

U.S. SUPREME COURT

Case No 18-7895

JERRY ANDERSON II

Petitioner

v

STATE OF MICHIGAN

Respondent

Application To

Justice Sotomayor

Rule 22

APPLICATION TO JUSTICE SOTOMAYOR

Jerry Anderson II, Petitioner, In Pro Per hereby request that the Hon. Justice Sotomayor whom oversees the 6th Circuit hears and decides his motion for bail pending Certiorari and his motion to remand. see rule 22

The original petition for writ of Certiorari has been attached as a reference if necessary. It contains the exhibits that are referenced in the motions for bail and remand. They are located in the appendix of petition.

The necessary transcripts have also been provided as they are referenced within.

If possible petitioner requests that the Justice consider the entire petition as an individual application. If possible.

2-22-19

Jerry Anderson II

2727 E Beecher St, Adrian, MI 49221
Gus Harrison Correctional

U.S SUPREME COURT

JERRY ANDERSON ~~II~~

Petitioner

V

STATE OF MICHIGAN

Respondent /

U.S SCT: 18-7895

MA SCT: 156142

MA COA: 337773

trial court: 16-039145-PC

MOTION FOR BAIL revised

Jerry Anderson ~~II~~, In Pro Per, moves this court to grant him bail pending Certiorari. Due to petitioners continued confinement in state custody and lack of income since 9-4-15 petitioner respectfully request personal recognizance.

Petitioner was convicted on 4-11-16 by way of guilty plea for Ct 1 second degree murder and Ct IV felony firearm. He was arbitrarily denied bail on count 1 and set excessive bail on Ct 4 for the amount of \$50,000 cash surety where MCL 750.227b has a maximum sentence of 2-2 years. See Stack v Boyle, 342 USJ (1951); Atkins v Michigan, 488 F Supp 402 (1980) *408-409 (see pretrial order form)

The trial courts reason for denying bail was based solely on the original charge of premeditated murder which no evidence was presented to justify such denial. Arraignment trans pg 6:13-14

"The command of the 8th Amendment that excessive bail should not be required... at the very least obligates judges passing upon the right to bail to deny such relief only for the strongest reasons. The bail reform act of 1966 (18 USC § 3146, 18 USC § 3148) provides that a person who has been convicted of an offense and has filed an appeal shall be released on bail."

Sellers v United States, 89 Sct 36, 38 (1968)

"Petitioner is presently incarcerated with the Michigan Dept of corrections on counts 1,4 for a term of 15-30 years and 2-2 years respectively. It should be noted that the petitioner has already served the full term of 2-2 years and he would not risk losing that time by fleeing from the courts or disobeying court orders.

Petitioner asserts that even a convicted person that has an assaultive crime can be permitted bail on appeal. *Chambers v Mississippi*, 405 US 1205 (1972); 18 USC § 3141; 3143; 3146; 3148; and Fed R Crim P 46(c); and U.S Const Amend VIII, XIV.

There is no substantial or otherwise risk to the administration of justice if the petitioner is released on bond pending resolution of Petition for certiorari. Petitioner is fully aware of and accepts the fact that if his petition fails, he must return to prison and serve out the sentence.

(2) of (4)

Petitioner asserts that he has filed a non-frivolous petition for Certiorari that raises multiple Constitutional questions in reference to due process rights being violated, Unvoluntary Plea, Prosecutorial misconduct, ineffective assistance of Counsel, illegal search and seizures and evidence of Actual Innocence. see (Certiorari and motion for remand)

In support of this motion Petitioner Anderson II asserts that (1) he has lived his entire life in Genesee County, MI (2) He has 3 children whom live there as well and that he wishes to help stabilize the extreme emotional distress that his children face due to petitioners incarceration. They are ages 9, 9, 5 and all have the same mother. She needs petitioners help to raise children. (3) Petitioner has worked and or been in school during the 5 year period preceeding his incarceration and has a high probability of employability and or acceptance into school if released.

(4) Petitioners step father is a deacon at a local church and his mother is a retired nurse and they would vouch for petitioners guaranteed good behavior if released and he would be under their supervision in their home.

(5) Petitioner is also currently enrolled in Blackstone Career Institute's paralegal program and is nearly at completion of such.

③ of ④

Petitioner feels as if he has shown clear and convincing evidence that he is not likely to pose a danger to other persons and that the Petition for Certiorari raises many substantial questions of law and/or fact.

Petitioner does not have any felonies prior to these current convictions and has none pending. Petitioner does not have a reputation for dangerousness and has a great relationship with both family and friends who would vouch for his good character.

