgt. Martin in my presence but was visibly upset. Sgt. Martin called the clinician because he was worried about Edmo stability, I walked with Edmo back to Unit 13, Edmo said officer Hunt had told Edmo that Edmo's makeup made Edmo look like a slut and told Edmo to go wash it off. Edmo went back to Edmo's cell to wash the face but wanted to know why officer Hunt called Edmo a slut. Edmo said Edmo no sooner walked off the tier when officer Hunt put Edmo up against the wall, handcuffed Edmo and took Edmo to Unit 08. Edmo said it was never Edmo's intention to be confrontational, Edmo said Edmo likes living in Unit 13 and working at CI has given Edmo a higher sense of purpose. When I escorted Edmo back into Unit 13 Edmo had to report that Edmo left Edmo's ID in CI. Officer Hunt was there and continued to speak to Edmo in a less than professional manner. Edmo did not respond back, Edmo kept Edmo's gaze toward the floor and just asked respectfully when Edmo could be cleared to go to CI and get Edmo's ID.

TimeStamp: 26 June 2018 18:30:57 (MT) --- User: Elizabeth Adkisson (ADKEL01)

O NOTES: Edmo was upset over the make-up incident and agreed Sgt. Martin handled it well. Edmo was tearful because of the way Edmo has been approached by officer Hunt. Edmo denies feeling suicidal or like Edmo wants to self-harm.

Person <input checked="" type="radio"/> Y <input type="radio"/> N	Place <input checked="" type="radio"/> Y <input type="radio"/> N	Time <input checked="" type="radio"/> Y <input type="radio"/> N
Situation <input checked="" type="radio"/> Y <input type="radio"/> N	Insight: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Judgment: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good

Sleep: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Appetite: <input type="radio"/> Poor <input type="radio"/> Fair <input checked="" type="radio"/> Good	Abnormal movements: <input type="radio"/> N <input type="radio"/> Y:
Current Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y:	Appearance/Behavior: <input checked="" type="checkbox"/> Adequate grooming & hygiene	<input checked="" type="checkbox"/> Calm & cooperative <input checked="" type="checkbox"/> Normal social rhythm
Mood/Affect: <input checked="" type="checkbox"/> Stable affect/mood congruent	Speech: <input checked="" type="checkbox"/> Unremarkable	Thought Form: <input checked="" type="checkbox"/> Goal directed
<input checked="" type="checkbox"/> Logical <input checked="" type="checkbox"/> Coherent	Thought Content: <input checked="" type="checkbox"/> No evident psychosis	Cognitive functioning: <input checked="" type="checkbox"/> No gross cognitive deficits apparent

A NOTES:

Edmo reported feeling powerless, we talked about transphobic people and the attitude Edmo encountered in Officer Hunt may be similar to what Edmo will face in the community. I focused on what Edmo did right and that was not responding and rising above the situation. Edmo remarked that it is hard sometimes to do the right thing. Edmo did have makeup on and did take responsibility for that but also pointed out that there is no policy official documented that states Transgender inmates cannot wear makeup. Edmo went on to say the makeup does not define Edmo and if wearing it is going to cause the problems Edmo encountered today and risk Edmo's housing and job, Edmo would rather not wear it. Edmo reported being released soon.

TimeStamp: 26 June 2018 18:35:41 (MT) --- User: Elizabeth Adkisson (ADKEL01)

STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan

Assessment: <input checked="" type="radio"/> Stable <input type="radio"/> Minimal improvement <input type="radio"/> Moderate improvement <input type="radio"/> Unchanged from last follow-up <input type="radio"/> Other:	Provisional Diagnosis: <input type="radio"/> N <input type="radio"/> Y:
	Diagnosis: Clinical Contact

P NOTES:

Edmo will continue to attend group and work on coping skills to overcome difficult situations and people.

TimeStamp: 26 June 2018 18:36:21 (MT) --- User: Elizabeth Adkisson (ADKEL01)

E NOTES:

Edmo will report to Edmo's assigned clinician if Edmo begins to feel an increase in mental health symptoms.

TimeStamp: 26 June 2018 18:37:01 (MT) --- User: Elizabeth Adkisson (ADKEL01)

STAFF: Adkisson, Elizabeth

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/22/2018 TIME: 10:52:38(MT) DURATION: minutes TYPE: MH - Psychiatrist - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S NOTES: This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.
O NOTES: None
A NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan
P DRUG PRESCRIPTION: VENLAFAXINE HCL XR CP24 150 Mg Cp24 VERBAL BY: Hutchison, Emily EFFECTIVE DT: 06/22/2018 RT: PO DOSE: 3 STRENGTH: 150 MG METHOD: Daily Dose FREQ: QAM FOR: 210 DAYS EXPIRATION DATE: 01/17/2019 REFILLS: 6 STATUS: Received from Pharmacy
NOTES: None
E NOTES: None
STAFF: Hutchison, Emily

