

Illinois Department of Corrections  
Psychiatric Diagnostic Evaluation

Date: September 15, 2017

Facility

NRC

Offender Name:

Last, First Davenport, Kareem

ID Number: M49922

D.O.B.

Explain:

Affect:  Euthymic  Dysthymic  Hyperthymic  Anxious  Angry  Irritable  Manic  
 Appropriate  Inappropriate  Full range  Constricted  Other

Cognition:  Above average  Average  Below average  Unable to evaluate due to:

Offender description of his or her mood:

"good"

Other observations:

euthymic, calm, cooperative, log/lin, not responding to internal stimuli, not bizarre

***If feigning or exaggeration of symptoms is suspected, ask appropriate questions and report in narrative summary.***

16. Historical Reliability: Reliable  Fairly reliable  Unreliable  Other

17. Narrative Summary and Diagnostic Impressions:

(Provide evidence to support diagnosis and any relevant social concerns that contribute to the overall clinical picture.)

Include current risk assessment, including homicidal thinking, impulse control, insight and judgment, historical reliability, reason for diagnostic change or psychotropic medication changes or dosage changes.)

Pt is a 21 y/o w/ PPHx of PTSD and r/o Benzo/Cannabis Use D/O (at end of interview as CCDOC hx brought up he reports misusing benzos/promethazine). Pt reports no clear hx of substance use, but per CCDOC records there is suggestion he is minimizing symptoms. Pt reports hx of PTSD related to being shot. Pt reports returning to baseline with effexor. Of note, pt effexor dosing is significantly elevated beyond IDOC guidelines, but also not XR. Will transition to max dose of XR and reassess if he is symptomatic as PTSD is not always a chronic condition and no clear equivalency between XR and IR formulations. With that said, pt appears to be med seeking resumption of Benadryl. He is unclear why he wants it and largely vague initially stating for his PTSD. When noted that he reports being at baseline, pt states "I guess I don't need it." F/u in 4 wks. Pt is agreeable with plan as outlined.

18. DSM Psychiatric Diagnosis

PTSD

r/o Benzo/Cannabis Use D/O

Modified Global Assessment 71 to 80

Based upon diagnosis, Modified GAF and need for supportive services, Offender is designated SMI Yes  No

19. Psychiatric Plan

AIMS completed today (if necessary)  AIMS to be done by RN (if necessary)  AIMS not necessary

Labs  CMP  BMP  CBC+Plts  Thyroid Profile  Lithium  Carbamazepine

VPA  Lipid Profile  BP/P  A1C  EKG  Abd Circumference  Weight

Other: \_\_\_\_\_

Needs Medical Referral for \_\_\_\_\_

# Appendix A-2

Illinois Department of Corrections  
Psychiatric Diagnostic Evaluation

Date: September 15, 2017

Facility

NRC

**Offender Name:**

Last, First Davenport, Kareem

ID Number: M49922

D.O.B.

<input type="checkbox"/> Needs MHP referral (Complete DOC 0387) for:
<input type="checkbox"/> Sleep Hygiene <input type="checkbox"/> Anger Management <input type="checkbox"/> Trauma History <input type="checkbox"/> Psychometric Testing
<input type="checkbox"/> Other _____
<input type="checkbox"/> Directly Observed Therapy with thorough mouth checks due to HX of _____
<input type="checkbox"/> Crush/float all Psychotropics due to <input type="checkbox"/> Hx of non-compliance <input type="checkbox"/> Hx of Hoarding medications
<input type="checkbox"/> Other _____
<input type="checkbox"/> Request records from: <input type="checkbox"/> Hospital <input type="checkbox"/> previous Mental Health provider