Granting bond would increase petitioners ability to do research and find evidence and witnesses whom will be able to help petitioner and chances of being able to fund his own defence and be present at court in person is a huge to the interest of Justice.

For the reasons stated above petitioner Anderson II prays for the relief of bail pending Certiorari.

12-12-18

revised

2-21-19

Jerry Anderson II 979199

Jerry Anderson II
In Pro Per

2727 E Beecher St
Adrian, MI 49221

Gus Harrison Correctional

McCabe / Puller

To order this form, call (517) 337-1211
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Original - Court
1st copy - Sheriff/Facility
2nd copy - Defendant

Approved, SCAO

STATE OF MICHIGAN
67th JUDICIAL DISTRICT
JUDICIAL CIRCUIT

ORDER FOR
☐ PRETRIAL RELEASE ☐ CUSTODY
☐ AMENDED

CASE NO.
15T-1478-FY
☐ Bound Over from District Court/
District Case No:

ORI
MI- Court address
630 S. Saginaw Street, Suite 124, Flint 48502

Court telephone no.
810-257-3170

THE PEOPLE OF ☒ The State of Michigan
☐ _____
☐ Juvenile In the matter of _____

Defendant's/Juvenile's name, address, and telephone no.
Jerry Anderson II
Date of birth *4-7-94* CTN/TCN

Date of arrest file no. Type of offense ☐ Misdemeanor ☒ Felony Arresting agency Agency

Offense(s) *I Murder 1st II Flee & Elud III C.W. IV Fel. Firearm* Statute/ordinance citation(s)

Purpose of next appearance *PCC* Time of appearance *1:00P* Date of appearance *9-17-15*

Place of appearance ☒ At the court address above ☐ Other: *exam 9-23-15* ☐ Bond denied

TYPE OF BOND: ☐ Personal recognizance ☒ Cash/Surety ☐ Cash/Surety/10% Cash ☐ Real property* \$ *41 - Bond denied*
☐ *Proof of value and interest in real property is required *43 - \$0,000* *44 - \$0,000* *Latchana*

☐ Pursuant to 18 USC 922(g)(8), the court found, at a hearing, that the defendant/juvenile represents a credible threat to the physical safety of one or more persons as defined in 18 USC 922(g)(8) and 18 USC 921(32) and named in item 2. **Needed for NCIC entry.

IT IS ORDERED:

☐ 1. The defendant/juvenile shall post a new bond (MC 24). Any additional conditions are specified in item 2. and in the bond.
☒ 2. Conditions to be specified in the bond are: *bad drugs / alcohol, No weapons of any kind*
(see other side for list of conditions) Indicate conditions by item number. Include any specific details.

☒ 3. The ☒ sheriff ☐ custodial agency/facility shall:
☐ a. continue to hold the defendant/juvenile named above in their care and custody until further order of the court.
☒ b. hold the defendant/juvenile named above in their care and custody until bond is posted and the conditions are agreed to as specified in item 2. and in the bond.

The sheriff or director or designee of the custodial facility is authorized to obtain and consent to routine, nonsurgical medical and dental care for the juvenile and emergency medical, dental, and surgical treatment of the juvenile.

The defendant/juvenile shall be brought to all court appearances while in custody or as otherwise ordered.

☐ 4. The previously posted bond is continued.
☐ 5. The previously posted bond is revoked, conditions of release under MCL 765.6b or 780.582a are cancelled, and LEIN entry beremoved. ☐ Bond is forfeited.

Date *9-8-15*

Judge/Magistrate/Referee *Latchana*

Bar no. *P-57002*

The defendant/juvenile was not released for the following reasons: Check all applicable reasons and explain the reasons checked

☐ criminal record ☐ family ties ☐ mental condition ☐ reputation - character
☐ employment ☐ history of substance/addiction ☐ pending charges ☐ residence, length
☐ failure to appear ☐ no one to vouch for reliability ☐ probation/parole ☐ serious offense
☐ danger to community ☐ other reasons:

COURT MEMO COPY

U.S SUPREME COURT

Case 18-7895

JERRY ANDERSON II

Petitioner

v

STATE OF MICHIGAN

Respondent /

MOTION FOR REMAND

Jerry Anderson II, In Pro Per hereby moves this Court to grant this motion to remand based on the 2 issues included herein and/or within the attached copy of petition for writ of Certiorari.

These 2 issues are raised within the petition for writ of Certiorari. I feel these 2 issues have the strongest chance for remand.

They are argued slightly different and more focused on specific points.