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/22/2018 TIME: 10:40:04(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic		
S NOTES: reviewed last note in May		
Current symptoms: Has had an uptick in symptoms, including some SI thoughts (no planning or preparatory behaviors). Requests going back up on venlafaxine given increase in symptoms and history of relief at dose of 450 mg daily. She mentions doing some cutting about 3 weeks ago. She says she can manage the sleep and agitation changes (s/e from venlafaxine) more than her SI. Says she's trying some other skills to manage her dysphoria (in lieu of cutting). Says "Something is there that is deeper than self esteem." She has h/o cutting her penis and requiring medical care/hospitalization.		
O NOTES: None		
<input checked="" type="checkbox"/> Alert, Oriented x 3 <input checked="" type="checkbox"/> Calm/Cooperative <input checked="" type="checkbox"/> No Apparent Distress <input checked="" type="checkbox"/> Adequate Grooming/Hygiene		
Appearance/Behavior: wearing makeup, has long hair pulled back		
Mood: <input type="radio"/> Euthymic <input type="radio"/> Labile <input type="radio"/> Dysphoric Affect: <input type="radio"/> Full <input type="radio"/> Restricted		
Suicidal Ideation: <input type="radio"/> N <input type="radio"/> Y	Homicidal Ideation: <input type="radio"/> N <input type="radio"/> Y	Speech: <input checked="" type="checkbox"/> Normal Rate/Rhythm
Thought process: <input type="radio"/> Unremarkable <input type="radio"/> Remarkable:	Thought Content: <input type="radio"/> Unremarkable <input type="radio"/> Remarkable:	Cognitive Functioning: <input type="radio"/> Unremarkable <input type="radio"/> Remarkable:
A NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan		
Brief summary: 30 yo bio male who identifies as female, undergoing hormone treatment, who also has depression and anxiety. Based on her report today, she likely has cyclothymia with infrequent episodes of severe major depression. She acknowledges her cutting behaviors and gender dysphoria as contributing to her moods. Given her increase in symptoms, will increase venlafaxine back up to prior levels, as it's unlikely to have affected her liver/LFTs since she has	Risk Assessment of self-harm/harm to others: <input type="radio"/> Minimal <input type="radio"/> Moderate <input type="radio"/> High	

	since normalized while continuing to take the SNRI. Will assess her response to this and continue with conversation about possible addition of mood stabilizer to help with cycling moods.
P	NOTES: Increase venlafaxine to 450 mg po daily. Will continue to monitor LFTs (they're wnl as of 6/1/2018) RTC 3 months MEDICATION DISCONTINUED VIA THIS ENCOUNTER- Medication Name: 'VENLAFAXINE HCL XR CP24', Order Number: 0227952, Authorized By: Hutchison, Emily. Timestamp: 06/22/2018 09:52:38
E	NOTES: med effects, trying to identify triggers, sensations of how she feels leading up to her feeling hopeless and impulsive with self harming activities
	STAFF: Hutchison, Emily
	IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/18/2018 TIME: 09:07:09(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S	NOTES: Per Alviso/HRT clinic: after recent labs, pt may restart spironolactone again at 25mg QD repeat CMP one week.
O	NOTES: None
A	NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan
P	DRUG PRESCRIPTION: SPIRONOLACTONE (UD) TABS 25 Mg Tabs VERBAL BY: Eldredge, Summer EFFECTIVE DT: 06/18/2018 RT: PO DOSE: 1 STRENGTH: 25 Mg METHOD: Normal Dose FREQ: QD FOR: 180 DAYS EXPIRATION DATE: 12/14/2018 REFILLS: 5 STATUS: Discontinued - Other LAB TEST ORDERED: COMP. METABOLIC (CMP) LAB INSTRUCTIONS: None APPT SCHEDULED: Lab WITH: Wise, Nicholas ON: 06/26/2018 AT: 09:07:09(MT) NOTES: None
E	NOTES: admin only STAFF: Wise, Nicholas NURSE SIGNATURE:
	IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/15/2018 TIME: 10:07:58(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S	NOTES: Pt signed refusal for MH appointment
O	SCANNED DOCUMENT/PHOTO TYPE: Medical Records TITLE: 2018_6_15 Refusal for MH appointment NOTES: None
A	NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan
P	NOTES: None
E	NOTES: TimeStamp: 15 June 2018 10:13:24 (MT) --- User: Amanda Beck (BECAM01) STAFF: Beck, Amanda
	IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/11/2018 TIME: 09:29:31(MT) DURATION: minutes TYPE: Nurse - Verbal/Telephone Orders LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S	NOTES: VO per Alviso to stop progesterone per patient request. Do not restart spironolactone until after upcoming labs are sent to Alviso 6/19/18
O	NOTES: None
A	NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan
P	NOTES: None
E	NOTES: None STAFF: Wise, Nicholas NURSE SIGNATURE:
	IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/06/2018 TIME: 08:21:55(MT) DURATION: minutes TYPE: Nurse - EKG LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic
S	NOTES: TimeStamp: 6 June 2018 08:26:19 (MT) --- User: Galyna Thurston (THUGA01)
O	SCANNED DOCUMENT/PHOTO TYPE: Medical Records TITLE: 2018 EKG NOTES: None
A	NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan
P	NOTES: None
E	NOTES: TimeStamp: 6 June 2018 08:26:28 (MT) --- User: Galyna Thurston (THUGA01) STAFF: Thurston, Galyna NURSE SIGNATURE:
	IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/06/2018 TIME: 08:20:26(MT) DURATION: minutes TYPE: Nurse - EKG LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S	NOTES: TimeStamp: 6 June 2018 08:24:46 (MT) --- User: Galyna Thurston (THUGA01)
O	SCANNED DOCUMENT/PHOTO TYPE: Medical Records TITLE: 2018 EKG NOTES: None
A	NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan
P	NOTES: None
E	NOTES: TimeStamp: 6 June 2018 08:24:55 (MT) --- User: Galyna Thurston (THUGA01)
	STAFF: Thurston, Galyna NURSE SIGNATURE: _____

