

Nos. 23-5243 & 23A93

In the Supreme Court of the United States

JOHNNY JOHNSON, PETITIONER,

v.

DAVID VANDERGRIFF, RESPONDENT.

*On Petition for Writ of Certiorari to the
Supreme Court of Missouri*

RESPONDENT'S APPENDIX TO BRIEF IN OPPOSITION

ANDREW BAILEY
Missouri Attorney General

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Counsel of Record*

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Assistant Attorney General

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Declaration of Angela “Angie” Wideman


I, Angela “Angie” Wideman, do hereby state the following:

1. I am over the age of 18, I am competent to make this declaration, and most importantly, I am the mother of Casey Williamson.
2. Since Johnny Johnson kidnapped, attempted to rape, and murdered my daughter, my family and I have been forced to endure many tragedies that are the direct result of Johnson’s murder of Casey.
3. Casey’s murder has cost me my mental wellness and the mental health of multiple family members. My oldest daughter, who was twelve when her sister Casey was brutally murdered, could never accept what happened; she self-medicated and eventually lost her life as well. Johnson took both daughters from me. Since losing Casey, I have struggled with anxiety, depression, PTSD, nightmares, insomnia and fibromyalgia. My two remaining children lost two sisters and a mom—due to PTSD. They have both suffered with anxiety, depression and PTSD. My brother—who identified Casey’s body—suffered a mental breakdown. My father drank himself to death following the death of Casey. I will never be the same as I was before Johnson murdered Casey. I will never trust, I will never be at peace, I will never stop having nightmares that I have to wake up from only to return to this nightmare that is life. Johnson did not just inflict everlasting pain on Casey - but on myself and my entire family and community.
4. I know that I did not have a decision or say in the punishment that Johnson received. This was decided by the State, a judge, and a jury of his peers. I have faith in my God that he and the legal system will carry Johnson’s sentence.
5. After more than twenty years, I hoped I would receive closure on August 1, 2023, when Johnson was to be executed.
6. On July 25, 2023, I received a phone call from the victim advocate at the Missouri Attorney General’s Office. The victim advocate informed me that the United States Court of Appeals for the Eighth Circuit issued a stay of execution. I felt like the news was a “double whammy” because of the anniversary of my daughter’s murder. I told the victim advocate to please let me know if there was anything I could do, or if I could make a statement.

7. The news that the court entered a stay was heart wrenching and scary. I know that I cannot emotionally and physically do this again. I have fought for twenty-one years to get justice for Casey. I feel that an execution is the only way that I and the community can be assured that Johnson can never do this to anyone else. I know that Johnson's execution won't bring Casey back, but I hope that Johnson's execution will give me peace of mind. Johnson's execution will finally give me the chance to get closure by letting me never think about Johnson again so that I can remember my daughter for who she was, not what happened to her.
8. In the hours after that phone call, I reflected on the news and my daughter's murder. The news has consumed me.
9. On the morning of July 26, 2023, the twenty-first anniversary of Casey's murder, I contacted the victim advocate because this news has been very difficult for me emotionally. That day, I sent the victim advocate a copy of a letter that I sent to the Governor of Missouri when I learned that Johnson had requested clemency. That letter set forth the information contained in paragraph three above.
10. Later that day, the Missouri Attorney General's Office assisted me in drafting this declaration. The declaration is in my own words and reflects my thoughts and feelings, as well as the thoughts and feelings of my family.
11. I have provided this declaration with the request that the Missouri Attorney General's Office will provide it to courts during the course of the litigation.
12. The Missouri Attorney General's Office has informed me that a stay of execution will delay this case for months or years.
13. The news that the litigation could last for months or years feels so unfair. Johnson has had years of litigation; Casey never got that chance. Johnson received twenty-one years that Casey never had the chance to have. My family has suffered for twenty-one years. I am so worried that my family will not be able to endure litigation for months or years. I know that I cannot endure this litigation for much longer.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 7/26/23.



Angela "Angie" Wideman

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** OBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

HGA1C	5.6		20230123	090928
n	Y/N	PATIENT EXHIBITING SIDE EFFECTS FROM MEDICATION	20230123	090928
y	Y/N	PATIENT STATES MEDICATION(S) IS/ARE WORKING	20230123	090928
y	Y/N	PATIENT IS MEDICATION COMPLIANT (BASED ON	20230123	090928
		REVIEW OF MEDICATION ADMINISTRATION RECORD/MAR)	20230123	090928
			20230123	090928
		Denied SI/HI	20230123	090928
ASSESSMENT				
		METABOLIC MONITORING FOR PRESCRIBED ATYPICAL ANTIPSYCHOTIC	20230123	090928
		MEDICATION	20230123	090928
		NAME OF ATYPICAL ANTIPSYCHOTIC(S)	20230123	090928
		Abilify	20230123	090928
PLAN				
		METABOLIC SYNDROME DEFINED AS WAIST CIRCUMFERENCE > 40"	20230123	090928
		(MEN), > 35" (WOMEN); FASTING TRIGLYCERIDES > 150/DL, HDL <	20230123	090928
		40/DL (MEN), < 50 DL (WOMEN); BLOOD PRESSURE 130/85 MMHG;	20230123	090928
		FASTING GLUCOSE > 110 MG/DL	20230123	090928
		LAB VALUE(S)/SYMPTOMS REPORTED TO PROVIDER:	20230123	090928
n	Y/N	INCREASE IN FASTING PLASMA GLUCOSE	20230123	090928
n	Y/N	INCREASE IN FLP	20230123	090928
n	Y/N	INCREASE IN WEIGHT	20230123	090928
n	Y/N	INCREASE IN BP	20230123	090928
n	Y/N	OTHER SYMPTOMS, DESCRIBE	20230123	090928
PATIENT EDUCATION PROVIDED REGARDING:				
y	Y/N	PURPOSE OF MEDICATION	20230123	090928
y	Y/N	MEDICATION SIDE EFFECTS	20230123	090928
n	Y/N	OTHER (DESCRIBE)	20230123	090928
			20230123	090928

NURSE CEB002EMMH CHRISTINE E BALLARD

MSR DATE TIME COMPLAINT *****
01/20/2023 05:36 P QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 01/23/2023 TIME 12:30 P SHOW UP Y PCC

SUBJECTIVE

Met with offender from approx 140-150 pm for CC appt.	20230123	151400
Inmate said he was released from seg and went back to the	20230123	151400
PCU a couple weeks ago. He said he's adjusting well.	20230123	151400
He doesn't currently have a cell mate. He hasn't had any	20230123	151400
violations.	20230123	151400
He reports he's doing better and is hearing less voices. He	20230123	151400
enjoys listening to music. He has been in contact with his	20230123	151400
sister and attorney. He talked about his sentence of	20230123	151400
execution and it potentially nearing. He said he's keeping	20230123	151400
positive and reading his bible.	20230123	151400
Offender reports medication compliance and denies side	20230123	151400
effects.	20230123	151400
He denied SI/HI. He said he's sleeping and eating well.	20230123	151400
He reports no additional concerns.	20230123	151400

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

**** OBJECTIVE CONTINUATION FROM PREVIOUS PAGE ****

OBJECTIVE	
Offender appeared alert and oriented x3.	20230123 151400
Mood was calm and affect congruent.	20230123 151400
Inmate maintained eye contact and speech was W/N/L.	20230123 151400
No signs of distress noted.	20230123 151400
Offender has redness on face and scalp.	20230123 151400
Inmate denied SI/HI and indicated future orientation.	20230123 151400
Offender hygiene was unremarkable.	20230123 151400
Inmate did not appear to be responding to internal stimuli and did not display bizarre thinking.	20230123 151400

ASSESSMENT	
Dx per psychiatrist	20230123 151400
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230123 151400
Problem:	20230123 151400
1.AH 0/7 days	20230123 151400
2. SW placement	20230123 151400
Goal:	20230123 151400
1. Offender will use coping skills to manage, maintain medication compliance, and report sx of greater than 0/7 days per week per self-report	20230123 151400
2. Offender will use coping skills as needed and report SI/HI to appropriate staff when needed.	20230123 151400
Target date: 2/23	20230123 151400
	20230123 151400
Current: Offender reports improvement. Progress noted.	20230123 151400

PLAN	
WILL HAVE CC F/U IN 30 DAYS.	20230123 151400

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****
01/23/2023 09:42 A MEDICAL REFERRAL

NURSE ENCOUNTER APPOINTMENT DATE	01/23/2023	TIME	09:00 A	SHOW UP	Y	PCC
SUBJECTIVE						
REFERRAL TO MEDICAL FOR THYROID LAB RESULTS COMPLETED						20230123 094451
OBJECTIVE						
ABNORMAL THYROID LABS						20230123 094451
ASSESSMENT						
LAB REVIEW						20230123 094451
PLAN						
See V.O per from Dr James: repeat TSH & T7 (thyroid index panel) and schedule to see him after labs.						20230123 094451
Labs scheduled 1/25/23. F/U appt sched 2/1/23						20230123 094451

NURSE CEB002EMMH CHRISTINE E BALLARD

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

MSR DATE TIME COMPLAINT *****
01/27/2023 05:03 P MH - REVISED TREATMENT PLAN

TECH/MH ENCOUNTER APPOINTMENT DATE 02/02/2023 TIME 08:45 A SHOW UP Y PCC
SUBJECTIVE

Met with offender for ITP revision. He participated in 20230202 091206
revision. He reports stability. He said he doesn't have AVH 20230202 091206
while on medication. He denies any depression or mood 20230202 091206
issues. He said he's an SR3 because he was swallowing razor 20230202 091206
blades to try to kill himself in 2006; confirmed by record. 20230202 091206
He said he no longer has SI/HI. 20230202 091206

STATE OF MISSOURI DOB: 3/16/1978 20230202 091206
DEPARTMENT OF CORRECTIONS IQ Score: 87 Low Average 20230202 091206
INDIVIDUAL TREATMENT PLAN Release Date: 99 99 9999 (CP) 20230202 091206