The content follows on the next page

II

WAS DUE PROCESS VIOLATED WHERE THE DEFENDANT
WAS HELD TO ANSWER FOR A CAPITAL OR OTHERWISE
INFAMOUS CRIME WITHOUT BEING PRESENTED OR
INDICTED BY A GRAND JURY?

STANDARD OF REVIEW

Constitutional issues are reviewed de novo
Testa v Katt, 330 US 386, 389, 391-393 (1947)

ARGUMENT FOR REMAND

Defendant/Petitioner had his due process rights
violated where he was held to answer for a capital
crime without consent from a Grand Jury.
U.S. Const Amend V states that no person shall
be held to answer for a capital or otherwise infamous
crime without presentment or indictment of a Grand Jury.
U.S. Const Art VI states that the U.S. Constitution
is Supreme above any state constitution or law.

U.S. Const Amend IX stands for the inclusion of
rights that are not specifically mentioned in the
body of the U.S. Constitution which are to be
protected from being belittled by listed rights.
U.S. Const Amend XIV incorporates all provisions
of the U.S. Constitution to the states and therefore
the silence of a grand jury requirement does not
mean that a court can overlook the Supreme law.

Therefore with the aforementioned Supreme laws in mind, the doctrine found in the case *Hurtado v California*, 110 US 516, 528, 538 (1884) must be overruled because it's clearly incorrect.

The dissenting Justice Harlan correctly states "the peculiar benefits of the Grand Jury system... is composed... as a general rule, of a body of private persons, who do not hold office at the will of the government, or at the will of voters. In many if not in all of the States civil officers are disqualified to sit on Grand Juries." id at 554

"Grand Juries perform, most important public functions and are a great security to the citizens against vindictive prosecutions either by the government, or by political partisans, or by private enemies." id at 555

This is the superior protection offered by a Grand Jury; It has the authority to not return a indictment even when probable cause is shown that a defendant probably committed a crime.

But a magistrate is mandated by State law MCL 766.13 and MCL 600.8311 to issue a bind over for trial if probable cause is found and then the prosecution files an information (MCL 6.112) in the circuit court. Such process is illegal as the U.S Constitution is Supreme.

Under Michigan laws, the government presents a defendant to the government and bypasses the people's civil liberty to consent the prosecution.

The Judge of the State is bound by Oath via U.S. Const Art VI to the Supreme Laws of the Land. *Testa v Katt* 330 US 386, 389, 391-393 (1947); see *People v Jondreau*, 384 Mich 539, MWS (1971)

The *Hurtado* language has been rejected many times *Powell v Alabama*, 287 US 45 (1932) 6th Amendment right of Counsel applied to the States.

Grosjean v American Press Co, 297 US 233 (1936) 1st Amendment free speech/Press applied to States.

Mapp v Ohio, 367 US 643 (1961) 4th Amendment right to exclusionary rule applied to the States.

Malloy v Hogan, 378 US 1 (1964) 5th Amendment right to not incriminate one's self applied to States.

Benton v Maryland, 395 US 784 (1969) 5th Amendment rights against double jeopardy applied to States.

McDonald v City of Chicago, 561 US 742 (2010) 2nd Amendment rights applied to States.

Wherefore a remand is warranted where Michigan's laws and it's case law are unconstitutional/

People v Glass, 464 Mich 266, 278 (2011); *In re Palm*, 255 Mich 632 (1931)

because they follow *Hurtado supra*

I. WAS DEFENDANT DENIED HIS STATE AND FEDERAL CONSTITUTIONAL RIGHTS TO EFFECTIVE ASSISTANCE OF COUNSEL WHEN HIS ATTORNEY FAILED TO PREPARE FOR TRIAL AND CUERCED HIM TO PLEAD GUILTY WHEN HE WANTED TO GO TO TRIAL?

STANDARD OF REVIEW

Constitutional issues are reviewed De novo
Strickland v Washington, 466 US 668 (1984)

ARGUMENT FOR REMAND

Strickland v Washington, 466 US 668 (1984)
USES a 2 prong test of cause and prejudice to decide if counsel was ineffective, if a guilty plea was taken the defendant must show that counsels errors caused him to plead guilty instead of going to trial and that if counsel had given accurate advice the plea proceedings would have been different by "a reasonable probability" Hill v Luckhart, 474 US 52 (1985)

But for counsels errors, I would not have plead guilty and gone to trial in this case.

As Stated in "Declaration of Petitioner" dated 12-7-18 Michigan Supreme Court has changed MCR 6.302 (B)(5) since the original filing of petition for certiorari (see Sado exhibit)

This rule applies to Petitioners case as he is pending certiorari on direct review in this court.