**Recommended Disposition (Level of Care):**     Continue     Refer to:     Transfer to:

Outpatient level of Care     Residential Treatment Unit     Inpatient     Crisis

## 20. MEDICATION ORDERS

	Medication	Dosage	Instructions
<input type="checkbox"/> Discontinue <input type="checkbox"/> Continue <input checked="" type="checkbox"/> Start	Effexor XR	225mg	1 tab PO QAMx4mths
	Script/order		Use Stock
	<input type="checkbox"/> Written <input type="checkbox"/> T.O./Verbal or faxed to:		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Medication	Dosage	Instructions
<input type="checkbox"/> Discontinue <input type="checkbox"/> Continue <input type="checkbox"/> Start			
	Script/order		Use Stock
	<input type="checkbox"/> Written <input type="checkbox"/> T.O./Verbal or faxed to:		<input type="checkbox"/> Yes <input type="checkbox"/> No

Offender is able to give informed consent for psychotropic medications: Yes  No

If unable, then explain:

Psychiatric Provider has verbally explained the differential diagnosis, risks of untreated illness, treatment options, medication side-effects, alternative treatments, risks and benefits of treatment to offender: Yes  No

Offender has: accepted  refused  the written version of IDOC Psychotropic Medication Information which clearly indicates the class, most common side-effects of the prescribed medication and the need for blood monitoring, if necessary.

Offender has signed IDOC MH Treatment Plan. This form clearly indicates what medication is being prescribed to the offender for this psychiatric visit. Yes  No

If offender refuses to sign or is unable to sign, indicate the reason:

# Appendix B-1

Illinois Department of Corrections

## Psychiatric Progress Note

Date: December 6, 2017

Facility Pinckneyville Correctional Center

### Offender Name:

Last, First, M.I. Davenport, Kareem

ID Number: M49922

D.O.B.: 5/12/1996

Start Time: 10:00:00 AM

Signature of person completing this form: Kathryn Adams, MD Digital signature by Kathryn Adams, MD  
Date: 2017.12.06 10:13:29 -06'00'

Allergies or medication sensitivity? Yes  No  If yes, then describe: \_\_\_\_\_

Scheduled Visit Type: Routine Follow Up (20 min)  Complex Follow Up Evaluation (30 min)

(Level of Care): Outpatient  Residential  Inpatient  Crisis

Site of Visit: Telepsychiatry  Onsite Evaluation  Other  (identify): \_\_\_\_\_

Need for Interpreter? Yes  No  If yes, Language: \_\_\_\_\_

Designation: SMI  GBMI  Involuntary Psychotropics  Other  (Identify): \_\_\_\_\_

Has offender been on Crisis Watch since last psychiatric visit? Yes  No

If yes, explain: \_\_\_\_\_

**1. Source of Information:**  Offender  Mental Health Staff  Medical Staff  Mental Health Progress Notes  
(Check all that apply)  Medical Progress Notes  Mental Health Evaluation dated: 10/17/17  
 Crisis Records  Other (identify): \_\_\_\_\_

**2. Chief Complaint:**

"I'm decent. I'm cool."

**3. History of Present Illness:**

Patient is a 21-year-old BM with a history of PTSD, ASPD, and possible bipolar disorder. Patient reports that he is currently feeling well. Denies any depressive symptoms. Says that he was very anxious last weekend and experienced racing thoughts. He reports difficulty sleeping and bad dreams. Denies SI or HI. States that previous suicide attempts while incarcerated were attention-seeking behaviors. He last made an attempt March 2016. "I love myself too much to kill myself." Denies fighting or altercations- says that he mostly keeps to himself. Denies any psychotic or delusional symptoms. Says that he gets along with his cell mate. Patient watches TV, writes, and reads to keep busy throughout the day. Says that he doesn't exercise.

Patient has tried effexor in the past, however he felt this was ineffective and worsened his symptoms. He says that he found relief from his symptoms with remeron- took this in Cook County jail.

Patient has served 2 years. Anticipated release: Oct 2028.