? INITIAL X REVISED DATE OF INITIAL 20230202 091206

PLAN 20230202 091206

May 2003 20230202 091206

OFFENDER NAME 20230202 091206

Johnson, Johnny DOC NUMBER 20230202 091206

534534 20230202 091206

MENTAL HEALTH 20230202 091206

3 SUICIDE RATING SCORE 20230202 091206

3 20230202 091206

DSM-IV-TR DIAGNOSIS (per psychiatrist) 20230202 091206

Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230202 091206

PSYCHOTROPIC MEDICATIONS 20230202 091206

ARIPIPIRAZOLE 20230202 091206

BENZTROPINE MESYLATE 20230202 091206

CLONIDINE 20230202 091206

LAMOTRIGINE 20230202 091206

PROBLEMS (PLEASE NUMBER) 20230202 091206

1. Offender has a history of auditory hallucinations. He 20230202 091206

reports none since taking medication. 20230202 091206

2. Offender is an SR3 due to swallowing multiple razor 20230202 091206

blades in 2006 to attempt suicide. He has not had any recent 20230202 091206

suicidality. 20230202 091206

GOALS (ACCORDING TO PROBLEM # ABOVE) 20230202 091206

1. Offender will remain free of AVH and maintain medication 20230202 091206

compliance. 20230202 091206

2. Offender will immediately report and suicidality to 20230202 091206

staff. 20230202 091206

CLIENT RESPONSIBILITIES TO ACHIEVE GOAL 20230202 091206

1. & 2. Offender will attend all MH appointments, maintain 20230202 091206

at least 90% medication compliance, report any changes in 20230202 091206

mood or symptoms, use rational thinking skills, and utilize 20230202 091206

appropriate coping skills. 20230202 091206

INTERVENTIONS AND RESPONSIBLE STAFF (ACCORDING TO PROBLEM #) 20230202 091206

1. & 2. Psychiatrist will assess mental health and prescribe 20230202 091206

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** SUBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

medication as necessary. RN will assess mental health, 20230202 091206
provide medication education, and assist in scheduling 20230202 091206
psychiatric appointments. QMHP will assess mental health, 20230202 091206
provide supportive therapy, and encourage use of appropriate 20230202 091206
coping skills. 20230202 091206

OBJECTIVE

Offender appeared alert and oriented x3. 20230202 091206
Mood was calm and affect congruent. 20230202 091206
Inmate maintained eye contact and speech was W/N/L. 20230202 091206
No signs of distress noted. 20230202 091206
Inmate denied SI/HI and indicated future orientation. 20230202 091206
Offender cell hygiene was unremarkable. 20230202 091206
Inmate did not appear to be responding to internal stimuli 20230202 091206
and did not display bizarre thinking. 20230202 091206

ASSESSMENT

DSM-IV-TR DIAGNOSIS (per psychiatrist) 20230202 091206
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230202 091206

PLAN

SILL BE REVIEWED AT TX TEAM & REVISED WHEN CLINICALLY 20230202 091206
NECESSARY. 20230202 091206

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****
02/13/2023 11:48 A PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP

DOCTOR ENCOUNTER APPOINTMENT DATE 02/15/2023 TIME 08:00 A SHOW UP Y PCC

SUBJECTIVE

PCC MHCCC 20230215 134212
Patient seen over Centurion Zoom telehealth connection; pt 20230215 134212
seen in PCC Mental Health office, provider located at his 20230215 134212
home in St. Louis. Christine Ballard LPN was present for the 20230215 134212
encounter. Pt provided signed consent for telehealth care, 20230215 134212
and self-identified with name, DOC# and DOB. 20230215 134212

CC: "everything's going pretty well?." 20230215 134212
- no complaints, questions or concerns. 20230215 134212
- Spends time listening to music and reading his bible 20230215 134212

ROS: denies any somatic complaints/concerns or rx SE's 20230215 134212
Mood: ?I'm feeling good." 20230215 134212
Sleep/Appetite/Concentration/Interest/Energy: ok 20230215 134212
SI/HI/DSH/PTOD: denies 20230215 134212

OBJECTIVE

MSE 20230215 134212
GAB: OK grooming, NAD, good eye contact, engaged and 20230215 134212
responsive, no RTIS 20230215 134212
SP: nl 20230215 134212
FOT: logical, linear, relevant 20230215 134212
TC: denies SI/HI, no grandiose/delusional statements 20230215 134212

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** OBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

Mood: ?I'm feeling good."	20230215 134212
Aff,: congruent, full amplitude	20230215 134212
S/I: A&Ox3, intellect grossly nl	20230215 134212
Memory: grossly nl	20230215 134212
I/J: poor-fair	20230215 134212
AIMS=0	20230215 134212
LABS 1/9/23: CMP nl. Lipids nl. CBC nl. UA nl. Alc 5.6.	20230215 134212
Thyroid panel: TSH nl, T4 1.8, T3 nl.	20230215 134212
LABS 1/27/23: TSH nl, T4 1.5, T3 nl.	20230215 134212
EKG 1/23/23: NSR QTc 412	20230215 134212

ASSESSMENT

A/P	20230215 134212
Dx: Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230215 134212
- Pt presents without evidence of imminent dangerousness to self/others.	20230215 134212
- Pt's presentation implies medical and behavioral stability. Thyroid labs are unusual and worth discussing with medical.	20230215 134212

PLAN

ARIPIPRAZOLE 30MG TAB
30MG PO QHS
090 30

BENZTROPINE MESYLATE 2 MG TABLET
2MG PO BID
090 60

LAMOTRIGINE 100MG TABS (FOR BIPOLAR)
100MG PO DAILY
090 30

CLONIDINE 0.1MG TAB (WATCH TAKE)
0.1MG PO QAM AND 0.2MG QHS
090 90

PLAN:

- Cont. aripiprazole 30mg daily
- Cont. Cogentin to 2mg BID
- Cont. Lamotrigine 100mg daily
- Cont. clonidine 0.1mg daily and 0.2mg qHS
- RTC 12 weeks
- Will email medical for consultation on thyroid function labs
- Pt provided verbal assent for this plan.

DOCTOR DJH000EMMH DAVINDER J HAYREH

MSR DATE	TIME	COMPLAINT	*****
02/17/2023	05:23 P	QMHP - CHRONIC CARE ENCOUNTER	

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

MSR DATE TIME COMPLAINT *****
03/03/2023 03:16 P QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 03/08/2023 TIME 12:45 P SHOW UP Y PCC

SUBJECTIVE

Met with offender from approx 1235-1245 pm for CC appt.	20230309	093237
Offender said he's doing well. His only complaint is dry	20230309	093237
mouth from his medication, which he has previously	20230309	093237
reported to psychiatry.	20230309	093237
He said the voices are still 'a whisper' and at baseline.	20230309	093237
He said his mood is good and he denies both depression and	20230309	093237
anxiety.	20230309	093237
He said his legal team is working on his case but he thinks	20230309	093237
he will be read his death warrant in the near future. QMHP	20230309	093237
processed this with him. He said he is feeling okay and	20230309	093237
isn't worried about it.	20230309	093237
Offender denies SI/HI and said he is hopeful but okay	20230309	093237
either way.	20230309	093237
Offender is in contact with his sister and grandmother. He	20230309	093237
described his sleep as 'iffy' but he has no major	20230309	093237
complaints. His appetite is appropriate.	20230309	093237
He is coping by drawing. He reports no issues in the HU or	20230309	093237
with his cell mate. He has not received any violations.	20230309	093237

OBJECTIVE

Offender appeared alert and oriented x3.	20230309	093237
Mood was calm and affect congruent.	20230309	093237
Insight and judgment were fair.	20230309	093237
Eye contact and speech were W/N/L.	20230309	093237
Grooming and hygiene were unremarkable.	20230309	093237
Offender denied SI/HI and indicated future orientation.	20230309	093237
He did not appear to be responding to internal stimuli or	20230309	093237
display bizarre thinking.	20230309	093237

ASSESSMENT

Dx per psychiatrist	20230309	093237
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230309	093237

PROBLEMS (PLEASE NUMBER)

1. Offender has a history of auditory hallucinations. He	20230309	093237
reports none since taking medication.	20230309	093237
2. Offender is an SR3 due to swallowing multiple razor	20230309	093237
blades in 2006 to attempt suicide. He has not had any recent	20230309	093237
suicidality.	20230309	093237

GOALS (ACCORDING TO PROBLEM # ABOVE)

1. Offender will remain free of AVH and maintain medication	20230309	093237
compliance.	20230309	093237
2. Offender will immediately report and suicidality to	20230309	093237
staff.	20230309	093237

Current: Offender indicates stability. Progress maintained. 20230309 093237

PLAN

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** PLAN CONTINUATION FROM PREVIOUS PAGE *****

WILL HAVE CC F/U IN 30 DAYS.

20230309 093237

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****

04/04/2023 04:49 P QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 04/06/2023 TIME 01:00 P SHOW UP Y PCC

SUBJECTIVE

met with offender in adseg pod for cc appt at 1250 pm	20230406	145341
Offender is denying having any MH issues at this time. He	20230406	145341
said he is taking his meds and they are effective. He	20230406	145341
reprots his eating and sleep as "good". Offender reports he	20230406	145341
gets alone with his cellie. He spends his time listening to	20230406	145341
music and pacing. QMHP asked aobut outside activity like	20230406	145341
walking, and he said he prefers to "be alone and pace".	20230406	145341
Offender has contact with his grandmother and sister.	20230406	145341

OBJECTIVE

Offender hygiene and grooming are wnl.	20230406	145341
Offender mood appears down and affect constricted.	20230406	145341
Offender slumps he shoulders when he walks.	20230406	145341
Offender denies any si/hi avh.	20230406	145341
Offender does not appear to be responding to any internal	20230406	145341
stimuli.	20230406	145341
Offender does not appear to be in any acute distress.	20230406	145341

ASSESSMENT

MH3 20230406 145341

Dx per psychiatrist 20230406 145341

Dx: Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230406 145341

20230406 145341

PLAN: 20230406 145341

- Cont. aripiprazole 30mg daily 20230406 145341

- Cont. Cogentin to 2mg BID 20230406 145341

- Cont. Lamotrigine 100mg daily 20230406 145341

- Cont. clonidine 0.1mg daily and 0.2mg qHS 20230406 145341

20230406 145341

PROBLEMS (PLEASE NUMBER) 20230406 145341

1. Offender has a history of auditory hallucinations. He 20230406 145341

reports none since taking medication. 20230406 145341

2. Offender is an SR3 due to swallowing multiple razor 20230406 145341

blades in 2006 to attempt suicide. He has not had any 20230406 145341

recent 20230406 145341

suicidality. 20230406 145341

GOALS (ACCORDING TO PROBLEM # ABOVE) 20230406 145341

1. Offender will remain free of AVH and maintain medication 20230406 145341

compliance. 20230406 145341

2. Offender will immediately report and suicidality to 20230406 145341

staff. 20230406 145341

CLIENT RESPONSIBILITIES TO ACHIEVE GOAL 20230406 145341

1. & 2. Offender will attend all MH appointments, maintain 20230406 145341

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** ASSESSMENT CONTINUATION FROM PREVIOUS PAGE *****

at least 90% medication compliance, report any changes in mood or symptoms, use rational thinking skills, and utilize appropriate coping skills.	20230406	145341
INTERVENTIONS AND RESPONSIBLE STAFF (ACCORDING TO PROBLEM #)	20230406	145341
1. & 2. Psychiatrist will assess mental health and prescribe medication as necessary. RN will assess mental health, provide medication education, and assist in scheduling psychiatric appointments. QMHP will assess mental health, provide supportive therapy, and encourage use of appropriate coping skills.	20230406	145341
Offender states he is taking his meds and he is not having any avh or suicidal thoughts.	20230406	145341

PLAN

QMHP will f/u with offender for cc in 30 days unless he completes an HSR.	20230406	145341
	20230406	145341

TECH./MH MCS000EMMH MARY C STRAUSS-BARRETT

MSR DATE TIME COMPLAINT *****
 04/20/2023 11:47 A QMHP - INDIVIDUAL ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 04/20/2023 TIME 11:15 A SHOW UP Y PCC