Federal and State law supports such position.

Griffith v Kentucky, 479 US 314, 328 (1987)

People v Colbert B. and, 2018 Mich app lexis 3633, ¶13 citing Reitmeyer v Schultz Equip & Parts CO, 237 Mich app 332 (1999)

This is important because although not law at the time, petitioner stated in his MI SCT appeal Issue I that counsel was ineffective for failing to "inform him that waived rights were unredeemable on appeal." (denied 1-3-18)

Johnson v Zerbst, 304 US 458 (1938)

"Motion for reconsideration supplement Issue I" on pg 4 "(3)... He also failed to inform me that the rights that I was waiving were not to be regained until the convictions were overturned. I thought that I would get these rights back to use when I appealed my conviction. Had I know these things I wouldn't have pleaded guilty. I have been tricked out of my rights." denied ~~5-1-18~~ 5-1-18

15 days later on 5-16-18 the Michigan SCT proposed amendments to MCR 6.302 (B)(5) and then adopted such on 9-20-18. effective 1-1-19 Such rule makes petitioners conviction impossible.

Because counsel should have known that "a guilty plea waives defendant's right to challenge most non-jurisdictional defects" and where he failed to inform petitioner of such waivers, the "plea was not knowing, voluntary, and intelligent."

Tollet v Henderson, 411 US 258 (1973)

Boykin v Alabama, 395 US 238 (1969)

This new rule in my opinion isn't really new at all it's implied by the old rules/case law.

"the understanding, voluntary, and accurate components of MCR 6.302 (A) are premised on the requirements of Constitutional due process," a trial court may, in certain circumstances, be required to inform defendant about facts not explicitly required by MCR 6.302."

People v Blanton, 317 Mich app 107, 119 (2016)

Both prongs of Strickland have been met and the lower courts abused their authority by failing to remand for a evidentiary hearing.

Petitioner also states that he was incompetent to plead guilty because of un diagnosed mental disorders and the involuntary intoxication of remeron that was prescribed to him which did cause him to be confused and disoriented.

Counsel knew of the prescription and it's negative effects on petitioner & because petitioner was under age 25 he was at risk to experience worsening depression, other mental/mood symptoms, or suicidal thoughts/attempts. (see medication exhibit) and counsel failed to notify the court.

This was unreasonable where counsel had prior knowledge of petitioners mental and emotional problems. see (appx: J of certiorari)

Counsel was ineffective where he failed to request funding to obtain an independent evaluation for competency and where he acted under the false assumption that petitioner and or his parents had to pay for evaluation. see (appx: Q pg 2-3 of certiorari)
Hinton v Alabama, 571 US 263, 273 (2014)

Counsel stipulated to the report, it's contents and it's admission as an exhibit as evidence. see (Competency hearing trans pg 3-4)

This was unreasonable where the report said petitioner was attempting to malingering mental health problems. see (appx: L pg 4-5 of certiorari)

This is based upon a 6-10-16 evaluation by a different state expert who concluded that petitioner suffered from multiple problems. "Personality disorder, Nos", "poly substance dependence", "Major Depression Recurrent, severe"

Petitioner was continued on prescription for Remeron and newly prescribed Lexapro and Prazosin Hcl to help petitioners mental health problems. see (new assessment exhibit)

Had counsel moved for 2nd evaluation such problems would have been discovered before petitioner was convicted and sentenced to prison.

Counsel took advantage of petitioners mental condition and failed to protect him, and convinced him to plead guilty instead of conducting a much needed investigation.

Ayestas v Davis, 138 sc^t 1080, 1097-1099 (2018)

Petitioner often battled confusion, loss of touch with reality, extreme emotions, impulsiveness, mood swings, inappropriate anger, stress related paranoia all of which could last from a few hours to a few days.

Because of time lapse a remand is required
Pate v Robinson, 383 US 375, 387 (1966)

Because counsel was ineffective on both of
the reasons listed herein a remand is necessary
to create a record since the State Courts
refused to order a hearing on counsel's
behavior, see (motion to withdraw plea trans)

Jerry Anderson II
2727 E Beecher St

Adrian, MI 49221

Gus Harrison Correctional

2-22-19

U.S SUPREME COURT

JERRY ANDERSON II

Petitioner

V

STATE OF MICHIGAN

Respondent

MI SCT; 156142

MI COA; 337773

LC NO 16-039145-PC

Declaration of Petitioner

I Jerry Anderson II, does hereby declare:
That petitioner originally served the petition
for Certiorari on the respondent on 7-30-18.