**4. Labs:** Were most recent laboratory results reviewed? Yes  No

If yes, comment on abnormal results:

Labs drawn on 09/15/17. WNL

**5. CURRENT PSYCHOTROPIC MEDICATIONS:** None  MAR reviewed: Yes  No

Is offender satisfied with current prescribed psychotropic medications? Yes  No  Somewhat

Explain why they are or are not satisfied with their current prescribed psychotropic medications:

Medication (name, dose, schedule)	Effectiveness	Compliance
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# Appendix B-2

Illinois Department of Corrections

## Psychiatric Progress Note

Date: December 6, 2017

Facility

Pinckneyville Correctional Center

Offender Name:

Last, First, M.I. Davenport, Kareem

ID Number: M49922

D.O.B.: 5/12/1996

Medication (name, dose, schedule)	Effectiveness	Compliance
prazosin 1 mg BID	<input checked="" type="checkbox"/> Continues to be effective <input type="checkbox"/> Somewhat effective <input type="checkbox"/> Not currently effective	<input checked="" type="checkbox"/> Compliant with medication <input type="checkbox"/> Not currently compliant with this medication <input type="checkbox"/> Refused _____ doses _____ days
trazodone 100 mg qhs	<input type="checkbox"/> Continues to be effective <input checked="" type="checkbox"/> Somewhat effective <input type="checkbox"/> Not currently effective	<input checked="" type="checkbox"/> Compliant with medication <input type="checkbox"/> Not currently compliant with this medication <input type="checkbox"/> Refused _____ doses _____ days
Side-effects		Explain
Side-effects		Explain
<input type="checkbox"/> EPS <input type="checkbox"/> TD <input checked="" type="checkbox"/> None <input type="checkbox"/> Other:		
<input type="checkbox"/> EPS <input type="checkbox"/> TD <input checked="" type="checkbox"/> None <input type="checkbox"/> Other:		

If offender is receiving neuroleptic medication, AIMS due at start and every 3-6 months thereafter. If offender is receiving 2nd generation neuroleptic, then metabolic monitoring is required. This includes personal, family Hx, BMI, waist circumference, BP, fasting plasma glucose, fasting lipid profile initially and at recommended time intervals per recommended psychiatric literature guidelines. Lithium, valproate, carbamazepine all require baseline laboratory evaluations and regular laboratory monitoring per recommended psychiatric literature guidelines. Periodic blood pressure & pulse monitoring recommended for SNRI's.

6. Medical/Mental Health – Female Specific:  Not Applicable

### 7. Mental Status Examination

Posture/Gait:	<input checked="" type="checkbox"/> Appropriate	<input type="checkbox"/> Inappropriate	<input type="checkbox"/> Slumped	<input type="checkbox"/> Tense	<input type="checkbox"/> Atypical	<input type="checkbox"/> Rigid
Behavior:	<input checked="" type="checkbox"/> Unremarkable	<input type="checkbox"/> Poor physical boundaries	<input type="checkbox"/> Posturing aggressively			
	<input type="checkbox"/> Tensed muscles	<input type="checkbox"/> Closed body posture	<input type="checkbox"/> Guarded/protective posturing			
	<input type="checkbox"/> Psychomotor retardation	<input type="checkbox"/> Psychomotor agitation				
Eye contact:	<input type="checkbox"/> Unremarkable	<input type="checkbox"/> Avoids eye contact	<input checked="" type="checkbox"/> Looks down in his/her lap			
	<input type="checkbox"/> Timid	<input type="checkbox"/> Unfocused	<input type="checkbox"/> Appropriate			
Level of Appearance:	<input checked="" type="checkbox"/> Appropriately Groomed	<input type="checkbox"/> Disheveled	<input type="checkbox"/> Poor Hygiene	<input type="checkbox"/> Malodorous		
Level of consciousness:	<input checked="" type="checkbox"/> Alert	<input type="checkbox"/> Clouded consciousness	<input type="checkbox"/> Lethargic	<input type="checkbox"/> Delirious	<input type="checkbox"/> Somnolent	
Level of Cooperation:	<input checked="" type="checkbox"/> Cooperative	<input type="checkbox"/> Guarded/Suspicious	<input type="checkbox"/> Hostile	<input type="checkbox"/> Unfriendly	<input type="checkbox"/> Uncooperative	
Orientation:	<input checked="" type="checkbox"/> OX4 (Time, place, person, reality)	<input type="checkbox"/> OX _____	(list: _____)		<input type="checkbox"/> Disoriented	
Attention:	<input type="checkbox"/> Appropriately focused	<input type="checkbox"/> Selective attention/inattention	<input type="checkbox"/> Distractible	<input type="checkbox"/> Unaware		
Speech:	<input checked="" type="checkbox"/> Unremarkable	<input type="checkbox"/> Slowed	<input type="checkbox"/> Rapid	<input type="checkbox"/> Inarticulate	<input type="checkbox"/> Pressured	
In tone:	<input checked="" type="checkbox"/> Unremarkable	<input type="checkbox"/> Irritability	<input type="checkbox"/> Terse	<input type="checkbox"/> Impatience	<input type="checkbox"/> Flatted tone	
Thought Processes:	<input checked="" type="checkbox"/> Clear/Coherent	<input type="checkbox"/> Circumstantial	<input type="checkbox"/> Disorganized	<input type="checkbox"/> Tangential		
	<input type="checkbox"/> Loose Association	<input type="checkbox"/> Word Salad/incoherent				