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 06/01/2018 TIME: 13:16:06(MT) DURATION: minutes TYPE: Practitioner - Chronic Care-Follow-up LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: 30 year old transgender female in for CDP appointment. Pt reports that she does not like taking the Progesterone as it is making her feel bloated and she has started to gain weight since starting this medication. Pt reports that she would like to review the possibility of restarting Spironolactone as she feels like her testosterone levels are elevated, this medication was discontinued due to elevated LFT's - her LFT's did return to normal after the medication was discontinued, she reports that she had been on the Spironolactone for 7 years prior to this.
	1. GID Chest pain? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Palpitations? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No SOB? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Ankle edema? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No with medications? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A with diet? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A with exercise? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
O	NOTES: A&O, NAD HEENT/neck: supple, no thyromegaly Heart: RRR, tachycardia, no MRG Lungs: CTAB with normal respiratory effort Extremities: no edema
A	NOTES: 1. GID 2. persistently elevated HR STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan 1. <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> F <input checked="" type="checkbox"/> P <input type="checkbox"/> NA <input type="checkbox"/> I <input checked="" type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> NA GID
P	LAB TEST ORDERED: CORIZON DIAGNOSTIC PANEL 2 - CHEM 24,HDL,CBC,T3,T4,TSH LAB INSTRUCTIONS: None LAB TEST ORDERED: TESTOSTERONE FREE + TOTAL LAB INSTRUCTIONS: None APPT SCHEDULED: Nurse - EKG WITH: Thurston, Galyna ON: 06/11/2018 AT: 16:48:00(MT) APPT SCHEDULED: Lab WITH: Eldredge, Summer ON: 06/16/2018 AT: 13:16:06(MT) APPT SCHEDULED: Lab WITH: Eldredge, Summer ON: 06/16/2018 AT: 14:16:00(MT) APPT SCHEDULED: Practitioner - Chronic Care-Follow-up WITH: Eldredge, Summer ON: 07/02/2018 AT: 16:50:00(MT) NOTES: 1. Dr. Alviso will be notified that she is not doing well on the Progesterone and would like to discontinue this medication, pt has labs scheduled in the next 2-3 weeks - these results will be forwarded to Dr. Alviso for review and further recommendations, we will also advise Dr. Alviso that she would like to restart the Spironolactone - reviewed that Dr. Alviso makes all recommendations regarding HRT. A testosterone level will be added to her next labs 2. obtain EKG pt is asymptomatic - f/u with next CDP appointment f/u with CDP after next lab results are available
	Reviewed Lab/Procedures/Reports with Patient: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA Indicated Treatment Plan changes discussed: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
E	NOTES: see plan Education Provided: <input checked="" type="checkbox"/> Nutrition <input checked="" type="checkbox"/> Exercise <input checked="" type="checkbox"/> Test Results <input checked="" type="checkbox"/> Medication Management STAFF: Eldredge, Summer

IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 05/18/2018 TIME: 11:26:15(MT) DURATION: minutes TYPE: MH - Psychiatrist - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic	
S	NOTES: This encounter was system generated when the prescription drug below was reordered from the Drug Prescription Order screen CHSS037B.
O	NOTES: None
A	NOTES: None STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan
P	DRUG PRESCRIPTION: VENLAFAXINE HCL XR CP24 150 Mg Cp24 VERBAL BY: Hutchison, Emily EFFECTIVE DT: 05/18/2018 RT: PO DOSE: 2 STRENGTH: 150 MG METHOD: Daily Dose FREQ: QAM FOR: 210 DAYS EXPIRATION DATE: 12/13/2018 REFILLS: 6 STATUS: Discontinued - Other NOTES: None

E NOTES: None
STAFF: Hutchison, Emily

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 05/18/2018 TIME: 11:06:17(MT) DURATION: minutes TYPE: MH - Psychiatrist - Scheduled
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