Despite the fact that there is a tracking number
from the post office stating that there was a
successful delivery to this court, this court
can not seem to find where it has placed
the original pleadings. Petitioner has rewritten
the petition and is now reserving this court.

Additionally

The Michigan Supreme Court recently and since
the original filing of this petition changed
MCR 6.302 (B)(5) which provides that:

"If the plea is accepted, the defendant may be
giving up the right to appeal issues that would
otherwise be appealable if she or he were
convicted at a trial..."

This court rules governs the due process
requirements of accepting a guilty plea.

declaration pg 1 of 2

This is significant because petitioner fairly included such argument in his claim of ineffective assistance of counsel against his trial attorney before the court changed the rule that is effective 1-1-19.

See question #1 of this petition with emphasis on reason (3) listed therein and also see question #3 of this petition.

It is petitioners contention that the newly announced rule of 6.302 (B)(5) should have been conveyed to petitioner before he entered into a ignorant guilty plea because "the understanding, voluntary, and accurate components of MCR 6.302 (A) are premised on the requirements of constitutional due process," a trial court may, in certain circumstances, be required to inform defendant about facts not explicitly required by MCR 6.302" (people v Blanton, 317 Mich App 107, 119 (2016)).

For due process reasons this should be the rule both with or without the new rule.

I declare under penalty of perjury that the foregoing is true and correct executed at Adrian, MI on 12-7-18

Declaration pg (2) of (2)

~~Jeffrey Anderson~~
2727 E Beecher St
Adrian MI 49221
Gus Harrison Correctional

STATE APPELLATE
DEFENDER OFFICE
and
CRIMINAL DEFENSE
RESOURCE CENTER

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Exhibit 1

May 2018
VOLUME 41 ISSUE 8

CRIMINAL DEFENSE NEWSLETTER

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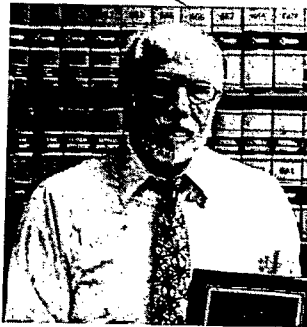
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SADO Attorney Peter Van Hoek Selected for 2017 Norris J. Thomas Award



The Michigan Appellate Defender Commission has selected SADO Assistant Defender Peter Van Hoek to receive the 2017 Norris Thomas Award for Excellence in Appellate Advocacy. Named for SADO's long-serving and much-respected Norris J. Thomas, Jr., the award is given annually to a SADO attorney whose appellate advocacy achieves outstanding results for clients or the criminal justice system. Thomas served as SADO's Deputy Director over two decades before his untimely passing in 2007. His dedication to clients and craft in achieving excellent outcomes were legendary.

A 1976 graduate of Wayne State University Law School, Peter joined SADO in 1978 after clerking for Judge George Bashara of the Michigan Court of Appeals and Justice Dorothy Comstock Riley of the Michigan Supreme Court. Aside from a two year-stint in private practice, Peter has been an institution at SADO and in the criminal defense community for over four decades. He is the very definition of a warrior who zealously and passionately fights for his clients, achieving amazing results. Peter has been the "go to" attorney at SADO for some of the most-complex, difficult, and controversial cases throughout the years, including the appeals of Officer Walter Budzyn, who was convicted in the death of Malice Green, and Lawrence Delisle, who was convicted in the homicide of his three children, and a host of others.

Peter has appeared in virtually every jurisdiction imaginable throughout his career, from the state trial, appellate and supreme

Exhibit 1

there exists, as a result, concern about misidentifications. Also, "[r]eal-time face recognition would chill the constitutional freedoms of speech and association, especially at political protests."

It was estimated in 2016 that images of about 117 million American adults are already in facial-recognition databases used by local, state, and federal law enforcement agencies.

Source: Drew Harwell, "Facial recognition may be coming to a police body camera near you," *lmtonline.com*, April 26, 2018:

<https://www.lmtonline.com/business/article/Facial-recognition-may-be-coming-to-a-police-body-12866541.php>

Dozens of Stingray-type Devices Found in D.C., Maryland, and Northern Virginia

A recent investigative report by the News4 I-Team found dozens of "Stingray," or cell-tower mimic devices, in and around the Washington, D.C., area. The devices – which are small enough to be portable – mimic cell-towers and can capture phone identification data, location information, and likely content without the phone-user being aware.

In a few hours of driving around, the reporters were able to find 40 areas where the spying-devices were likely in use, including high-profile locations such as the Trump International Hotel, the Russian, Chinese, and Israeli embassies, and K Street, where many lobbyists may be found.

