

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

JOSEPH DANIEL PIRESTANI — PETITIONER

VS.

KEVIN J. REAGAN et al. — RESPONDENTS

On Petition For Writ Of Certiorari
To The Supreme Court Of The State Of Delaware

PETITION FOR WRIT OF CERTIORARI

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QUESTION PRESENTED

By essentially coercing whomever is my wife's guardian to avoid purposely seeking out a non-mainstream psychiatrist for my wife, does the ruling by the Court of Chancery of the State of Delaware (and its affirmation by the Supreme Court of the State of Delaware) violate Section 1 of the Fourteenth Amendment of the U.S. Constitution?

PARTIES TO THE PROCEEDINGS

All parties do not appear in the caption of the case on the cover page. A list of all parties to the proceeding in the court whose judgment is the subject of this petition is as follows:

- I, Petitioner Joseph Daniel Pirestani, was the Appellant below in the Supreme Court of the State of Delaware, and a Cross-Petitioner in the Court of Chancery of the State of Delaware.
- Respondent Kevin J. Reagan was an Appellee below in the Supreme Court of the State of Delaware, and a Petitioner in the Court of Chancery of the State of Delaware..
- Respondent attorney *ad litem* (Jonathan Layton) was an Appellee below, and was assigned to represent my wife, who was the original respondent in the guardianship case in the Court of Chancery of the State of Delaware.

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PETITION FOR WRIT OF CERTIORARI

Petitioner respectfully petitions for a writ of certiorari to review the judgment of the Supreme Court of the State of Delaware in this matter.

OPINIONS BELOW

The opinion of the Supreme Court of the State of Delaware appears at Appendix A to the petition and apparently is reported at 2017 WL 4640137 (Del. Oct. 12, 2017).

The opinion of the Court of Chancery of the State of Delaware (“ORDER ADOPTING MASTER’S FINAL REPORT” dated July 18, 2016) appears at Appendix B to the petition and is probably unpublished.

The “MASTER’S REPORT” (Post-Trial) of the Court of Chancery of the State of Delaware (dated February 12, 2016) appears at Appendix C to the petition and is probably unpublished.

The “MASTER’S DRAFT BENCH REPORT” of the Court of Chancery of the State of Delaware (dated June 23, 2015) appears at Appendix D to the petition and is probably unpublished.

The “ORDER REGARDING ADDITIONAL MATERIAL FOR CONSIDERATION” of the Court of Chancery of the State of Delaware’s (dated July 18, 2016) appears at Appendix E to the petition and is probably unpublished.

The “ORDER REGARDING ADOPTION OF MASTER’S FINAL REPORT” of the Court of Chancery of the State of Delaware (dated July 28, 2016) appears at Appendix F to the petition and is probably unpublished.

The order of the Supreme Court of the State of Delaware (dated November 1, 2017) denying my motion for reargument and my motion for rehearing *en Banc* appears at Appendix G to the petition and is probably unpublished.

JURISDICTION

The date on which the Supreme Court of the State of Delaware decided my case was October 12, 2017. A copy of that decision appears at Appendix A. A motion for reargument and motion for rehearing *en Banc* were thereafter denied on November 1, 2017, and a copy of the order denying rehearing appears at Appendix G. The jurisdiction of this Court is invoked under 28 U. S. C. § 1257(a).

CONSTITUTIONAL AND STATUTORY PROVISIONS INVOLVED

Section 1 of the Fourteenth Amendment to the United States Constitution states in part the following:

“No State shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States; nor shall any State deprive any person of life, liberty, or property, without due process of law, nor deny to any person within its jurisdiction the equal protection of the laws.”