S H/S REQUEST RECEIVED: 05/04/2018 TYPE: Routine
NOTES: Request Date: 05/04/2018

2018_5_04_HSR_1087504 MH Meds
HSR was dated on 5/02/18 and it was received on 5/04/18.
Inmate states on HSR that he wants to change MH med "Effexorxr" level from 450 mg to 300 mg.
Scheduled for Psych Nurse

TimeStamp: 4 May 2018 11:57:55 (MT) --- User: Dan Roe (ROEDA01)

Current symptoms: I'm doing "Alright," and mentions seeing a private consultant (Dr. Alviso- FMRI clinic who's treating her gender dysphoria/hormone tx) who brought up lowering Effexor dose given elevated LFTs (in Jan 2018, which resolved in Feb 2018, repeat labs ordered as well). Anxiety is worse than depressive symptoms. Describes a cycle of several day's long of having more energy then crashing for the next few days, and then repeating. When she's feeling more energy, she feels "On," with some racing thoughts, extra energy and she's more productive. She then "Crashes" for several days, with low mood, fatigue, and need for extra sleep. She cannot relate the above mood fluctuations to changes in her sleep, eating or work habits/behaviors; denies illicit drug use. Discussed at length medication options for her, since she believes the venlafaxine is helpful for her and yet doesn't want to harm her liver. Also discussed mood stabilizers for her description of cycling moods.

O NOTES: None
 Alert, Oriented x 3 Calm/Cooperative No Apparent Distress Adequate Grooming/Hygiene
Mood: Euthymic Labile Dysphoric Affect: Full Restricted Suicidal Ideation: N Y
Homicidal Ideation: N Y Speech: Normal Rate/Rhythm Thought process: Unremarkable Remarkable:
Thought Content: Unremarkable Remarkable Cognitive Functioning: Unremarkable Remarkable:

A NOTES: None
STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan

Brief summary: 30 yo bio male who identifies as female, undergoing hormone treatment, who also has depression and anxiety. Based on her report today, she likely has cyclothymia with infrequent episodes of severe major depression. She acknowledges her cutting behaviors and gender dysphoria as contributing to her moods. Will honor her wishes to decrease venlafaxine, however her LFTs were not elevated at last test, thus it's unlikely that the SNRI is damaging her liver. Discussed tapering venlafaxine anyway, and then adding lithium to see if that helps stabilize her mood cycling, which she is in agreement with. Labs will be redrawn 6/16, thus with that data we can make a more informed decision regarding her liver functioning, as well as renal and thyroid.

P NOTES:
Reduce dose of venlafaxine to 300 mg po daily; will then try to reduce further to 150 mg po given her concerns over liver function tests (after follow up in mid-July) IF her mood and anxiety are stable.
Will likely start lithium in 1.5 months, after evaluating how she dose with reduced venlafaxine. She wants to read up on and think about lithium for a while, thus it's not being started today.
RTC ~ mid-July
MEDICATION DISCONTINUED VIA THIS ENCOUNTER- Medication Name: 'VENLAFAXINE HCL XR CP24', Order Number: 0183016, Authorized By: Hutchison, Emily. Timestamp: 05/18/2018 10:26:14

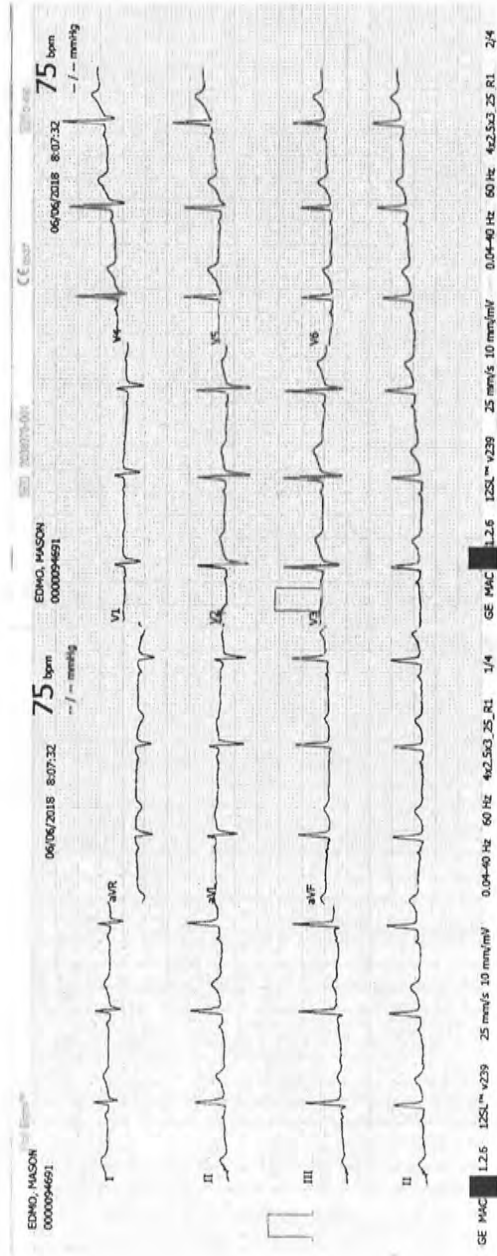
E NOTES: med effects: indications and s/e of lithium treatment; w/d aspects of venlafaxine
STAFF: Hutchison, Emily