The reporters estimated that about one-half of the devices in use were related to law enforcement or other governmental use.

One security expert quoted in a recent article, Aaron Turner, said that phone-users cannot choose which cell-towers are used by their phones, but privacy precautions can be taken by using calling and texting apps that use encryption technology.

Sources: Jodie Fleischer, Rick Yarborough, and Jeff Piper, "Potential Spy Devices Which Track Cellphones, Intercept Calls Found All Over D.C., Md., Va.," *nbcwashington.com*, May 17, 2018:

<https://www.nbcwashington.com/investigations/Potential-Spy-Devices-Which-Track-Cellphones-Intercept-Calls-Found-All-Over-DC-Md-Va-482970231.html>

Benjamin Arie, "Dozens of Spying Devices Found in DC — Can Hit Thousands of Cell Phones at Once," *westernjournal.com*, May 20, 2018:

<https://www.westernjournal.com/ct/dozens-of-spying-devices-found/>

NSA Collected 534,000,000 U.S. Calls and Texts in 2017

A report released earlier this month indicated that the National Security Agency collected records of 534,000,000 calls and texts in 2017, more than triple the number collected in 2016, but much less than the billions per day collected under previous bulk-data collection practices revealed by Edward Snowden in 2013. The data collected does not include content of a call or text but does include the identification number and the time made.

Source: <https://www.reuters.com/article/us-usa-cyber-surveillance/spy-agency-nsa-collected-500-million-u-s-call-records-in-2017-a-sharp-rise-official-report-idUSKBN1I52FR>

by Neil Leithauser
Associate Editor

Supreme Court: Proposed Rule Amendments

The Supreme Court issued orders on May 16, 2018, proposing amendments to MCR 6.302 and MCR 6.502 and inviting comment.

★ **MCR. 6.302. Pleas of Guilty and Nolo Contendere.** The proposed amendment would add language to MCR 6.302(B)(5) requiring a trial court judge to advise a defendant making a plea that, if the plea is accepted, the defendant may be giving up the right to appeal issues that would have been appealable if the defendant were convicted at trial.

The Order is in reference to ADM File No. 2017-16 and is available at: http://courts.mi.gov/Courts/MichiganSupremeCourt/rules/court-rules-admin-matters/Court%20Rules/2017-16_2018-05-16_FormattedOrder_PropAmendtofMCR6.302.pdf

MCR 6.502. Motion for Relief from Judgment. The proposed amendment would add language to MCR 6.502(G)(2), Successive Motions,

MICHIGAN DEPARTMENT OF CORRECTIONS - BUREAU OF
HEALTH CARE SERVICES

new assessment
exhibit

PATIENT PLAN
JERRY ANDERSON, II

06/10/2016 2:26 PM
Visit Type: Psychiatric Evaluation

Thank you for choosing us for your healthcare needs. The following is a summary of the outcome of today's visit and other instructions and information we hope you find helpful.

Assessment/ Plan

Major Depression, Recurrent, Severe (296.33)
Polysubstance Dependence (304.80)
Personality Disorder, NOS (301.9)

Medications

<u>Brand Name</u>	<u>Dose</u>	<u>Sig</u>	<u>Description</u>	<u>Comments</u>
Ibuprofen	400 Mg		Take 1 tab po tid prn.	
Remeron	30 Mg		take one by mouth at bedtime - dose lowered due to RLS	
Prazosin Hcl	2 Mg		2mg at bedtime for anxiety and nightmares hold if BP less than 90/60 check 5days	
Lexapro	10 Mg		10mg at noon	

Office Procedures

<u>Status</u>	<u>ApptDate</u>	<u>Timeframe</u>	<u>Order</u>	<u>Reason</u>
completed	06/10/2016	-today		
Minutes.				
ordered	06/21/2016			
completed	06/10/2016	-today		
completed	06/10/2016	-today		

Legal paperwork was reviewed and completed. Time spent was 10
MH Med Review/Renewal :
Patient understood and made informed decision
Patient was reassured

Instructions / Education

<u>Status</u>	<u>Order</u>
completed	Hard candy
completed	Increase rest
completed	Increase social interaction
completed	Discussed treatment of pharmacologic therapy
completed	Change medication dosage (decrease)
completed	Reviewed medications
completed	Start new medication
completed	Take new medication as prescribed
completed	Return to office for BH visit
completed	Activity as tolerated
completed	Add structured routine
completed	Adequate nutritional intake
completed	Avoid alcohol
completed	Avoid caffeine
completed	Avoid crowds
completed	Daily exposure to sunshine
completed	Incorporate recreational activities
completed	Educational handouts provided
completed	Medication side effects including weight gain, dizziness, dry mouth
completed	Written instructions for tapering/titrating meds

completed	Risks/benefits of medications
completed	Support groups
completed	Symptom management
completed	Meditation/relaxation techniques
completed	Practice good hygiene
completed	Sleep hygiene
completed	Stress management techniques
completed	Signs of emergency