STATEMENT OF THE CASE

The missteps and falsehoods of the State of Delaware government relating to this case are numerous. It appears that the Delaware government went to extremes to get and keep my wife¹ drugged with psychiatric medication and to cover up the lies and misdeeds of Delaware Adult Protective Services (APS). Notable are numerous false findings of fact and numerous apparent procedures errors by the Court of Chancery of the State of Delaware ("Chancery"). I feel I am more than qualified to be my wife's guardian, and that either I was unjustly denied guardianship of her or she doesn't truly need a guardian. I am very opposed to Chancery's choice of guardian (Kevin J. Reagan ("Kevin")) for several reasons, but mainly because he has repeatedly shown an interest in having her under a mainstream psychiatric provider (which would result in her being heavily drugged with psychiatric medications) and having her live apart from me in some kind of institutional setting. I am very opposed to my wife having a mainstream psychiatric provider, as they have tended to prescribe heavy psychiatric drug regimens for her. My beliefs regarding mental health are non-mainstream, and like certain non-mainstream psychiatrists (such as Dr. Peter Breggin, Dr. Kelly Brogan, and my wife's psychiatrist Dr. Clancy D. McKenzie) I believe that psychiatric medications in general worsen people's mental conditions in the long run and tend to do far more harm than good. Based on what I have gathered, it seems most

branches of mainstream medicine (other than emergency care) probably do more harm than good. I suspect various government interventions in the health care marketplace, combined with government corruption, has allowed to current mode of mainstream medical practice to dominate the health care market. In contrast, Kevin apparently has spent his career working for biotechnology companies, and a recent apparent employer of his (Bio-Techne Corp.) apparently has had major drug companies as clients. Kevin does not seem willing to acknowledge problems with mainstream medical practice I have pointed out.

Some background

My wife's mental condition has greatly worsened over the course of the approximately 24 years I have known her. In that time, her psychosis has worsened tremendously, her judgment has worsened greatly, her intelligence has been reduced greatly, she has become disabled (in terms of her ability to earn income) to a great degree, and she has developed a tendency towards irritability and agitation. I believe that worsening in her mental condition has probably been mostly or entirely caused by harmful effects of psychiatric medications. With the possible exception of her mental condition improving apparently due to stopping marijuana use, her psychosis seems to have basically done nothing but get worse during time I've known her, with no apparent significant reversal of the worsening despite

¹ My wife was the original respondent in the guardianship case in the

numerous psychiatric hospitalizations and at least three times apparently being on outpatient court order that allowed her psychiatric provider to force or coerce her to take psychiatric medication. Not only does it seem that psychiatric medication cannot significantly improve her psychosis, the history that I have observed provides very strong evidence that psychiatric medication more or less permanently worsened her mental condition, including having more or less permanently worsened her psychosis, permanently worsened her judgment, permanently lowered her intelligence, having caused or permanently reduced her cognitive abilities, and having permanently caused or worsened a tendency towards irritability and agitation.

There is substantial evidence that my wife was fairly intelligent prior to, and probably for some time after, developing schizophrenia (or a similar disorder) in her 20s. Based on what I have been told, she made good grades in some or all courses at University of Delaware when she was a college student, worked in a comedy troupe (which apparently required impromptu creativity), was an actress on Broadway, and was a "quick study" in learning her lines for theatrical performances. She was musically talented, having been able to sing, play the piano, and play the flute. She apparently won runner-up in a Miss Delaware contest.

Around the time I met my wife around the summer of 1993, she was working for a law firm (apparently as a legal secretary), was living alone, and was able to

manage her life on her own. At the time her intelligence and judgment seemed to be about average overall. She was apparently on neuroleptic ("antipsychotic") medication (apparently fluphenazine injections), and rarely made delusional-sounding statements.

It was probably in early 1998 that my wife's psychiatric provider transitioned her to some new psychiatric medications. Around the spring of 1998, her mental condition got worse, and she apparently ended up being psychiatrically hospitalized probably in the latter half of 1998 while I was working in California (I was hoping she would follow me there but she did not). She apparently ended up on court order for forced outpatient drugging with psychiatric medication in late 1998 or early 1999. In early 1999 (after I had returned to Delaware), she was apparently on a court order that made it mandatory for her to take her prescribed psychiatric medications, and was apparently on a heavy psychiatric drug regimen consisting of apparently four or more drugs; she was very different from the person she had been about one year prior to that: she probably made disturbing delusional-sounding statements (no later than September 1999 her psychosis had gotten substantially worse than it had been around the beginning of 1998), her personality had changed, and she seemed less intelligent. She never fully recovered from that worsening of her mental condition. The great worsening in her mental condition in the short span of roughly a year (from roughly early 1998 to early 1999) seems to be mostly or completely irreversible. That great worsening coincided with two apparent major changes in her psychiatric drug regimen. The only plausible explanation I'm aware

of for that great worsening in her mental condition is that the worsening was due to psychiatric medication.