SUBJECTIVE
 1110-1120 am 20230420 115804

This QMHP was present at the request of the Warden while offender received notification of death warrant. 20230420 115804

Offender denied current mental health concerns or the need for one on one with mental health at this time. 20230420 115804

This QMHP was also present for administrative segregation hearing. 20230420 115804

QMHP spoke with offender briefly following the hearing. 20230420 115804

Offender acknowledged feeling sadness but that he is doing okay. He denied SI/HI. 20230420 115804

Offender requested drawing materials. FUM indicated approval for these items. 20230420 115804

OBJECTIVE

Offender appeared alert and oriented x3. 20230420 115804

Mood was calm and affect congruent. 20230420 115804

Inmate maintained eye contact and speech was W/N/L. 20230420 115804

He was tearful at times but calm. 20230420 115804

Inmate denied SI/HI and indicated future orientation. 20230420 115804

Offender hygiene was unremarkable. 20230420 115804

Inmate did not appear to be responding to internal stimuli and did not display bizarre thinking. 20230420 115804

ASSESSMENT

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** ASSESSMENT CONTINUATION FROM PREVIOUS PAGE *****

Dx per psychiatrist	20230420	115804
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230420	115805
PLAN		
Notified MHRD, MH DORS Contract Monitor, and ERDCC ICMHS.	20230420	115805

TECH./MH ASS000EMMH ASHLEY S SKAGGS

SPECIFIC CHARTING INFORMATION

04/25/2023

NO SIGNS OF TRAUMA	20230425	151811
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230425	151902
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230425	151902
NO CRYING	20230425	151902
YES ORIENTED X'S 3	20230425	151902
NO WITHDRAWN	20230425	151902
NO HOSTILE/ANGRY	20230425	151902
NO QUIET	20230425	151902
NO MANIC BEHAVIOR	20230425	151902
YES DENIES COMPLAINT	20230425	151902

MSR DATE TIME COMPLAINT *****
 04/26/2023 10:39 A QMHP - INDIVIDUAL ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 04/26/2023 TIME 08:00 A SHOW UP Y PCC

SUBJECTIVE

Individual Encounter time 8:15 am	20230426	161117
	20230426	161117
Met with offender at cell door in segregation due to no available office space. Offender reported he is doing as well as he can be at this time. He reported he has been talking with his grandmother. Offender reported no mental health concerns, such as increased anxiety, depression or psychosis. Offender requested drawing paper. QMHP will provide via institutional mail.	20230426	161117
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	20230426	161117
	20230426	161117
Offender denied current SI/HI. He denied wanting to die, kill himself, or go to sleep and not wake up over the past 30 days.	20230426	161117
	20230426	161117
	20230426	161117

OBJECTIVE

Offender presented with appropriate appearance for situation. Mood was cooperative. Mood was calm and affect restricted. Thought process linear and content free from hallucinations and delusions during encounter. Speech within normal limits, but quiet. Insight and judgment fair. Alert and oriented times three. Offender denied current SI.	20230426	161117
	20230426	161117
	20230426	161117
	20230426	161117
	20230426	161117
	20230426	161117
	20230426	161117

ASSESSMENT

MH3 per psychiatrist Dx: Unsp. Psychotic Disorder,	20230426	161117
Neurocognitive Disorder (Mod.)	20230426	161117

PLAN

FOLLOW UP AS NEEDED AND PER CC RECOMMENDATIONS	20230426	161117
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TECH./MH JLR001EMMH JENNIFER L ROACH-SANSONE

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

SPECIFIC CHARTING INFORMATION

05/02/2023

NO SIGNS OF TRAUMA	20230502	141002
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230502	141014
GAVE BLANK PAPER DURING ENCOUNTER FOR DRAWING	20230502	141014
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230502	141014
NO CRYING	20230502	141014
YES ORIENTED X'S 3	20230502	141014
NO WITHDRAWN	20230502	141014
NO HOSTILE/ANGRY	20230502	141014
NO QUIET	20230502	141014
NO MANIC BEHAVIOR	20230502	141014
YES DENIES COMPLAINT	20230502	141014

DOC ID OFFENDER
 00534534 JOHNNY A JOHNSON
 MSR DATE TIME COMPLAINT *****
 05/04/2023 02:43 P QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 05/04/2023 TIME 09:00 A SHOW UP Y PCC

SUBJECTIVE

QMHP attempted to pull offender out for appt but unable to do so due to HU issues/UOF. 20230505 144907
 Met with offender at cell door for CC appt from approx 905-910 am. 20230505 144907
 Offender was initially on the phone when QMHP arrived. QMHP returned and he came to the door. He said he's doing good overall. He denies current MH issues. 20230505 144907
 He said he's taking his medicine and denied side effects. 20230505 144907
 He denies SI/HI. 20230505 144907
 QMHP will f/u next week. 20230505 144907

OBJECTIVE

Offender appeared alert and oriented x3. 20230505 144907
 Mood was calm and affect congruent. 20230505 144907
 Inmate maintained eye contact and speech was W/N/L. 20230505 144907
 No signs of distress noted. 20230505 144907
 Inmate denied SI/HI and indicated future orientation. 20230505 144907
 Offender and cell hygiene were unremarkable. 20230505 144907
 Inmate did not appear to be responding to internal stimuli and did not display bizarre thinking. 20230505 144907

ASSESSMENT

Dx per psychiatrist 20230505 144907
 Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230505 144907

PROBLEMS (PLEASE NUMBER)

1. Offender has a history of auditory hallucinations. He reports none since taking medication. 20230505 144907
 2. Offender is an SR3 due to swallowing multiple razor blades in 2006 to attempt suicide. He has not had any recent suicidality. 20230505 144907

GOALS (ACCORDING TO PROBLEM # ABOVE)

1. Offender will remain free of AVH and maintain medication compliance. 20230505 144907
 2. Offender will immediately report and suicidality to staff. 20230505 144907

Current: Offender reports stability currently. 20230505 144907

PLAN

WILL HAVE CC F/U TO PULL OUT NEXT WEEK. M 20230505 144907

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****
 05/08/2023 10:03 A PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP

DOC ID OFFENDER

00534534 JOHNNY A JOHNSON

DOCTOR ENCOUNTER APPOINTMENT DATE 05/10/2023 TIME 08:15 A SHOW UP Y PCC

SUBJECTIVE

CC: "trying to hold up" 20230510 211433
 - Was informed of his execution date ~2 weeks ago (8/1/23). 20230510 211434
 Moved to 1HU at the same. 20230510 211434
 - dry mouth only somatic complaint 20230510 211434
 - Poor sleep due to rumination. Pt notes Seroquel has helped 20230510 211434
 sleep in the past. 20230510 211434
 - Listens to music and plays video games to pass the time. 20230510 211434
 Watches the TV's on the unit. Has regular contact with some 20230510 211434
 family. 20230510 211434

OBJECTIVE

MSE 20230510 211434
 GAB: OK grooming, NAD, good eye contact, engaged and 20230510 211434
 responsive, no RTIS 20230510 211434
 SP: nl 20230510 211434
 FOT: logical, linear, relevant 20230510 211434
 TC: denies SI/HI, no grandiose/delusional statements 20230510 211434
 Mood: nonspecifically reports stressed/anxious 20230510 211434
 Aff,: congruent, full amplitude 20230510 211434
 S/I: A&Ox3, intellect grossly <nl 20230510 211434
 Memory: grossly nl 20230510 211434
 I/J: poor-fair 20230510 211434
 AIMS=0 20230510 211434

ASSESSMENT

A/P 20230510 211434
 Dx: Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230510 211434
 - Pt presents without evidence of imminent dangerousness to 20230510 211434
 self/others. 20230510 211434
 - Pt's presentation implies medical and behavioral 20230510 211434
 stability. However, the acute impact of learning of his 20230510 211434
 execution day implies need for sleep rx. 20230510 211434

PLAN

ARIPIPRAZOLE 30MG TAB
 30MG PO QHS FOR PSYCHOSIS
 090 30
 CLONIDINE 0.1MG TAB (WATCH TAKE)
 0.1MG PO QAM AND 0.2MG QHS
 090 90
 LAMOTRIGINE 100MG TABS (FOR BIPOLAR)
 100MG PO QHS FOR MOOD STABILIZATION
 090 30

PLAN:

- cont abilify 30mg qHS, clonidine 0.1mg qAM and 0.2mg qHS,
 lamotrigine 100mg daily
 - start quetiapine 50mg qHS C/F for sleep
 - dc Cogentin due to xerostomia
 - consider artane if EPS ppx is indicated
 - RTC 2-4 weeks or as needed
 - pt gave verbal assent for this plan

DOCTOR DJH000EMMH DAVINDER J HAYREH

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

SPECIFIC CHARTING INFORMATION

05/09/2023		
NO SIGNS OF TRAUMA	20230509	160648
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230509	160651
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230509	160651
NO CRYING	20230509	160651
YES ORIENTED X'S 3	20230509	160651
NO WITHDRAWN	20230509	160651
NO HOSTILE/ANGRY	20230509	160651
NO QUIET	20230509	160651
NO MANIC BEHAVIOR	20230509	160651
YES DENIES COMPLAINT	20230509	160651

MSR DATE	TIME	COMPLAINT	*****
05/10/2023	03:15 P	QMHP - CHRONIC CARE ENCOUNTER	

TECH/MH ENCOUNTER APPOINTMENT DATE	05/10/2023	TIME	03:15 P	SHOW UP Y	PCC
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SUBJECTIVE

Met with offender in HU 1 office from approx 315-320 pm for CC appt.	20230510	152605
He said he's doing okay overall.	20230510	152605
He reports he is now having minor auditory hallucinations.	20230510	152605
He described them as laughing or chattering in his ear. He said he doesn't hear it constantly but a few times each day. He said it started a few weeks ago and attributes it to increased stress. He said he listens to music to drown it out and that is helpful.	20230510	152605
He has been drawing and talking to his sister or grandmother on the phone to pass the time.	20230510	152605
He reports his mood has been stable and he denies depression. He said he isn't sleeping well but he saw the psychiatrist and addressed it today.	20230510	152605
He said he is taking his current medication and denies side effects.	20230510	152605
He reports his appetite is appropriate. He said he is getting along fine with the other offenders in the unit and said he doesn't talk with them much.	20230510	152605
Offender denies SI/HI and said he's still working with his attorneys to fight his case as best as he can but he's at peace with whatever happens.	20230510	152605
He denies additional concerns.	20230510	152605

OBJECTIVE

Offender appeared alert and oriented x3.	20230510	152605
Mood was calm and affect congruent.	20230510	152605
Speech and eye contact were W/N/L.	20230510	152605
Insight and judgment were fair.	20230510	152605
Offender did not indicate SI/HI and indicated future orientation.	20230510	152605
No symptoms of severe depression, mania, or psychosis were observed.	20230510	152605

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** ASSESSMENT CONTINUATION FROM PREVIOUS PAGE *****

ASSESSMENT

Dx per psychiatrist 20230510 152605
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230510 152605