IDOC#: 94691 Inmate Name: EDMO, MASON D.
ENCOUNTER DATE: 05/18/2018 TIME: 09:13:00(MT) DURATION: minutes TYPE: MH - Clinician - Individual Contact
LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic

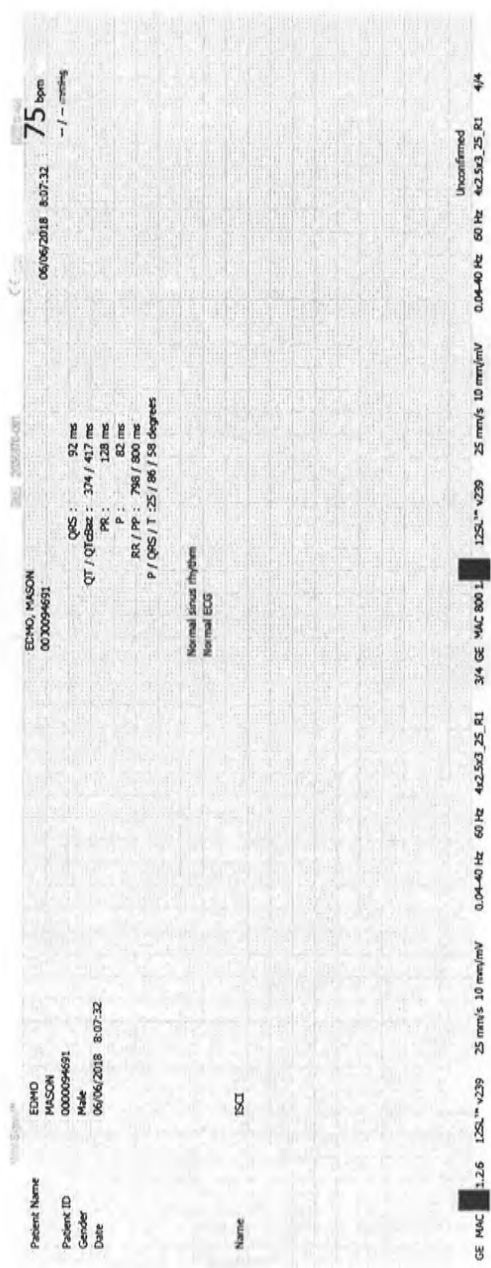
S NOTES: Met with inmate Edmo in a private office in the Education Bldg for clinical contact per LOC. Edmo reported being "okay today." Edmo reported not liking the inconsistency of the weather today, but otherwise doing alright. Edmo reported work is going well and getting along okay in Edmo's housing unit. Edmo reported requesting a single cell and is waiting for it to be approved. Edmo stated that Edmo has been feeling a little more down and decided that Edmo may benefit from a Mood Mgmt group, which is why Edmo sent a concern form reporting a change of mind and requesting to be referred to that group. Edmo was informed that Edmo was added to the group recently and is on the call-out. Edmo reported intent to watch the call-out to attend group. We discussed the new workbooks recently provided in the GD process groups and Edmo was offered one; Edmo expressed interest in the workbook and inquired about returning to group again. Edmo expressed concern about not being able to get off work for the group and was provided with a signed note to inform Edmo's supervisor of the day/time of the group and to request that Edmo be able to attend. Edmo was provided a copy of the workbook and signed the workbook agreement (see attached). Edmo reported an additional stressor of working to have communication with Edmo's husband (married in December) approved due to Edmo's husband being housed at ISCC. Edmo reports staying in touch with Edmo's mother-in-law, but is looking forward to being able to communicate with Edmo's husband directly. Edmo denied additional MH concerns at this time and reported that most things are "the same."