The court order for forced outpatient drugging with psychiatric medication continued until apparently some time in 2001. While apparently on that court order, she apparently for the most part avoided trouble, but her intelligence seemed low, she seemed less capable mentally than she had been before 1998, and at times she made disturbing delusional-sounding statements.

In 2002 her mental condition worsened (this apparently included a worsening of psychosis) while she was being prescribed (and it seems she was taking) a multiple-prescription-medication regimen (probably five psychiatric medications plus Lipitor), and she had signs of adverse effects from medication, such as hypothyroidism, a liver enzyme abnormality, excessive sleeping, lethargy, a repeating movement of her foot that seemed to be involuntary and abnormal, leukocytosis, and probably staggering gait. She was not happy with her medication regimen, but her psychiatrist at Elwyn apparently was of little or no help in helping her eliminate any of the problems she was experiencing apparently as a result of the medication. Her family doctor conveyed essentially that one of her psychiatric medications (lithium) may have been what caused her hypothyroidism. I believe my wife was probably suffering from lithium toxicity, and that she probably suffered irreversible brain damage as a result of one or more of her psychiatric medications. I advised my wife to quit the lithium (probably relatively gradually), which she mostly or completely did per my advice, and the lithium prescription was eventually

stopped. Fortunately she apparently recovered from the hypothyroidism. In 2003 she was obese. Over a course of years, I got her to reduce and eventually come off her remaining psychiatric medications. By May 2009 she was prescription-drug-free and per my wish had begun seeing non-mainstream psychiatrist Joseph Tarantolo (who was supportive of my wife being off psychiatric medication) in Washington, D.C.

During the period of May 2009 through August 2014 she was off psychiatric medications, except for some brief hospital stays (which were apparently due to either disruptive behavior or her checking herself into a hospital). In 2014 she apparently made in the neighborhood of ten unnecessary calls to 911. In July 2014 she apparently called 911 and conveyed that she wanted to go a local psychiatric hospital; Delaware Crisis Intervention drove her to that hospital, and she apparently checked herself in. She was eventually released that month with a prescription for Ativan (a minor tranquilizer). She continued to make unnecessary calls to 911, and a Crisis Intervention staff member (apparently Sophia Stavru) apparently contacted Delaware Adult Protective Services (APS) and made some false claims, including falsely claiming that my wife was not being fed or bathed².

Sophia Stavru and an APS staff member (Brenda Merced) visited my home on 8/26/2014 and expressed various concerns relating to my wife. It appeared that

² my wife had an apparently self-inflicted ear condition at the time due to her putting food items in her ear, and it resulted in a very foul smell. I took my wife to

Ms. Stavru was frustrated that my wife was not being prescribed antipsychotic medication. Both Ms. Stavru and Ms. Merced apparently wanted my wife to be on psychiatric medication, and essentially required that I make an appointment for a primary care doctor to see my wife. They tried unsuccessfully to have my wife seen by a mainstream psychiatric agency (I wanted my wife to see non-mainstream psychiatrist Dr. Tarantolo instead). I made an appointment for my wife to see a family physician, Dr. Nottingham, on 9/5/2014 and drove her to the appointment, but forgot to bring her Medicare card (and we didn't have a photo ID for her), and Dr. Nottingham conveyed essentially that he wouldn't see her without the necessary insurance card and ID, so he did not examine her.

Ms. Merced had provided with a copy of the APS law, and I learned that as my wife's caregiver I was required to give her whatever treatments she gets prescribed. I not only had disagreement with mainstream psychiatric drugging practices, but also had concerns about the use of statin drugs for people who did not have heart disease. I was afraid that if I took my wife to a mainstream family doctor and he prescribed a statin for her, I would be forced by law to give it to her. So it became important to me to try to take her to a non-mainstream family doctor (whose health care philosophy was close to mine) to try to avoid having to give my wife a statin drug. During September 2014 I searched for a non-mainstream family

see a family doctor about his in February 2014 but could not get my wife to stop putting things in her ears.

doctor for my wife to see, and found a couple of possible options in New Jersey, but my wife conveyed essentially that she didn't want to go there with me.