PROBLEMS (PLEASE NUMBER)

1. Offender has a history of auditory hallucinations. He reports none since taking medication. 20230510 152605

2. Offender is an SR3 due to swallowing multiple razor blades in 2006 to attempt suicide. He has not had any recent suicidality. 20230510 152605

GOALS (ACCORDING TO PROBLEM # ABOVE)

1. Offender will remain free of AVH and maintain medication compliance. 20230510 152605

2. Offender will immediately report and suicidality to staff. 20230510 152605

Current: Offender notes trouble with sleep but is managing well in the unit. Progress maintained. 20230510 152605

PLAN

WILL HAVE CC F/U IN 30 DAYS. 20230510 152605

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****
05/10/2023 03:28 P MH - 30 DAY SEG MENTAL STATUS EXAM

TECH/MH ENCOUNTER APPOINTMENT DATE 05/10/2023 TIME 03:30 P SHOW UP Y PCC

SUBJECTIVE

Met with offender in PRU office for 30 day eval and CC appt. 20230510 154631

Offender has been in seg since 4/20 after being read his death warrant. 20230510 154631

He will remain in seg until his execution date. 20230510 154631

He has not received any violations. He's keeping busy by drawing. He keeps in contact with his sister and grandmother. 20230510 154631

Offender saw psychiatry today; he is taking his medication and denies side effects. 20230510 154631

He is having issues with sleep. His appetite is appropriate. 20230510 154631

Offender reports no depression and denies SI/HI. Offender reports mild AH of 'chattering and laughing'. 20230510 154631

OBJECTIVE

See CC note same date 20230510 154631

ASSESSMENT

SEE CC NOTE SAME DATE 20230510 154631

PLAN

Offender MH status is maintaining. 20230510 154631

Will be seen in 30 days for CC f/u. 20230510 154631

TECH./MH ASS000EMMH ASHLEY S SKAGGS

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

SPECIFIC CHARTING INFORMATION

05/16/2023

NO SIGNS OF TRAUMA	20230516	145848
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230516	145852
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230516	145852
NO CRYING	20230516	145852
YES ORIENTED X'S 3	20230516	145852
NO WITHDRAWN	20230516	145852
NO HOSTILE/ANGRY	20230516	145852
NO QUIET	20230516	145852
NO MANIC BEHAVIOR	20230516	145852
YES DENIES COMPLAINT	20230516	145852

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

TECH/MH ENCOUNTER APPOINTMENT DATE 06/01/2023 TIME 02:45 P SHOW UP Y PCC

SUBJECTIVE

IPO requested MH summary. Sent same day. 20230601 145829

TECH./MH BJL000EMMH BARBARA J LINDELL

SPECIFIC CHARTING INFORMATION

06/06/2023

NO SIGNS OF TRAUMA	20230606	152256
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230606	152300
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230606	152300
NO CRYING	20230606	152300
YES ORIENTED X'S 3	20230606	152300
NO WITHDRAWN	20230606	152300
NO HOSTILE/ANGRY	20230606	152300
NO QUIET	20230606	152300
NO MANIC BEHAVIOR	20230606	152300
YES DENIES COMPLAINT	20230606	152300

MSR DATE TIME COMPLAINT *****

06/09/2023 01:43 P QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 06/09/2023 TIME 02:45 P SHOW UP Y PCC

SUBJECTIVE

Met with offender at cell door in seg from approx. 245-250 pm for CC appt.	20230609	153746
QMHP offered to pull offender out to speak in private but he declined, saying he isn't feeling well. He reports he has had a fever for a few days and has been 'cloudy headed'. Offender said medical has been notified and he should be seeing them soon.	20230609	153746
He denies any current MH sx. He said he's sleeping and eating well.	20230609	153746
He reports some mild depression related to nearing his execution date but he's staying positive.	20230609	153746
Offender keeps busy by listening to music. He has been talking with his attorneys and also his cousin and aunt.	20230609	153746
Offender is taking his medications and denies side effects.	20230609	153746
He denies SI/HI. He reports no AVH currently.	20230609	153746
He denies additional concerns at this time.	20230609	153746

OBJECTIVE

Offender appeared alert and oriented x3.	20230609	153746
Mood was calm and affect congruent.	20230609	153746
Speech and eye contact were W/N/L.	20230609	153746
Insight and judgment were fair.	20230609	153746
Offender did not indicate SI/HI and indicated future orientation.	20230609	153746
No symptoms of severe depression, mania, or psychosis were observed.	20230609	153746

ASSESSMENT

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** ASSESSMENT CONTINUATION FROM PREVIOUS PAGE *****

Dx per psychiatrist	20230609	153746
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230609	153746
	20230609	153746
PROBLEMS (PLEASE NUMBER)	20230609	153746
1. Offender has a history of auditory hallucinations. He reports none since taking medication.	20230609	153746
	20230609	153746
2. Offender is an SR3 due to swallowing multiple razor blades in 2006 to attempt suicide. He has not had any recent suicidality.	20230609	153746
	20230609	153746
	20230609	153746
GOALS (ACCORDING TO PROBLEM # ABOVE)	20230609	153746
1. Offender will remain free of AVH and maintain medication compliance.	20230609	153746
	20230609	153746
2. Offender will immediately report and suicidality to staff.	20230609	153746
	20230609	153746
	20230609	153746
Current: Offender indicates stability. Progress noted.	20230609	153746
PLAN		
WILL HAVE CC F/U IN 30 DAYS.	20230609	153746

TECH./MH ASS000EMMH ASHLEY S SKAGGS

SPECIFIC CHARTING INFORMATION

06/20/2023		
NO SIGNS OF TRAUMA	20230620	135526
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230620	135528
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230620	135528
NO CRYING	20230620	135528
YES ORIENTED X'S 3	20230620	135528
NO WITHDRAWN	20230620	135528
NO HOSTILE/ANGRY	20230620	135528
NO QUIET	20230620	135528
NO MANIC BEHAVIOR	20230620	135528
YES DENIES COMPLAINT	20230620	135528

MSR DATE	TIME	COMPLAINT	*****
06/26/2023	12:10 P	PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP	

DOCTOR ENCOUNTER APPOINTMENT DATE	06/27/2023	TIME	10:00 A	SHOW UP	Y	PCC
SUBJECTIVE						
PCC MHCCC						20230705 111752
CC: not specified						20230705 111752
- Pt reports doing ok, was having nightmares prior to his dc of Abilify at last encounter, but is doing better now, no concerns or SE's attributed to his lamictal or clonidine.						20230705 111752
						20230705 111752
- Pt reports some diarrhea in the last two weeks, believes he is doing better now that he is getting "vitamin C?K and all that stuff?orange soda?peanuts."						20230705 111752
						20230705 111752
- Staff had told me pt was forgetting legal calls. Pt denies this but states he doubts his presence is meaningful. Pt						20230705 111752
						20230705 111752

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** PLAN CONTINUATION FROM PREVIOUS PAGE *****

5MG PO QHS FOR PSYCHOSIS
090 30

- PLAN:
- start olanzapine 5mg qHS
 - continue clonidine 0.2mg qHS, lamotrigine 100mg qHS
 - LABS: none at this time
 - EKG: none at this time
 - RTC: 2-4 weeks or as needed
 - Pt provided verbal assent for this plan. Pt educated on need for adherence to treatment, and possible outcomes if nonadherent.
 - Plan review of lamotrigine use at f/u.

DOCTOR DJH000EMMH DAVINDER J HAYREH

SPECIFIC CHARTING INFORMATION

06/27/2023		
NO SIGNS OF TRAUMA	20230627	113618
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230627	113622
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230627	113622
NO CRYING	20230627	113622
YES ORIENTED X'S 3	20230627	113622
NO WITHDRAWN	20230627	113622
NO HOSTILE/ANGRY	20230627	113622
NO QUIET	20230627	113622
NO MANIC BEHAVIOR	20230627	113622
YES DENIES COMPLAINT	20230627	113622

MSR DATE TIME COMPLAINT *****
 07/03/2023 02:07 P BLOOD PRESSURE CHECK

SPECIFIC CHARTING INFORMATION

07/05/2023		
NO SIGNS OF TRAUMA	20230705	151210
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230705	151212
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230705	151212
NO CRYING	20230705	151212
YES ORIENTED X'S 3	20230705	151212
NO WITHDRAWN	20230705	151212
NO HOSTILE/ANGRY	20230705	151212
NO QUIET	20230705	151212
NO MANIC BEHAVIOR	20230705	151212
YES DENIES COMPLAINT	20230705	151212

MSR DATE TIME COMPLAINT *****
 07/10/2023 10:01 A QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 07/10/2023 TIME 09:45 A SHOW UP Y PCC

SUBJECTIVE
 Met with offender in PRU group room from approx. 945-955 am 20230710 142351

DOC ID OFFENDER

00534534 JOHNNY A JOHNSON

***** SUBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

for CC appt.	20230710	142351
As QMHP was leaving to meet with offender, the HU CCM	20230710	142351
reported he had broken his tablet by throwing it and his	20230710	142351
cell was very dirty.	20230710	142351
Offender reports he doesn't know what happened when asked	20230710	142351
what has been going on. He reports he had 'blacked out' and	20230710	142351
doesn't recall much. He said he has experienced this off	20230710	142351
and on for the past few years but it just started again	20230710	142351
recently. He said he thinks it's because of a new	20230710	142351
medication. He also described 'brain zaps and shocks' that	20230710	142351
lead to the 'blackouts'. He described it as 'sitting there	20230710	142351
and then kinda falling out or asleep but I'm actually	20230710	142351
awake but I don't remember'. He said when he broke his	20230710	142351
tablet approx. 4-5 days ago, he doesn't remember why he did	20230710	142351
it. He said all he remembers is the noise of breaking it	20230710	142351
and an officer asking what he was doing & he said 'I don't	20230710	142351
know'.	20230710	142351
Offender denies hearing any voices or seeing anything not	20230710	142351
real. He denied feeling like people are after him.	20230710	142351
Offender admitted he hadn't felt like showering or doing	20230710	142351
anything for a while. He said he had been having 'just real	20230710	142351
weird dreams about stuff' up until about 1 week ago.	20230710	142351
He denies any urges to harm himself or anyone else.	20230710	142351
QMHP asked if he is feeling more anxious as the execution	20230710	142351
date gets closer and he said 'nah, I'm not worried about	20230710	142351
that'.	20230710	142351
QMHP asked what he thought was going to happen and he said	20230710	142351
'I just leave that to the attorneys'.	20230710	142351
Offender denies any anxiety or depression. He said he's	20230710	142351
eating well.	20230710	142351
Offender denies SI/HI.	20230710	142351
He said he's been having visits with his attorneys. He	20230710	142351
reports he talks to the mother of his son and his son some.	20230710	142351
He said he occasionally talks to his sister. He said he	20230710	142351
hasn't had a visit with any family 'in some years' but it	20230710	142351
doesn't bother him.	20230710	142351
QMHP asked if he would be willing to see the psychiatrist	20230710	142351
this week and raise his medication and he was agreeable.	20230710	142351
OBJECTIVE		
Offender appeared alert and oriented x3.	20230710	142351
Mood was calm & nonchalant. Affect was flat, which is	20230710	142351
baseline.	20230710	142351
Offender grooming was unkempt. His hair and clothing were	20230710	142351
disheveled more so than usual. QMHP viewed the inside of	20230710	142351
the cell prior to the appt and there were bags of food and	20230710	142351
trash throughout the floor. There was also piles of wet	20230710	142351
clothing and a strong musky odor in the cell.	20230710	142351
Eye contact and speech were W/N/L.	20230710	142351
Offender did not appear anxious throughout appt.	20230710	142351
Offender denied SI/HI and indicate future orientation.	20230710	142351