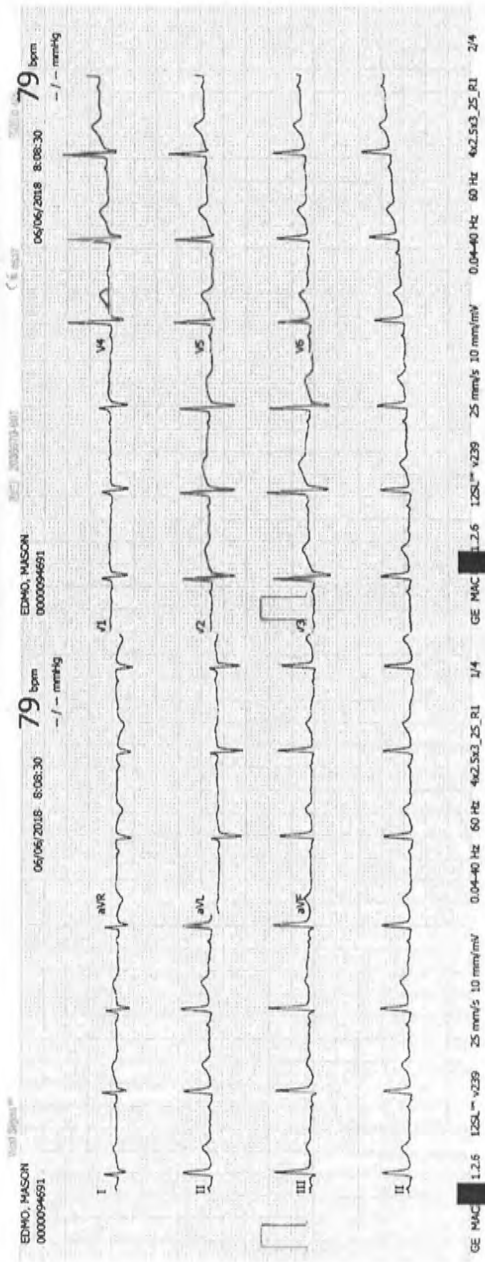
O SCANNED DOCUMENT/PHOTO TYPE: Mental Health TITLE: 2018_05_18 MH Workbook Agreement
NOTES: None
Person Y N Place Y N Time Y N
Situation: Y N Insight: Poor Fair Good Judgment: Poor Fair Good
Abnormal movements: N Y: Current Suicidal Ideation: N Y: Appearance/Behavior: Adequate grooming & hygiene
 Guarded Dysphoric Speech: Unremarkable Thought Form: Goal directed
 Logical Thought Content: No evident Cognitive functioning: No gross cognitive deficits apparent

psychosis	
A	<p>NOTES: Edmo continues to be very guarded when we are meeting; however, it appears that Edmo may be cautiously willing to start sharing more slowly. Edmo would benefit from continuing to work on building Edmo's resilience as a transgender individual and working through the workbook provided, particularly in a group setting to continue to encourage/support pro-social skills.</p> <p>STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan</p>
	Provisional Diagnosis: N/A
P	<p>NOTES: Provided Transgender workbook. Signed agreement (see attached). Provided with note for work to attend GD process group. Emailed group facilitator to reenroll Edmo in the GD group. Follow-up per LOC. Edmo may access additional MH services via HSRs and open clinics as needed.</p>
E	<p>NOTES:</p> <p>TimeStamp: 18 May 2018 10:03:15 (MT) --- User: Krina Stewart (STEKR01)</p>
	STAFF: Stewart, Krina
<p>IDOC#: 94691 Inmate Name: EDMO, MASON D. ENCOUNTER DATE: 05/14/2018 TIME: 17:12:59(MT) DURATION: minutes TYPE: Practitioner - Medication Renewal LOCATION: Idaho State Correctional Institution [ISCI] SETTING: Clinic</p>	
S	<p>H/S REQUEST RECEIVED: 05/02/2018 TYPE: Routine NOTES: Request Date: 05/02/2018 HSR 1087506 need spironolactone renewed; dc'd was good until 1/29/19</p>
O	NOTES: None
A	<p>NOTES: None</p> <p>STANDARD FORM: CC - Special Needs Chronic Care Treatment Plan</p>
P	<p>NOTES: MRD to patient: Spironolactone cannot be renewed due to history of elevated liver function tests - Dr. Alviso's current order is not to restart the Spironolactone</p>
E	NOTES: n/a
	STAFF: Eldredge, Summer



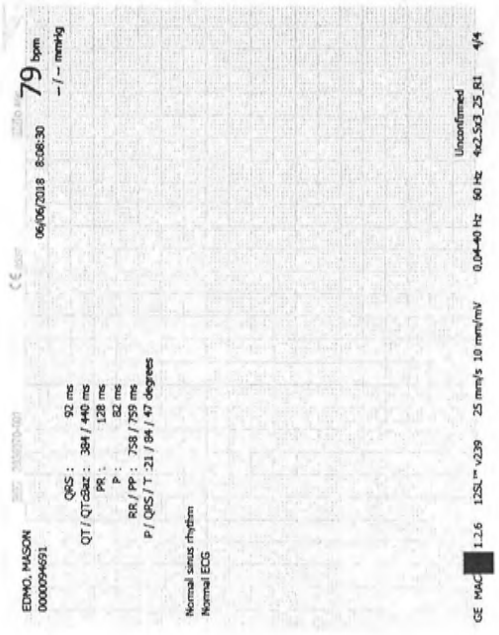
ER 2787





ER 2789





ER 2791

STATE OF IDAHO
DEPARTMENT OF CORRECTION

ADMISSION DATA SUMMARY

Confidential

IDENTIFICATION DATA

Date of Report: 05/03/2012

Date of Interview: N/A

ATTACH PHOTO



Name: EDMO, MASON DEAN
DOC No.: 94691
AKA: MEEKS, MASON
Height: 5'9 Weight: 260 Eyes: BROWN Hair: BLACK Sex: M
DOB: Birthplace:
Age: 24 Complexion: MED BROWN Ethnicity: INDIAN Citizenship: U.S.A.
Disruptive Group Orientation:
Marks and Scars: TATS: L WRIST-BAREWIRE BAND; R ANKLE-"MEEKS"; RT WRIST-"DAYS OF WAR NIGHTS OF LOVE". BOTH EARS PIERCED