On 9/22/2014 Ms. Merced showed up at my house with police. She falsely claimed essentially that when I had made the appointment with Dr. Nottingham's office (for the 9/5/2014 appointment) I had been told I was supposed to "bring that stuff in" (i.e., bring identifications or cards or documents to the appointment)³. Ms. Merced essentially asked me to call right then and make a doctor's appointment for my wife. I made some calls to doctor's offices, but the first two were unsuccessful for reasons beyond my control. After the second call ended, Ms. Merced began to escort my wife from my home, and then apparently took my wife to a nearby hospital, and eventually apparently had my wife confined to a nursing home.

APS wouldn't let me know where my wife was, and I contacted one of her brothers (Kevin J. Reagan ("Kevin")), who eventually apparently had contact with APS. I spoke with Ms. Merced in October 2014 and learned some her supposed reasons for escorting my wife away, which essentially amounted to accusations of neglect against me, most of which I disagreed with (there was an instance in which I did not follow my wife after she left the house when I knew she might call 911, and I fell short of my own standards in that situation). It looks like APS conveyed some false information to Kevin, including probably the false idea that my wife had

been medically neglected for years. In November 2014 Kevin filed for guardianship of my wife against my wishes.

My mother and I filed for co-guardianship of my wife in January 2015. The ensuing contested guardianship case was replete with errors and apparent bias against me.

Numerous errors in Chancery

The judicial officer assigned to the guardianship case, Master Abigail LeGrow, issued a letter dated March 19, 2015 that set a schedule for discovery, and a trial date was set for 6/12/2015. I could tell that under the aforementioned schedule the attorney *ad litem* (Jonathan Layton) assigned to my wife could flood me with paperwork within 10 days or less before trial, and that I might not be able to handle the workload in that short a period of time before trial. My mother and I submitted a motion to have the schedule revised, but the motion was denied. I tried to subpoena documents from APS, but a Deputy Attorney General essentially ordered me to stop contacting APS and thus apparently illegally interfered with me subpoenaing documents, and thus apparently committed obstruction of justice. I submitted to Chancery various papers including two large reports with lots of attachments (which included a copy of various medical records, some of my wife's

³ I have an audio recording of my call to Dr. Nottingham's office that proves I was not told that during that call.

writings, photos, and some audio recordings on DVDs, including audio recordings of visits by APS to my home).

As I had feared, Mr. Layton flooded me with paperwork (a huge Trial Binder containing probably 800 or more pages, and a supplemental report containing many statements I disagreed with) during the eight days before trial. I felt it was important to respond to his supplemental report, so I worked on that before trial, but there was so much I disagreed with that by the time of the 6/12/2015 trial I had only prepared a partial response, and had not examined the Trial Binder thoroughly. I later found out that certain key APS documents that contained accusations against me were in unexpected locations in the Trial Binder, and there is substantial evidence that Mr. Layton or his staff used various techniques (including mislabeled index and multiple unnecessary copies of certain documents) to make those key APS documents hard for me to find.

At the 6/12/2015 trial it seems Mr. Layton elicited inadmissible hearsay that reflected negatively on me, and it seems he tried to waste hearing time to minimize the time I would have to testify to defend myself against the accusations of neglect. At one point Mr. Layton asked essentially if I objected to his Trial Binder being admitted into evidence, and I did not object, but I was not familiar with all of the contents of that binder (in hindsight I should have objected). I felt my evidence (including audio recordings) was probably stronger than his. I then essentially asked Master LeGrow for all of the documents I had submitted to Chancery to be "submitted" into evidence. She apparently did not answer my request, which was

an apparent error. I later wrote her a letter dated June 16, 2015 in which I essentially reminded her of my request, but Chancery never openly ruled on my request. Thus it looks like much of the materials I submitted to Chancery (including audio recordings) were never admitted into evidence. I believe that may have played a key role in Chancery making certain false findings of fact that were contrary to evidence I had provided.