**NOTICE**  
The text of this order may  
be changed or corrected  
prior to the time for filing of  
a Petition for Rehearing or  
the disposition of the same.

Nos. 1-18-1507 & 1-18-1886  
(Consolidated)

Order filed February 14, 2020

SIXTH DIVISION

## Appendix C-1

IN THE  
APPELLATE COURT OF ILLINOIS  
FIRST DISTRICT

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THE PEOPLE OF THE STATE OF ILLINOIS, ) Appeal from the  
Plaintiff-Appellee, ) Circuit Court of  
v. ) Cook County.  
KAREEM DAVENPORT, ) )  
Defendant-Appellant. ) ) No. 16 CR 1743  
 ) ) Honorable  
 ) ) Allen F. Murphy,  
 ) ) Judge, presiding.

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JUSTICE HARRIS delivered the judgment of the court.  
Justice Cunningham and Justice Connors concurred in the judgment.

### **SUMMARY ORDER**

¶ 1 On September 13, 2017, defendant Kareem Davenport entered negotiated pleas of guilty to one count of attempt murder and one count of attempt aggravated vehicular hijacking with a dangerous weapon in exchange for sentences of 15 years' imprisonment. Defendant was represented by counsel. The trial court admonished defendant that before appealing the judgment, he must first file a written motion to withdraw his pleas within 30 days.

¶ 2 On March 16, 2018, defendant filed a *pro se* motion to reduce his sentences, alleging that (1) the State "forced" him to plead guilty by threatening to commence trial before he could prepare,

(2) his sentence for attempt aggravated vehicular hijacking should be served at 50%, (3) no evidence supported his conviction for attempt murder, and (4) his convictions violated the one-act, one-crime doctrine. In an affidavit, defendant averred that he pled guilty while "forced under the medication [he] was taking," and claimed that counsel advised he was actually pleading guilty to aggravated battery.

¶ 3 On April 13, 2018, defendant filed a *pro se* petition to withdraw his guilty pleas and vacate his sentences. Defendant's petition and attached affidavit raised the same allegations as his prior motion and affidavit, and further alleged that (1) the evidence did not support his conviction for attempt aggravated vehicular hijacking, (2) counsel was ineffective, and (3) his sentences violated the "proportionate penalties clause."

¶ 4 On April 20, 2018, the trial court denied defendant's motion to reduce his sentences and petition to withdraw his guilty pleas and vacate his sentences. The court noted that both filings were untimely and neither sought postconviction relief.

¶ 5 On July 6, 2018, defendant filed a notice of appeal from the judgment of September 13, 2017 (appeal No. 1-18-1507). Then, on August 31, 2018, he filed a motion for leave to file a late notice of appeal from the orders of April 20, 2018 (appeal No. 1-18-1886). This court allowed the motion and consolidated the appeals. The Office of the State Appellate Defender was appointed to represent defendant.