SENTENCE DATA

Receipt: Termer Admission Date: 10/05/2009 Parole Eligibility Date: 07/04/2014 Sentence Discharge Date: 07/03/2021
Sentencing County: BANNOCK Sentence Date: 12/19/2011 Sentence Effective Date: 12/19/2011 Pre-Sentence Confinement: 198 days
Judge: NAFTE, ROBERT C. District Atty: JOHNSON, JARED Defense Atty: REYNOLDS, KENT
Co-Defendent(s): NOT REPORTED

Offense	Class	Docket Number / Seq	Offense Date	Sentence (Yr-Mo-Da)
<u>DRAWING CHECKS W/OUT FUNDS (1)</u>	<u>3</u>	<u>CR09-8570 1</u>	<u>04/08/2009</u>	<u>3 - 0 - 0</u>
<u>DRAWING CHECKS W/OUT FUNDS (1)</u>	<u>3</u>	<u>CR09-8570 2</u>	<u>04/08/2009</u>	<u>3 - 0 - 0</u>
<u>DRAWING CHECKS W/OUT FUNDS (1)</u>	<u>3</u>	<u>CR09-8570 3</u>	<u>04/08/2009</u>	<u>3 - 0 - 0</u>
<u>SEXUAL ABUSE OF A CHILD UNDER 16 (1)</u>	<u>3</u>	<u>CR11-11293 1</u>	<u>06/29/2011</u>	<u>10 - 0 - 0</u>

Other Co-Defendent(s): NOT REPORTED Pre-Sentence Confinement: 0 days
Other Co-Defendent(s): NOT REPORTED Pre-Sentence Confinement: 0 days
Other Co-Defendent(s): NOT REPORTED Pre-Sentence Confinement: 0 days

ALERT DATA (Active)

Alert/Consideration
Detainer Juris/Warrant: NONE
Prior Idaho DOC Number:
Prior Escapes: 0 Last Escape Date: Last Escape Location:

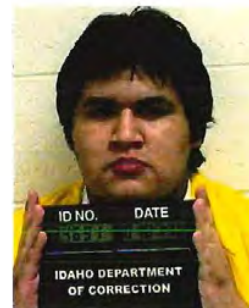
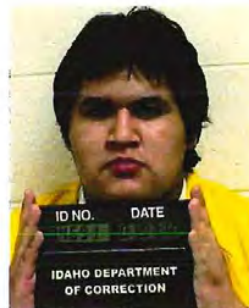
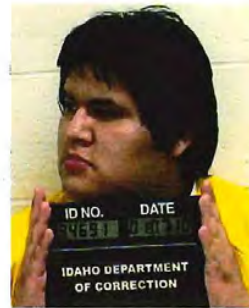
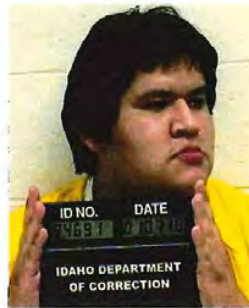
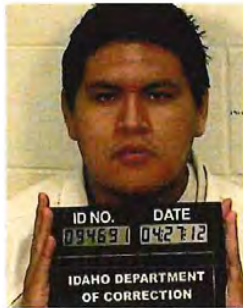
PERSONAL DATA

Emergency Notification: Phone:
Address:
Last Place of Residence: Marital Status: SINGLE Dependents: 0
Military (Branch): NOT APPLIC Dates: Discharge: NOT APPLIC Viet Vet?: N Religion: CHRISTIAN
Intelligence Level: Claimed Education Level: Apticom Math: Language:
Occupation:

NOTE: THIS DATA DOES NOT INCLUDE ANY CHANGES MADE AFTER DATE OF REPORT.
CONTACT LOCAL RECORDS OFFICER FOR CURRENT INFORMATION.