Sincerely,

Aleksandra Wilanowski MD PhD

IMPORTANT: HOW TO USE THIS INFORMATION: This is a summary and does NOT have all possible information about this product. This information does not assure that this product is safe, effective, or appropriate for you. This information is not individual medical advice and does not substitute for the advice of your health care professional. Always ask your health care professional for complete information about this product and your specific health needs.

*Medication
Exhibit*

MIRTAZAPINE - ORAL
(mer-TAZE-uh-peen)

COMMON BRAND NAME(S) Remeron

WARNING: Antidepressant medications are used to treat a variety of conditions, including depression and other mental/mood disorders. These medications can help prevent suicidal thoughts/attempts and provide other important benefits. However, studies have shown that a small number of people (especially people younger than 25) who take antidepressants for any condition may experience worsening depression, other mental/mood symptoms, or suicidal thoughts/attempts. Therefore, it is very important to talk with the doctor about the risks and benefits of antidepressant medication (especially for people younger than 25), even if treatment is not for a mental/mood condition.

Tell the doctor immediately if you notice worsening depression/other psychiatric conditions, unusual behavior changes (including possible suicidal thoughts/attempts), or other mental/mood changes (including new/worsening anxiety, panic attacks, trouble sleeping, irritability, hostile/angry feelings, impulsive actions, severe restlessness, very rapid speech). Be especially watchful for these symptoms when a new antidepressant is started or when the dose is changed.

USES: Mirtazapine is used to treat depression. It improves mood and feelings of well-being. Mirtazapine is an antidepressant that works by restoring the balance of natural chemicals (neurotransmitters) in the brain.

HOW TO USE: Read the Medication Guide provided by your pharmacist before you start using mirtazapine and each time you get a refill because new information may be available. If you have any questions regarding the information, consult your doctor or pharmacist.

Take this medication by mouth, with or without food, usually once daily at bedtime or as directed by your doctor. The dosage is based on your medical condition and response to therapy, but should not exceed 45 milligrams per day.

Use this medication regularly in order to get the most benefit from it. Remember to use it at the same time each day. It may take between 1-4 weeks to notice improvement in your symptoms. Therefore, do not increase your dose or take it more often than prescribed.

It is important to continue taking this medication even if you feel well. Do not stop taking this medication without consulting

- your doctor. Some conditions may become worse when the drug is abruptly stopped. Your dose may need to be gradually decreased. Inform your doctor if your condition persists or worsens.

SIDE EFFECTS: See also the Warning section.

Dizziness, drowsiness, lightheadedness, increased appetite, weight gain, dry mouth, or constipation may occur. If any of these effects persist or worsen, tell your doctor or pharmacist promptly.

To relieve dry mouth, suck on (sugarless) hard candy or ice chips, chew (sugarless) gum, drink water or use a saliva substitute.

Remember that your doctor has prescribed this medication because he or she has judged that the benefit to you is greater than the risk of side effects. Many people using this medication do not have serious side effects.

Tell your doctor right away if you have any serious side effects, including: swelling of the hands/feet, shaking (tremor), confusion, signs of infection (e.g., fever, persistent sore throat).

Get medical help right away if you have any very serious side effects, including: fast/irregular heartbeat, severe dizziness, fainting.

This medication may increase serotonin and rarely cause a very serious condition called serotonin syndrome/toxicity. The risk increases if you are also taking other drugs that increase serotonin, so tell your doctor or pharmacist of all the drugs you take (see Drug Interactions section). Get medical help right away if you develop some of the following symptoms: fast heartbeat, hallucinations, loss of coordination, severe dizziness, severe nausea/vomiting/diarrhea, twitching muscles, unexplained fever, unusual agitation/restlessness.

A very serious allergic reaction to this drug is rare.

However, get medical help right away if you notice any symptoms of a serious allergic reaction, including: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your doctor or pharmacist.

In the US -

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

In Canada - Call your doctor for medical advice about side effects. You may report side effects to Health Canada at 1-866-234-2345.

PRECAUTIONS: Before taking this medication, tell your doctor or pharmacist if you are allergic to it, or if you have any other allergies. This product may contain inactive ingredients, which can cause allergic reactions or other problems. Talk to your pharmacist for more details.