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** OBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

Inmate did not appear to be responding to internal stimuli. 20230710 142351
ASSESSMENT

Dx per psychiatrist 20230710 142351
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230710 142351

PROBLEMS (PLEASE NUMBER) 20230710 142351

1. Offender has a history of auditory hallucinations. He reports none since taking medication. 20230710 142351

2. Offender is an SR3 due to swallowing multiple razor blades in 2006 to attempt suicide. He has not had any recent suicidality. 20230710 142351

Current: Offender reports bizarre bx. No progress noted. 20230710 142351

PLAN

Will have CC f/u in 1 week. 20230710 142351

QMHP consulted psychiatrist regarding reported concerns. 20230710 142351

Will be scheduled with psychiatry tomorrow. 20230710 142351

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****
07/10/2023 10:21 A PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP

DOCTOR ENCOUNTER APPOINTMENT DATE 07/11/2023 TIME 08:30 A SHOW UP Y PCC

SUBJECTIVE

PCC MHCCC 20230711 085658

CC: "I broke my tablet." 20230711 085658

- Pt seen for f/u in MH offices. Pt reports he broke his 20230711 085658

tablet some days ago in a fit of frustration and anger over 20230711 085658

"brain zaps" and voices talking to him, both of which have 20230711 085658

waxed and waned over the years and may be related to stress. 20230711 085658

He says he is doing better now, that the start of olanzapine 20230711 085658

caused the voices to essentially disappear, and denied that 20230711 085658

any appearance of being distracted during our interaction 20230711 085658

was response to a hallucinatory stimulus. He denied feeling 20230711 085658

like AVH or demons were driving his behaviors or otherwise 20230711 085658

intruding beyond the frustration noted above. 20230711 085658

- Pt agreed that he had been taking worse care of his cell 20230711 085658

and needed to work better with available laundry services. 20230711 085658

He said he was "losing touch with reality" but then 20230711 085658

clarified that this meant he is giving up in advanced of his 20230711 085658

Aug. 1st execution date. 20230711 085658

- Pt notes, however, that there is still a motion in place 20230711 085658

for clemency that is ongoing. 20230711 085658

- Pt denies concerns with the olanzapine, was vague on 20230711 085658

whether his dose had been increased last, but did note he 20230711 085658

slept well last night. 20230711 085658

- Pt had no other complaints or concerns. 20230711 085658

20230711 085658

ROS: denies all somatic complaints or rx SE's 20230711 085658

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** SUBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

Mood: "better" 20230711 085658
Sleep/Appetite/Concentration/Interest/Energy: ok 20230711 085658
SI/HI/DSH/PTOD: denies 20230711 085658

OBJECTIVE

MSE 20230711 085658
GAB: Disheveled, facial rash, NAD, not malodorous, good eye 20230711 085658
contact, engaged and responsive though with irregular degees 20230711 085658
of latency for his responses, episodes of thought blocking 20230711 085658
vs internal or external distraction/preoccupation 20230711 085658
SP: nl 20230711 085658
FOT: logical, linear, relevant 20230711 085658
TC: denies SI/HI, no grandiose/delusional statements, 20230711 085658
significant poverty of content 20230711 085658
Mood: "better" 20230711 085658
Aff,: congruent, full amplitude 20230711 085658
S/I: grossly A&O, intellect grossly <nl 20230711 085658
Memory: grossly nl 20230711 085658
I/J: fair 20230711 085658
20230711 085728
20230711 085728

ADDENDUM: AIMS=0

ASSESSMENT

ASSESSMENT: 20230711 085658
Dx: Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230711 085658
- Pt presents without evidence of imminent dangerousness to 20230711 085658
self/others. 20230711 085658
- Pt's condition appears similar to, possibly improved over, 20230711 085658
last encounter. If additional interventions are indicated, 20230711 085658
they will hopefully happen as a result of more frequent 20230711 085658
staff engagement with pt's condition. 20230711 085658

PLAN

PLAN:
- Continue olanzapine 10mg qHS, clonidine 0.2mg qHS, 20230711 085658
lamotrigine 100mg qHS
- Pt offered whatever measures we can provide to help 20230711 085658
improve his material or other comfort.
- LABS: none at this time
- EKG: none at this timeded
- RTC: 2 weeks or as needed for this plan.
- Pt provided verbal assent for this plan. Pt educated on 20230711 085658
need for adherence to treatment, and possible outcomes if
nonadherent.

DOCTOR DJH000EMMH DAVINDER J HAYREH

MSR DATE TIME COMPLAINT *****
07/10/2023 10:49 A MH - NON-CONTACT NOTE

DOCTOR ENCOUNTER APPOINTMENT DATE 07/10/2023 TIME 11:00 A SHOW UP Y PCC

SUBJECTIVE
PCC MHCCC 20230710 111347

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** SUBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

20230710 111347	
20230710 111347	Contacted remotely, spoke with Ashley Skaggs:
20230710 111347	Pt's cell smells of "mildew and filth," clothes wet as if
20230710 111347	laundered but not allowed to dry.
20230710 111347	Per case manager, pt destroyed his tablet few days ago.
20230710 111347	Ashley reports he couldn't explain why when asked today.
20230710 111347	Pt reports he now has "brain zaps, electric shocks" and
20230710 111347	blackouts. not able to sleep. He reports olanzapine
20230710 111347	adherence since start 7/5/23.
20230710 111347	Previously broke tv in PC wing and said it was talking to
20230710 111347	him, didn't say so this time (see note 10/26/22).
20230710 111347	Was with attorneys all weekend. Unclear if this was somehow
20230710 111347	relevant to these developments.

ASSESSMENT

20230710 111347	ASSESSMENT:
20230710 111347	Associating these observations with olanzapine is difficult,
20230710 111347	as olanzapine should have different, if not frankly
20230710 111347	opposite, effects. Reported paresthesia-like phenomena sound
20230710 111347	more like SSRI withdrawal, which is peculiar, bit are not
20230710 111347	likely to be harmful in the immediate term; pt should be
20230710 111347	safe pending further assessment in person.
20230710 111347	
20230710 111347	There is the remote possibility of a Guillain-Barre-like
20230710 111347	reaction to olanzapine. While the sx mentioned above do not
20230710 111347	match conventional sensory early GBS, assessment will need
20230710 111347	to take this possibility into account.
20230710 111347	
20230710 111347	Online information does not imply an interaction between
20230710 111347	olanzapine, clonidine and lamotrigine beyond possible
20230710 111347	hemodynamic changes. On balance, pt's psychosis remains a
20230710 111347	therapeutic target and is likely to be a strong contributor
20230710 111347	to sx observed to date.

PLAN

OLANZAPINE 10MG TAB
10MG PO QHS FOR PSYCHOSIS
090 30

PLAN:

- increase olanzapine to 10mg qHS
- Continue lamotrigine, clonidine
- See pt in person at first available opportunity.
- Verify vitals at f/u

DOCTOR DJH000EMMH DAVINDER J HAYREH

SPECIFIC CHARTING INFORMATION

07/11/2023

20230711 110158	NO SIGNS OF TRAUMA
20230711 110202	NO MEDICAL/MENTAL HEALTH COMPLAINTS
20230711 110202	NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS
20230711 110202	NO CRYING

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** SPECIFIC CHARTING INFORMATION CONTINUATION FROM PREVIOUS PAGE *****

YES ORIENTED X'S 3	20230711	110202
NO WITHDRAWN	20230711	110202
NO HOSTILE/ANGRY	20230711	110202
NO QUIET	20230711	110202
NO MANIC BEHAVIOR	20230711	110202
YES DENIES COMPLAINT	20230711	110202

MSR DATE TIME COMPLAINT *****
07/17/2023 02:01 P QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 07/17/2023 TIME 01:30 P SHOW UP Y PCC

SUBJECTIVE

Met with offender in PRU office for f/u CC appt.	20230718	140513
Offender said he's doing a lot better. He said the 'brain shocks' have gotten better.	20230718	140513
He said he's sleeping good. He admits he had been hearing voices last week but reports none currently.	20230718	140513
He said he has been talking with his son, son's mother, and sister and thinks they will come visit soon. He said he has been seeing his attorney's still.	20230718	140513
Offender received a new tablet and said he's been listening to music to pass his time.	20230718	140513
He admitted feeling 'a little worried' about his upcoming execution but his legal team is helping him feel better about it and told him 'not to worry'. Offender said he doesn't know what happens 'on the other side', saying 'I'm not sure what will happen. I've never died before' but claims he isn't concerned about it.	20230718	140513
Inmate denies SI/HI. He said he's taking his medication and denies side effects. He denies additional concerns.	20230718	140513

OBJECTIVE

Offender appeared alert and oriented x3.	20230718	140513
Mood was calm and affect congruent- at baseline.	20230718	140513
Inmate maintained eye contact and speech was W/N/L.	20230718	140513
No signs of distress noted.	20230718	140513
Inmate denied SI/HI and indicated future orientation.	20230718	140513
Offender and cell hygiene were appropriate and much improved from prior week.	20230718	140513
Inmate did not appear to be responding to internal stimuli and did not display bizarre thinking.	20230718	140513

ASSESSMENT

Dx per psychiatrist	20230718	140513
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230718	140513

PROBLEMS (PLEASE NUMBER)

1. Offender has a history of auditory hallucinations. He reports none since taking medication.	20230718	140513
2. Offender is an SR3 due to swallowing multiple razor blades in 2006 to attempt suicide. He has not had any recent suicidality.	20230718	140513

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** ASSESSMENT CONTINUATION FROM PREVIOUS PAGE *****

Current: Improvement noted.

20230718 140513
20230718 140513

PLAN
WILL HAVE CC F/U IN 30 DAYS.