¶ 6 Under *Anders v. California*, 386 U.S. 738 (1967), counsel has filed a motion requesting leave to withdraw based on the conclusion that an appeal in this case would lack arguable merit. Counsel filed a supporting brief, concluding that we should dismiss defendant's appeal because his motion to reconsider his sentences was improper and neither that motion nor the petition to

withdraw his guilty pleas and vacate his sentences was timely filed. See Ill. S. Ct. R. 604(d) (eff. July 1, 2017). Counsel informed defendant of this conclusion. Copies of counsel's motion and brief were mailed to defendant and he was informed that he may file with this court a written explanation of why he thinks there are issues of merit in his appeal.

¶ 7 Defendant has filed a response, alleging that (1) psychotropic medication rendered him unfit when he pled guilty, and (2) counsel was ineffective for not investigating defendant's medication, for advising that he was pleading guilty to a different charge, and for not telling defendant he could present evidence in mitigation.

¶ 8 To comply with *Anders*, we have carefully examined the record, counsel's motion and brief, and defendant's response. From our review, we conclude that we must dismiss defendant's appeal.

¶ 9 Under Rule 604(d), before a defendant may appeal a judgment entered upon a guilty plea, the defendant must first file a written motion with the trial court within 30 days of the date the court imposed sentence. Ill. S. Ct. R. 604(d) (eff. July 1, 2017); *People v. Flowers*, 208 Ill. 2d 291, 300 (2003). Depending on the type of plea entered, the motion may request that the guilty plea be withdrawn and judgment vacated or it may seek reconsideration of the sentence. *Flowers*, 208 Ill. 2d at 300. Filing of a Rule 604(d) motion is a "condition precedent to an appeal from a judgment on a plea of guilty." *Id.* at 300-01. However, a defendant may be excused from failing to comply with Rule 604(d) if a trial court did not give proper admonishments under Illinois Supreme Court Rule 605(c) (eff. Oct. 1, 2001) regarding the steps necessary to preserve the right to appeal following a negotiated guilty plea. *People v. Merriweather*, 2013 IL App (1st) 113789, ¶ 17.

¶ 10 Here, defendant did not file a postplea motion with the trial court within 30 days of the date the court imposed sentence. Therefore, we do not have authority to consider the merits of defendant's appeal, and we must dismiss it. *Flowers*, 208 Ill. 2d at 301-02; Ill. S. Ct. R. 604(d) (eff. July 1, 2017). The record shows the trial court told defendant that he had the right to appeal and that in order to do so, he must first file a written request to withdraw his pleas within 30 days. Thus, defendant's failure to file a timely postplea motion as required by Rule 604(d) is not excused.

¶ 11 For the reasons explained above, we grant counsel's motion to withdraw as counsel and dismiss defendant's appeal. This order is entered in accordance with Supreme Court Rule 23(c)(2), (4) (eff. Apr. 1, 2018).

¶ 12 Appeal dismissed.

# Appendix D



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DEC 23 2020

## SUPREME COURT OF ILLINOIS

SUPREME COURT BUILDING  
200 East Capitol Avenue  
SPRINGFIELD, ILLINOIS 62701-1721  
(217) 782-2035

**MENARD CC  
GRIEVANCE OFFICE**

Kareem Davenport  
Reg. No. M-49922  
Menard Correctional Center  
P.O. Box 1000  
Menard IL 62259

FIRST DISTRICT OFFICE  
160 North LaSalle Street, 20th Floor  
Chicago, IL 60601-3103  
(312) 793-1332  
TDD: (312) 793-6185

November 18, 2020

In re: People State of Illinois, respondent, v. Kareem Davenport,  
petitioner. Leave to appeal, Appellate Court, First District.  
126420

The Supreme Court today DENIED the Petition for Leave to Appeal in the above entitled cause.

The mandate of this Court will issue to the Appellate Court on 12/23/2020.

Very truly yours,

*Carolyn Taft Gossboll*

Clerk of the Supreme Court