EDMO, MASON DEAN

IDOC#: 94691



EDMO, MASON DEAN

IDOC#: 94691



Date: 06/27/2018 11:51

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ER 2794

EDMO, MASON DEAN

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ER 2795

EDMO, MASON DEAN

IDOC#: 94691



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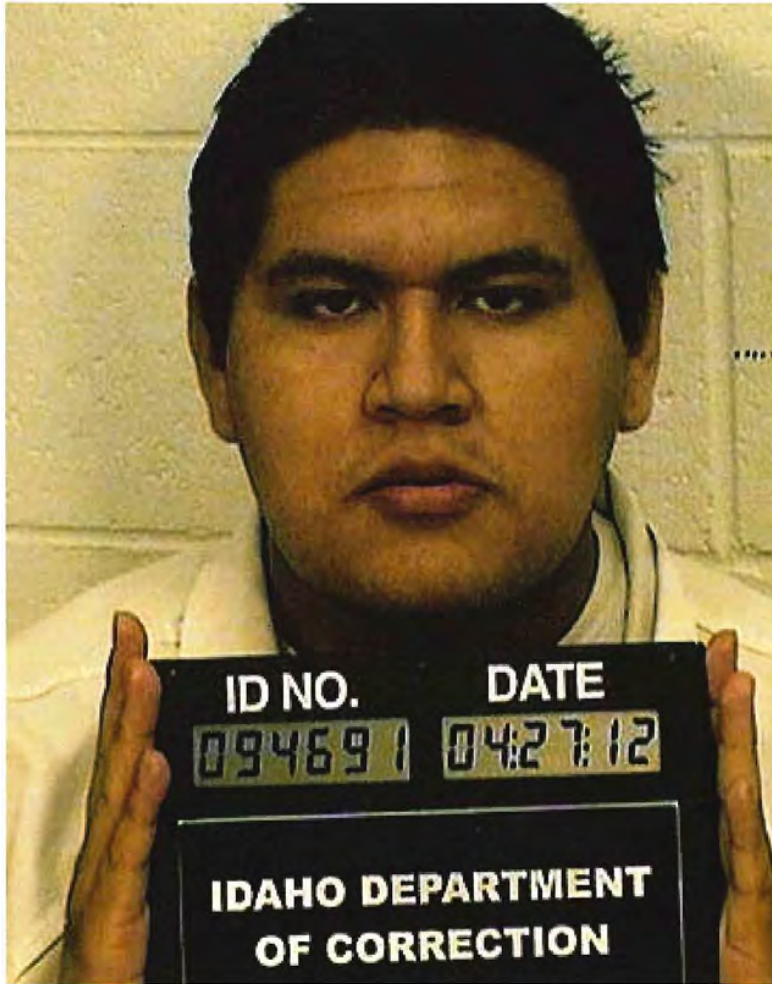
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EDMO, MASON DEAN

IDOC#: 94691



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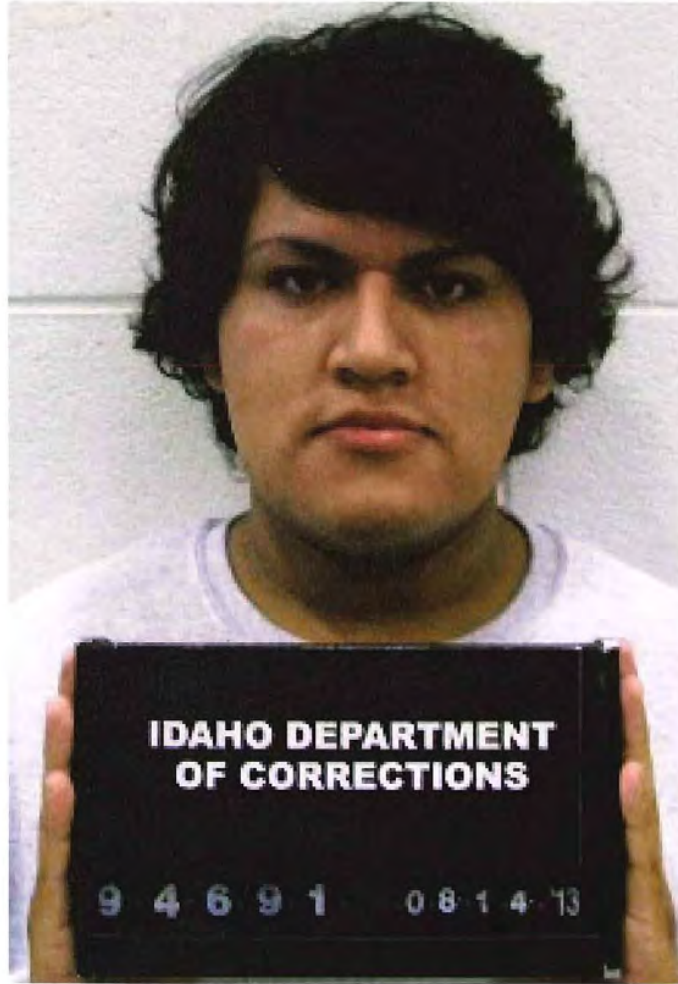
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ER 2797

EDMO, MASON DEAN

IDOC#: 94691



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ER 2798



EX NO. 3
A. Edmo
DATE 8-24-18
ASSOCIATED
REPORTING & VIDEO

ER 2799