20230718 140513

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****
07/17/2023 11:06 P REFUSAL OF MEDICATION

SPECIFIC CHARTING INFORMATION

07/18/2023

NO SIGNS OF TRAUMA	20230718 111400
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230718 111402
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230718 111402
NO CRYING	20230718 111402
YES ORIENTED X'S 3	20230718 111402
NO WITHDRAWN	20230718 111402
NO HOSTILE/ANGRY	20230718 111402
NO QUIET	20230718 111402
NO MANIC BEHAVIOR	20230718 111402
YES DENIES COMPLAINT	20230718 111402

DOC ID OFFENDER
 00534534 JOHNNY A JOHNSON
 MSR DATE TIME COMPLAINT *****
 07/10/2023 10:01 A QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 07/10/2023 TIME 09:45 A SHOW UP Y PCC

SUBJECTIVE

Met with offender in PRU group room from approx. 945-955 am 20230710 142351
 for CC appt. 20230710 142351
 As QMHP was leaving to meet with offender, the HU CCM 20230710 142351
 reported he had broken his tablet by throwing it and his 20230710 142351
 cell was very dirty. 20230710 142351
 Offender reports he doesn't know what happened when asked 20230710 142351
 what has been going on. He reports he had 'blacked out' and 20230710 142351
 doesn't recall much. He said he has experienced this off 20230710 142351
 and on for the past few years but it just started again 20230710 142351
 recently. He said he thinks it's because of a new 20230710 142351
 medication. He also described 'brain zaps and shocks' that 20230710 142351
 lead to the 'blackouts'. He described it as 'sitting there 20230710 142351
 and then kinda falling out or asleep but I'm actually 20230710 142351
 awake but I don't remember'. He said when he broke his 20230710 142351
 tablet approx. 4-5 days ago, he doesn't remember why he did 20230710 142351
 it. He said all he remembers is the noise of breaking it 20230710 142351
 and an officer asking what he was doing & he said 'I don't 20230710 142351
 know'. 20230710 142351
 Offender denies hearing any voices or seeing anything not 20230710 142351
 real. He denied feeling like people are after him. 20230710 142351
 Offender admitted he hadn't felt like showering or doing 20230710 142351
 anything for a while. He said he had been having 'just real 20230710 142351
 weird dreams about stuff' up until about 1 week ago. 20230710 142351
 He denies any urges to harm himself or anyone else. 20230710 142351
 QMHP asked if he is feeling more anxious as the execution 20230710 142351
 date gets closer and he said 'nah, I'm not worried about 20230710 142351
 that'. 20230710 142351
 QMHP asked what he thought was going to happen and he said 20230710 142351
 'I just leave that to the attorneys'. 20230710 142351
 Offender denies any anxiety or depression. He said he's 20230710 142351
 eating well. 20230710 142351
 Offender denies SI/HI. 20230710 142351
 He said he's been having visits with his attorneys. He 20230710 142351
 reports he talks to the mother of his son and his son some. 20230710 142351
 He said he occasionally talks to his sister. He said he 20230710 142351
 hasn't had a visit with any family 'in some years' but it 20230710 142351
 doesn't bother him. 20230710 142351
 QMHP asked if he would be willing to see the psychiatrist 20230710 142351
 this week and raise his medication and he was agreeable. 20230710 142351

OBJECTIVE

Offender appeared alert and oriented x3. 20230710 142351
 Mood was calm & nonchalant. Affect was flat, which is 20230710 142351
 baseline. 20230710 142351
 Offender grooming was unkempt. His hair and clothing were 20230710 142351
 disheveled more so than usual. QMHP viewed the inside of 20230710 142351
 the cell prior to the appt and there were bags of food and 20230710 142351

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** OBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

trash throughout the floor. There was also piles of wet	20230710	142351
clothing and a strong musky odor in the cell.	20230710	142351
Eye contact and speech were W/N/L.	20230710	142351
Offender did not appear anxious throughout appt.	20230710	142351
Offender denied SI/HI and indicate future orientation.	20230710	142351
Inmate did not appear to be responding to internal stimuli.	20230710	142351

ASSESSMENT

Dx per psychiatrist	20230710	142351
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230710	142351

PROBLEMS (PLEASE NUMBER)

1. Offender has a history of auditory hallucinations. He reports none since taking medication.	20230710	142351
2. Offender is an SR3 due to swallowing multiple razor blades in 2006 to attempt suicide. He has not had any recent suicidality.	20230710	142351
Current: Offender reports bizarre bx. No progress noted.	20230710	142351

PLAN

Will have CC f/u in 1 week.	20230710	142351
QMHP consulted psychiatrist regarding reported concerns.	20230710	142351
Will be scheduled with psychiatry tomorrow.	20230710	142351

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE TIME COMPLAINT *****
07/10/2023 10:21 A PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP

DOCTOR ENCOUNTER APPOINTMENT DATE 07/11/2023 TIME 08:30 A SHOW UP Y PCC

SUBJECTIVE

PCC MHCCC	20230711	085658
CC: "I broke my tablet."	20230711	085658
- Pt seen for f/u in MH offices. Pt reports he broke his tablet some days ago in a fit of frustration and anger over "brain zaps" and voices talking to him, both of which have waxed and waned over the years and may be related to stress. He says he is doing better now, that the start of olanzapine caused the voices to essentially disappear, and denied that any appearance of being distracted during our interaction was response to a hallucinatory stimulus. He denied feeling like AVH or demons were driving his behaviors or otherwise intruding beyond the frustration noted above.	20230711	085658
- Pt agreed that he had been taking worse care of his cell and needed to work better with available laundry services. He said he was "losing touch with reality" but then clarified that this meant he is giving up in advanced of his Aug. 1st execution date.	20230711	085658
- Pt notes, however, that there is still a motion in place for clemency that is ongoing.	20230711	085658
- Pt denies concerns with the olanzapine, was vague on	20230711	085658

DOC ID OFFENDER

00534534 JOHNNY A JOHNSON

***** SUBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

whether his dose had been increased last, but did note he	20230711	085658
slept well last night.	20230711	085658
- Pt had no other complaints or concerns.	20230711	085658
ROS: denies all somatic complaints or rx SE's	20230711	085658
Mood: "better"	20230711	085658
Sleep/Appetite/Concentration/Interest/Energy: ok	20230711	085658
SI/HI/DSH/PTOD: denies	20230711	085658

OBJECTIVE

MSE	20230711	085658
GAB: Disheveled, facial rash, NAD, not malodorous, good eye	20230711	085658
contact, engaged and responsive though with irregular degees	20230711	085658
of latency for his responses, episodes of thought blocking	20230711	085658
vs internal or external distraction/preoccupation	20230711	085658
SP: nl	20230711	085658
FOT: logical, linear, relevant	20230711	085658
TC: denies SI/HI, no grandiose/delusional statements,	20230711	085658
significant poverty of content	20230711	085658
Mood: "better"	20230711	085658
Aff,: congruent, full amplitude	20230711	085658
S/I: grossly A&O, intellect grossly <nl	20230711	085658
Memory: grossly nl	20230711	085658
I/J: fair	20230711	085658
	20230711	085728
ADDENDUM: AIMS=0	20230711	085728

ASSESSMENT

ASSESSMENT:	20230711	085658
Dx: Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230711	085658
- Pt presents without evidence of imminent dangerousness to	20230711	085658
self/others.	20230711	085658
- Pt's condition appears similar to, possibly improved over,	20230711	085658
last encounter. If additional interventions are indicated,	20230711	085658
they will hopefully happen as a result of more frequent	20230711	085658
staff engagement with pt's condition.	20230711	085658

PLAN

PLAN:		
- Continue olanzapine 10mg qHS, clonidine 0.2mg qHS,		
lamotrigine 100mg qHS		
- Pt offered whatever measures we can provide to help		
improve his material or other comfort.		
- LABS: none at this time		
- EKG: none at this timeded		
- RTC: 2 weeks or as needed for this plan.		
- Pt provided verbal assent for this plan. Pt educated on		
need for adherence to treatment, and possible outcomes if		
nonadherent.		

DOCTOR DJH000EMMH DAVINDER J HAYREH

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

MSR DATE TIME COMPLAINT *****
07/10/2023 10:49 A MH - NON-CONTACT NOTE

DOCTOR ENCOUNTER APPOINTMENT DATE 07/10/2023 TIME 11:00 A SHOW UP Y PCC

SUBJECTIVE

PCC MHCCC	20230710	111347
	20230710	111347
Contacted remotely, spoke with Ashley Skaggs:	20230710	111347
Pt's cell smells of "mildew and filth," clothes wet as if	20230710	111347
laundered but not allowed to dry.	20230710	111347
Per case manager, pt destroyed his tablet few days ago.	20230710	111347
Ashley reports he couldn't explain why when asked today.	20230710	111347
Pt reports he now has "brain zaps, electric shocks" and	20230710	111347
blackouts. not able to sleep. He reports olanzapine	20230710	111347
adherence since start 7/5/23.	20230710	111347
Previously broke tv in PC wing and said it was talking to	20230710	111347
him, didn't say so this time (see note 10/26/22).	20230710	111347
Was with attorneys all weekend. Unclear if this was somehow	20230710	111347
relevant to these developments.	20230710	111347

ASSESSMENT

ASSESSMENT:	20230710	111347
Associating these observations with olanzapine is difficult,	20230710	111347
as olanzapine should have different, if not frankly	20230710	111347
opposite, effects. Reported paresthesia-like phenomena sound	20230710	111347
more like SSRI withdrawal, which is peculiar, bit are not	20230710	111347
likely to be harmful in the immediate term; pt should be	20230710	111347
safe pending further assessment in person.	20230710	111347
	20230710	111347
There is the remote possibility of a Guillain-Barre-like	20230710	111347
reaction to olanzapine. While the sx mentioned above do not	20230710	111347
match conventional sensory early GBS, assessment will need	20230710	111347
to take this possibility into account.	20230710	111347
	20230710	111347
Online information does not imply an interaction between	20230710	111347
olanzapine, clonidine and lamotrigine beyond possible	20230710	111347
hemodynamic changes. On balance, pt's psychosis remains a	20230710	111347
therapeutic target and is likely to be a strong contributor	20230710	111347
to sx observed to date.	20230710	111347

PLAN

OLANZAPINE 10MG TAB
10MG PO QHS FOR PSYCHOSIS
090 30

PLAN:

- increase olanzapine to 10mg qHS
- Continue lamotrigine, clonidine
- See pt in person at first available opportunity.
- Verify vitals at f/u

DOCTOR DJH000EMMH DAVINDER J HAYREH

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

SPECIFIC CHARTING INFORMATION

07/11/2023

NO SIGNS OF TRAUMA	20230711	110158
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230711	110202
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230711	110202
NO CRYING	20230711	110202
YES ORIENTED X'S 3	20230711	110202
NO WITHDRAWN	20230711	110202
NO HOSTILE/ANGRY	20230711	110202
NO QUIET	20230711	110202
NO MANIC BEHAVIOR	20230711	110202
YES DENIES COMPLAINT	20230711	110202