Before using this medication, tell your doctor or pharmacist your medical history, especially of: history or family history of psychiatric disorders (e.g., bipolar/manic-depressive disorder), history or family history of suicide attempts, liver disease, kidney disease, seizures, high blood cholesterol or triglyceride

levels, heart disease (e.g., recent heart attack, angina), stroke, severe loss of body fluids (dehydration), low blood pressure.

Mirtazapine may cause a condition that affects the heart rhythm (QT prolongation). QT prolongation can infrequently result in serious (rarely fatal) fast/irregular heartbeat and other symptoms (such as severe dizziness, fainting) that need medical attention right away.

The risk of QT prolongation may be increased if you have certain medical conditions or are taking other drugs that may cause QT prolongation. Before using mirtazapine, tell your doctor or pharmacist of all the drugs you take and if you have any of the following conditions: certain heart problems (heart failure, slow heartbeat, QT prolongation in the EKG), family history of certain heart problems (QT prolongation in the EKG, sudden cardiac death).

Low levels of potassium or magnesium in the blood may also increase your risk of QT prolongation. This risk may increase if you use certain drugs (such as diuretics/"water pills") or if you have conditions such as severe sweating, diarrhea, or vomiting. Talk to your doctor about using mirtazapine safely.

This drug may make you dizzy or drowsy. Do not drive, use machinery, or do any activity that requires alertness until you are sure you can perform such activities safely. Limit alcoholic beverages.

To minimize dizziness and lightheadedness, get up slowly when rising from a seated or lying position.

Older adults may be more sensitive to the side effects of this drug, especially drowsiness and QT prolongation (see above). This medication should be used only when clearly needed during pregnancy. Discuss the risks and benefits with your doctor.

If this medication is used during the last 3 months of pregnancy, infrequently your newborn may develop symptoms including feeding or breathing difficulties, seizures, muscle stiffness, jitteriness, or constant crying. However, do not stop taking this medication unless your doctor directs you to do so. Report any such symptoms to your doctor promptly.

It is not known whether this drug passes into breast milk.

Consult your doctor before breast-feeding.

DRUG INTERACTIONS: Drug interactions may change how your medications work or increase your risk for serious side effects.

This document does not contain all possible drug interactions.

Keep a list of all the products you use (including prescription/nonprescription drugs and herbal products) and share it with your doctor and pharmacist. Do not start, stop, or change the dosage of any medicines without your doctor's approval.

Taking MAO inhibitors with this medication may cause a serious (possibly fatal) drug interaction. Avoid taking MAO inhibitors (isocarboxazid, linezolid, methylene blue, moclobemide, phenelzine, procarbazine, rasagiline, selegiline, tranylcypromine) during treatment with this medication. Most MAO inhibitors should also not be taken for two weeks before and after treatment with this medication. Ask your doctor when to start or stop taking this medication.

The risk of serotonin syndrome/toxicity increases if you are also taking other drugs that increase serotonin. Examples include

street drugs such as MDMA/"ecstasy," St. John's wort, certain antidepressants (including SSRIs such as fluoxetine/paroxetine, SNRIs such as duloxetine/venlafaxine), tryptophan, among others. The risk of serotonin syndrome/toxicity may be more likely when you start or increase the dose of these drugs.

Tell your doctor or pharmacist if you are taking other products that cause drowsiness including alcohol, antihistamines (such as cetirizine, diphenhydramine), drugs for sleep or anxiety (such as alprazolam, diazepam, zolpidem), muscle relaxants (such as carisoprodol, cyclobenzaprine), and narcotic pain relievers (such as codeine, hydrocodone).

Check the labels on all your medicines (such as allergy or cough-and-cold products) because they may contain ingredients that cause drowsiness. Ask your pharmacist about using those products safely.

OVERDOSE: If overdose is suspected, contact a poison control center or emergency room immediately. US residents can call their local poison control center at 1-800-222-1222. Canada residents can call a provincial poison control center. Symptoms of overdose may include: very fast/irregular heartbeat, severe dizziness, fainting.

NOTES: Psychiatric/medical checkups (and possibly laboratory tests) must be done periodically to monitor your progress and check for side effects. Consult your doctor for more details. Do not share this medication with others.

MISSED DOSE: If you miss a dose, use it as soon as you remember. If it is near the time of the next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

STORAGE: Store at room temperature away from light and moisture. Do not store in the bathroom. Keep all medications away from children and pets.

Do not flush medications down the toilet or pour them into a drain unless instructed to do so. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company.

Information last revised April 2014.
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