MSR DATE TIME COMPLAINT *****

07/17/2023 02:01 P QMHP - CHRONIC CARE ENCOUNTER

TECH/MH ENCOUNTER APPOINTMENT DATE 07/17/2023 TIME 01:30 P SHOW UP Y PCC

SUBJECTIVE

Met with offender in PRU office for f/u CC appt.	20230718	140513
Offender said he's doing a lot better. He said the 'brain shocks' have gotten better.	20230718	140513
He said he's sleeping good. He admits he had been hearing voices last week but reports none currently.	20230718	140513
He said he has been talking with his son, son's mother, and sister and thinks they will come visit soon. He said he has been seeing his attorney's still.	20230718	140513
Offender received a new tablet and said he's been listening to music to pass his time.	20230718	140513
He admitted feeling 'a little worried' about his upcoming execution but his legal team is helping him feel better about it and told him 'not to worry'. Offender said he doesn't know what happens 'on the other side', saying 'I'm not sure what will happen. I've never died before' but claims he isn't concerned about it.	20230718	140513
Inmate denies SI/HI. He said he's taking his medication and denies side effects. He denies additional concerns.	20230718	140513

OBJECTIVE

Offender appeared alert and oriented x3.	20230718	140513
Mood was calm and affect congruent- at baseline.	20230718	140513
Inmate maintained eye contact and speech was W/N/L.	20230718	140513
No signs of distress noted.	20230718	140513
Inmate denied SI/HI and indicated future orientation.	20230718	140513
Offender and cell hygiene were appropriate and much improved from prior week.	20230718	140513
Inmate did not appear to be responding to internal stimuli and did not display bizarre thinking.	20230718	140513

ASSESSMENT

Dx per psychiatrist	20230718	140513
Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.)	20230718	140513
	20230718	140513

PROBLEMS (PLEASE NUMBER) 20230718 140513

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

**** ASSESSMENT CONTINUATION FROM PREVIOUS PAGE ****

1. Offender has a history of auditory hallucinations. He reports none since taking medication.	20230718	140513
2. Offender is an SR3 due to swallowing multiple razor blades in 2006 to attempt suicide. He has not had any recent suicidality.	20230718	140513
Current: Improvement noted.	20230718	140513
PLAN		
WILL HAVE CC F/U IN 30 DAYS.	20230718	140513

TECH./MH ASS000EMMH ASHLEY S SKAGGS

MSR DATE	TIME	COMPLAINT	*****
07/17/2023	11:06 P	REFUSAL OF MEDICATION	

SPECIFIC CHARTING INFORMATION

07/18/2023			
NO	SIGNS OF TRAUMA	20230718	111400
NO	MEDICAL/MENTAL HEALTH COMPLAINTS	20230718	111402
NO	EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230718	111402
NO	CRYING	20230718	111402
YES	ORIENTED X'S 3	20230718	111402
NO	WITHDRAWN	20230718	111402
NO	HOSTILE/ANGRY	20230718	111402
NO	QUIET	20230718	111402
NO	MANIC BEHAVIOR	20230718	111402
YES	DENIES COMPLAINT	20230718	111402

MSR DATE	TIME	COMPLAINT	*****
07/24/2023	11:15 A	PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP	

DOCTOR ENCOUNTER APPOINTMENT DATE 07/26/2023 TIME 09:30 A SHOW UP Y PCC

SUBJECTIVE		
PCC MHCCC	20230726	093350
Patient seen over Centurion Zoom telehealth connection; pt seen in PCC Mental Health office, provider located at his home in St. Louis. Christine Ballard LPN was present for the encounter. Pt provided signed consent for telehealth care, and self-identified with name, DOC# and DOB.	20230726	093350
CC: "They say I got a stay of execution."	20230726	093350
- Pt reports CO's told him a few minutes ago on the way to the appointment. Pt is not sure if it's true, but says he feels "alright" about it with a bit of a laugh. [NOTE: this is true, though this was not discussed with the pt.]	20230726	093350
- Pt reports his "brain zaps" have stopped and his sleep has improved in the last few days, denies any other changes. Pt reports the AVH and sense of demons or others messing with him stopped in the same tiem frame. He denies what he perceives to have been rx SE's. Pt denies irregularities to	20230726	093350

DOC ID OFFENDER

00534534 JOHNNY A JOHNSON

***** SUBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

medpass, considers refusing rx when feeling lazy and has refused "a couple" of doses (record notes single rx refusal on 7/17/23). On balance, he feels better than he did 2+ weeks ago. 20230726 093350

- Pt reports he got a replacement tablet. 20230726 093350

- Pt wished me a good day at conclusion of encounter. 20230726 093350

- No interval labs; noted to pt that basic metabolic monitoring and EKG were last done >6 mo. ago, and pt is ok with repeat of these measures. 20230726 093350

DATE: 7/26/23, Wednesday 20230726 093350

ROS: denies any somatic complaints/concerns or rx SE's 20230726 093350

Mood: "kinda pumped up" 20230726 093350

Sleep/Appetite/Concentration/Interest/Energy: ok 20230726 093350

SI/HI/DSH/PTOD: denies 20230726 093350

OBJECTIVE

MSE 20230726 093350

GAB: Disheveled, NAD, good eye contact, engaged and responsive, no RTIS, no abnormal movements, answers in very short, curt phrases. 20230726 093350

SP: nl 20230726 093350

FOT: logical, linear, relevant; concrete and truncated; some degree of increased latency in responses 20230726 093350

TC: denies SI/HI, no grandiose/delusional statements 20230726 093350

Mood: "kinda pumped up" 20230726 093350

Aff,: congruent, variably limited vs full amplitude 20230726 093350

S/I: A&Ox3, intellect grossly <nl 20230726 093350

Memory: grossly nl 20230726 093350

I/J: poor-fair 20230726 093350

ASSESSMENT

ASSESSMENT: 20230726 093350

Dx: Unsp. Psychotic Disorder, Neurocognitive Disorder (Mod.) 20230726 093350

- Pt presents without evidence of imminent dangerousness to self/others. 20230726 093350

- Pt presents as psychiatrically improved with reported resolution of AVH and delusional in-trusions; given apparent benefit of olanzapine and lack of SE's, increasing dose somewhat is a worthwhile effort if further improvement is possible (e.g. greater insight into history of sx). 20230726 093350

- Once olanzapine adjustment is completed, clonidine or lamotrigine taper will be worth considering. 20230726 093350

PLAN

OLANZAPINE 10MG TAB
15MG (1.5 TABS) PO QHS FOR PSYCHOSIS
090 45

PLAN:

- Increase olanzapine to 15mg qHS
- Continue clonidine 0.2mg qHS, lamotrigine 100mg qHS; consider reduction at f/u
- LABS: CMP, CBC, fasting lipids, Alc, olanzapine level

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** PLAN CONTINUATION FROM PREVIOUS PAGE *****

- EKG
- RTC: 2 weeks or as needed
- Pt provided verbal assent for this plan. Risks vs. benefits, potential adverse effects of medications including box warnings and potential issues associated with polypharmacy, as appropriate, discussed and pt verbalized understanding. Pt educated on need for adherence to treatment, and possible outcomes if nonadherent.

DOCTOR DJH000EMMH DAVINDER J HAYREH

SPECIFIC CHARTING INFORMATION

07/28/2023

NO SIGNS OF TRAUMA	20230728	112035
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230728	112049
POSSITIVE MOOD AND AFFECT	20230728	112049
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230728	112049
NO CRYING	20230728	112049
YES ORIENTED X'S 3	20230728	112049
NO WITHDRAWN	20230728	112049
NO HOSTILE/ANGRY	20230728	112049
NO QUIET	20230728	112050
NO MANIC BEHAVIOR	20230728	112050
YES DENIES COMPLAINT	20230728	112050

MSR DATE TIME COMPLAINT *****
 07/31/2023 08:24 A PSYCHIATRIST - INITIAL EVALUATION

DOCTOR ENCOUNTER APPOINTMENT DATE 07/31/2023 TIME 12:00 P SHOW UP ERDCC

DOCTOR AJI000ECMH ANNA J IRVING

MSR DATE TIME COMPLAINT *****
 07/31/2023 10:51 A PRE-EXECUTION STATUS

TECH/MH ENCOUNTER APPOINTMENT DATE 07/31/2023 TIME 08:15 A SHOW UP ERDCC

TECH./MH JLA000ECMH JESSICA L AUBUCHON

MSR DATE TIME COMPLAINT *****
 07/31/2023 11:28 A MH - NON-CONTACT NOTE

NURSE ENCOUNTER APPOINTMENT DATE 07/31/2023 TIME 11:15 A SHOW UP Y ERDCC

SUBJECTIVE
 Pt has orders for EKG & CMP,CBC,FLP,AIC,Olanzapine level 20230731 113448
 per Dr Hayreh. 20230731 113448
 Pt tranferred to ERDCC 20230731 113448
 OBJECTIVE
 Pt is no longer at PCC- Unable to do prior to Transfer 20230731 113448
 ASSESSMENT

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** ASSESSMENT CONTINUATION FROM PREVIOUS PAGE *****

NON CONTACT- TRANSFER OF CARE 20230731 113448
PLAN

Informed MH nurse at ERDCC of orders unable to obtain prior 20230731 113448
to transfer.Orders will be reviewed at his current site. 20230731 113448

NURSE CEB002EMMH CHRISTINE E BALLARD

DOC ID OFFENDER
 00534534 JOHNNY A JOHNSON
 MSR DATE TIME COMPLAINT *****
 07/10/2023 10:01 A QMHP - CHRONIC CARE ENCOUNTER

SPECIFIC CHARTING INFORMATION

07/10/2023
 Technician/MH encounter MSR filed 20230710 100114

MSR DATE TIME COMPLAINT *****
 07/10/2023 10:21 A PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP

SPECIFIC CHARTING INFORMATION

07/11/2023
 Doctor/MH encounter MSR filed 20230710 102152

MSR DATE TIME COMPLAINT *****
 07/10/2023 10:49 A MH - NON-CONTACT NOTE

SPECIFIC CHARTING INFORMATION

07/10/2023
 Doctor/MH encounter MSR filed 20230710 104933
 NO SIGNS OF TRAUMA 20230710 150133
 NO MEDICAL/MENTAL HEALTH COMPLAINTS 20230710 150134
 NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS 20230710 150134
 NO CRYING 20230710 150134
 YES ORIENTED X'S 3 20230710 150134
 NO WITHDRAWN 20230710 150134
 NO HOSTILE/ANGRY 20230710 150134
 NO QUIET 20230710 150134
 NO MANIC BEHAVIOR 20230710 150134
 YES DENIES COMPLAINT 20230710 150134
 07/12/2023
 NO SIGNS OF TRAUMA 20230712 134224
 NO MEDICAL/MENTAL HEALTH COMPLAINTS 20230712 134226
 YES EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS 20230712 134226
 NO CRYING 20230712 134226
 YES ORIENTED X'S 3 20230712 134226
 NO WITHDRAWN 20230712 134226
 NO HOSTILE/ANGRY 20230712 134226
 NO QUIET 20230712 134226
 NO MANIC BEHAVIOR 20230712 134226
 YES DENIES COMPLAINT 20230712 134226

MSR DATE TIME COMPLAINT *****
 07/17/2023 02:01 P QMHP - CHRONIC CARE ENCOUNTER

SPECIFIC CHARTING INFORMATION

07/17/2023
 Technician/MH encounter MSR filed 20230718 140139

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

MSR DATE TIME COMPLAINT *****
07/17/2023 11:06 P REFUSAL OF MEDICATION

NURSE ENCOUNTER APPOINTMENT DATE 07/17/2023 TIME 09:00 P SHOW UP Y PCC

SUBJECTIVE	
y (Y/N) PATIENT REFUSES MEDICATION(S)	20230717 230734
REASON FOR REFUSAL:_"I just don't want them	20230717 230734
tonight" Offender was tearful.	20230717 230734
OBJECTIVE	
LIST NAME OF MEDICATIONS REFUSED: Clonidine, Lamictal,	20230717 230734
Zyprexa	20230717 230734
ASSESSMENT	
MEDICATION REFUSAL	20230717 230734
PLAN	
NURSING INTERVENTION	
y (Y/N) COUNSELING PROVIDED REGARDING THE RISKS OF NOT	20230717 230734
TAKING THIS MEDICATION	20230717 230734
n (Y/N) PATIENT SIGNED REFUSAL AND WITNESSED BY MEDICAL	20230717 230734
STAFF	20230717 230734
y (Y/N) REFUSED TO SIGN REFUSAL (MUST BE WITNESSED BY 2	20230717 230734
STAFF MEMBERS)	20230717 230734
n (Y/N) REFUSAL OF CHRONIC MEDICATIONS, DISCUSS WITH SITE	20230717 230734
PRACTITIONER IF INDICATED	20230717 230734
n (Y/N) REFUSAL OF HIV MED-REFER TO RESPONSIBLE PRACTITIONER	20230717 230734
y (Y/N) REFUSAL OF MENTAL HEALTH MEDICATION, REFER TO	20230717 230734
MENTAL HEALTH DEPARTMENT-IN ACCORDANCE WITH POLICY.	20230717 230734

NURSE BCB000EM BRITTANY C BUTCHER

SPECIFIC CHARTING INFORMATION

07/17/2023	
Nurse encounter MSR filed	20230717 230634
07/19/2023	
NO SIGNS OF TRAUMA	20230719 094753
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230719 094755
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230719 094755
NO CRYING	20230719 094755
YES ORIENTED X'S 3	20230719 094755
NO WITHDRAWN	20230719 094755
NO HOSTILE/ANGRY	20230719 094755
YES QUIET	20230719 094755
NO MANIC BEHAVIOR	20230719 094755
YES DENIES COMPLAINT	20230719 094755
07/21/2023	
NO SIGNS OF TRAUMA	20230721 135724
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230721 135725
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230721 135725
NO CRYING	20230721 135725
YES ORIENTED X'S 3	20230721 135725
NO WITHDRAWN	20230721 135725

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

***** SPECIFIC CHARTING INFORMATION CONTINUATION FROM PREVIOUS PAGE *****

NO HOSTILE/ANGRY	20230721	135725
YES QUIET	20230721	135725
NO MANIC BEHAVIOR	20230721	135725
YES DENIES COMPLAINT	20230721	135725
07/24/2023		
NO SIGNS OF TRAUMA	20230724	104251
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230724	104252
NO EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230724	104252
NO CRYING	20230724	104252
YES ORIENTED X'S 3	20230724	104252
NO WITHDRAWN	20230724	104252
NO HOSTILE/ANGRY	20230724	104252
YES QUIET	20230724	104252
NO MANIC BEHAVIOR	20230724	104252
YES DENIES COMPLAINT	20230724	104252

MSR DATE TIME COMPLAINT *****
 07/24/2023 11:15 A PSYCHIATRIST - CHRONIC CARE/FOLLOW-UP

SPECIFIC CHARTING INFORMATION

07/26/2023		
Doctor/MH encounter MSR filed	20230724	111525
07/28/2023		
NO SIGNS OF TRAUMA	20230728	105417
NO MEDICAL/MENTAL HEALTH COMPLAINTS	20230728	105418
YES EXISTING MEDICAL/MENTAL HEALTH COMPLAINTS	20230728	105418
NO CRYING	20230728	105418
YES ORIENTED X'S 3	20230728	105418
NO WITHDRAWN	20230728	105418
NO HOSTILE/ANGRY	20230728	105418
YES QUIET	20230728	105418
NO MANIC BEHAVIOR	20230728	105418
YES DENIES COMPLAINT	20230728	105418

MSR DATE TIME COMPLAINT *****
 07/31/2023 07:52 A SEGREGATION INITIAL EVALUATION

NURSE ENCOUNTER APPOINTMENT DATE 07/31/2023 TIME 08:00 A SHOW UP Y ERDCC

SUBJECTIVE		
note: assessment for 7/30/2023.	20230731	075454
OBJECTIVE		
BP 134/090 PL084 RS000 TP0000 WT000 BS000 PF000	20230731	075454
RULES OF 100	20230731	075454
n_____ (Y/N) PULSE >100	20230731	075454
IF YES, HAVE PATIENT REST AND REPEAT PULSE	20230731	075454
_____ RESULT	20230731	075454
n_____ (Y/N) IF BP >180 SYSTOLIC OR >110 DIASTOLIC-	20230731	075454
EMERGENT, HAVE PATIENT REST THEN RECHECK. NOTIFY PROVIDER	20230731	075454
IMMEDIATELY IF REMAINS ELEVATED.	20230731	075454
_____ RESULT OF RECHECK	20230731	075454

DOC ID OFFENDER

00534534 JOHNNY A JOHNSON

***** OBJECTIVE CONTINUATION FROM PREVIOUS PAGE *****

n_____ (Y/N) IF BP >160 SYSTOLIC OR >100 DIASTOLIC, HAVE	20230731	075454
PATIENT REST THEN RECHECK. SCHEDULE APPOINTMENT WITH	20230731	075454
PROVIDER FOR NEXT DAY.	20230731	075454
_____ RESULT OF RECHECK	20230731	075454
n_____ (Y/N) BLOOD PRESSURE <90 SYSTOLIC OR <60 DIASTOLIC	20230731	075454
IF YES, CONTACT PROVIDER AND BE PREPARED TO ESTABLISH IV	20230731	075454
ACCESS)	20230731	075454
n_____ (Y/N) SIGNS OF TRAUMA	20230731	075454
n_____ (Y/N) MEDICAL COMPLAINTS	20230731	075454
n_____ (Y/N) MENTAL HEALTH COMPLAINTS	20230731	075454
n_____ (Y/N) EXISTING MEDICAL / MENTAL HEALTH CONDITIONS	20230731	075454
n_____ (Y/N) CRYING	20230731	075454
y_____ (Y/N) ORIENTED X 3	20230731	075454
n_____ (Y/N) WITHDRAWN	20230731	075454
n_____ (Y/N) HOSTILE/ANGRY	20230731	075454
n_____ (Y/N) QUIET	20230731	075454
n_____ (Y/N) MANIC BEHAVIOR	20230731	075454
n_____ (Y/N) DENIES COMPLAINT	20230731	075454
y_____ (Y/N) TAKES DOSE-BY-DOSE MEDICATIONS	20230731	075454
n_____ (Y/N) TAKES KOP MEDICATIONS	20230731	075454
n_____ (Y/N) OBTAINED KOP MEDICATIONS FROM CUSTODY STAFF FROM	20230731	075454
OFFENDER'S PROPERTY	20230731	075454
n_____ (Y/N) ISSUE MAXIMUM OF 1 CARD OF EACH PRESCRIBED KOP	20230731	075454
MEDICATION AND MAXIMUM OF	20230731	075454
ONE OTC MEDICATION AND ONE NURSING PROTOCOL MED OF EACH	20230731	075454
TYPE (ONLY ONE NSAID)	20230731	075454
.	20230731	075454
.	20230731	075454
.	20230731	075454
.	20230731	075454

ASSESSMENT

INITIAL SEGREGATION EVALUATION	20230731	075454
PLAN		
y_____ (Y/N) PLACE ON SUICIDE WATCH IF VERBALIZES SUICIDAL	20230731	075454
INTENT AND NOTIFY MENTAL HEALTH VERBALLY & IN WRITING	20230731	075454
DATE, TIME AND NAME OF MH STAFF CONTACTED:	20230731	075454
y_____ (Y/N) EDUCATION REGARDING HSR AND MEDICATION PROCESSES	20230731	075454
WHILE IN SEGREGATION SEGREGATION	20230731	075454
y_____ (Y/N) KOP MEDICATIONS ISSUED	20230731	075454
IF YES, LIST MEDICATIONS ISSUED:	20230731	075454
y_____ (Y/N) MAR PLACED IN APPROPRIATE BOOK/LOCATION FOR	20230731	075454
DOSE-BY-DOSE MEDICATIONS	20230731	075454
y_____ (Y/N) REVIEW INDICATES THAT NO CONTRAINDICATIONS TO	20230731	075454
SEGREGATION PLACEMENT WERE NOTED	20230731	075454
.	20230731	075454
.	20230731	075454

NURSE DMW001EC DAVID M WANG

DOC ID OFFENDER
00534534 JOHNNY A JOHNSON

SPECIFIC CHARTING INFORMATION

07/31/2023
Nurse encounter MSR filed 20230731 075245

MSR DATE TIME COMPLAINT *****
07/31/2023 08:24 A PSYCHIATRIST - INITIAL EVALUATION

SPECIFIC CHARTING INFORMATION

07/31/2023
Doctor/MH encounter MSR filed 20230731 084442

MSR DATE TIME COMPLAINT *****
07/31/2023 10:51 A PRE-EXECUTION STATUS

SPECIFIC CHARTING INFORMATION

07/31/2023
Technician/MH encounter MSR filed 20230731 111702

MSR DATE TIME COMPLAINT *****
07/31/2023 11:28 A MH - NON-CONTACT NOTE

SPECIFIC CHARTING INFORMATION

07/31/2023
Nurse encounter MSR filed 20230731 112825

MSR DATE TIME COMPLAINT *****
07/31/2023 01:55 P MH - NON-CONTACT NOTE

NURSE ENCOUNTER APPOINTMENT DATE 07/31/2023 TIME 10:00 A SHOW UP ERDCC

NURSE

SPECIFIC CHARTING INFORMATION

07/31/2023
Nurse encounter MSR filed 20230731 135552

OFFENDER VITALS

SYSTEM DATE & TIME	BP.	PULSE	RESP.	TEMP.	WGT.	BS.	PF.
07/31/2023 07:53 A	134/090	84		.0			ERDCC
07/30/2023 01:57 P	140/084	84		.0			ERDCC

15:13:09
AFR079H
Ver: 1

Department of Corrections
Medical Accountability Records System
Offender Specific Medication

Page: . . .
Date: 07/31/202
From: 07/20/202
Thru: 07/31/202

Offender Name: JOHNSON JOHNNY A
Offender Id: 534534
Location: ERDCC
Current Housing: 012-012-00148

Medication Name	Dosage	Start Date	End Date	Qty	Number of Day
OLANZAPINE 10MG TAB	10MG PO QHS FOR PSYCHOSIS	07/10/2023	07/26/2023	30	090
OLANZAPINE 10MG TAB	15MG (1.5 TABS) PO QHS FOR PSY	07/26/2023	10/24/2023	45	090