On 6/23/2017 Master LeGrow issued an oral draft report (Appendix D) which contained many conveyances that I disagreed with and recommended that Kevin be appointed guardian.

Apparently in December 2014 my wife was put on an inpatient civil commitment order that required her to be psychiatrically medicated, and apparently in January 2015 she was transferred to Delaware Psychiatric Center. Twice within a span of about five months (in February 2015 and in early July 2015) was hospitalized at Wilmington Hospital for physical health problems; This had apparently not occurred before during that time I had known her, and I believe those physical health problems were probably due to the apparently heavy psychiatric drugging of her.

A godsend occurred on 7/22/2015, when at a hearing for my wife's civil commitment case, Commissioner Manning (who was aware of APS's involvement with me and my wife and the ongoing guardianship case) conveyed verbally essentially that he wanted my wife to return home and for me to care for her. My wife returned home on 7/25/2015 and has lived with me since.

I appealed that draft report, and Kevin and Mr. Layton eventually provided answering briefs. My wife submitted papers to Chancery conveying essentially that she preferred me over Kevin as a guardian.

Master LeGrow issued her Final Report dated February 12, 2016 (Appendix C) which contained many conveyances I disagreed with and recommended that Kevin be appointed guardian. I appealed that Final Report within Chancery. Below is a list of only some of the false conveyances or implications in the Final Report:

- On page 10: “APS found almost no food in the home.” That statement was false, and I provided an audio recording to Chancery for the visit by Sophia Stavru and Brenda Merced (of APS) to my home on 8/26/2014. During that recording, after I was asked to open the refrigerator, Ms. Stavru can be heard saying “Who cooks all that? Who cooks all that?”. I also have many shopping receipts for August 2014 (most of which I found in 2017), a copy of which I submitted to the Supreme Court of Delaware in 2017. These receipts (including one reflecting the purchase of a lot of produce on 8/22/2014) are evidence that there was a substantial amount of food in my home when Ms. Stavru and Ms. Merced visited on 8/26/2014.
- On page 10: “During her calls to 911 and her interactions with police and APS, Deborah frequently complained about hunger.” This claim is highly

questionable⁴, and was apparently based on apparently inadmissible hearsay testimony by Brenda Merced at the 6/12/2015 trial in which Ms. Merced conveyed or implied essentially that a person had conveyed to her (Brenda) that my wife had said that she (my wife) was hungry (this is reflected on pages 18 and 43 of the transcript for the 6/12/2015 hearing). I provided to Chancery a photo of wife (the top photo dated "2014/08/26" on the fifth non-cover page of Attachment 5 of my report dated 6/2/2015 (Chancery Dkt. 35)) which is evidence that on 8/26/2014 my wife had a distended abdomen, which was evidence that she wasn't going around very hungry. Also, in 2017 I found many receipts for purchases from Goodwill, Taco Bell, and other stores in August 2014 (including receipts showing purchase of a lot of produce on 8/22/2014) which are evidence that there was a lot of food in my kitchen when Delaware Adult Protective Services inspected my home on 8/26/2014 and that my wife wasn't going around very hungry in August 2014. I have not yet submitted a copy of those receipts to Chancery, but I did submit a copy of them to the Supreme Court of Delaware in 2017.

- On page 20:

⁴ I was only told on one occasion (8/26/2014) by government staff that my wife had complained about hunger when she had apparently called 911 (government staff conveyed or implied that my wife had complained of hunger during the 911 call she apparently had made on 8/21/2014; That was the last time she apparently called 911 while living with me). If she had actually complained of hunger on one or more occasions before 8/21/2014, I would expect government staff would have informed me of it sooner than 8/26/2014. My not having heard that allegation from government staff before 8/26/2014 is in my opinion strong evidence that my wife rarely if ever had complained of hunger to authorities.

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Crumsey, but I did furnish a copy of them to the Executive Committee of DePaul in
 early summer in August 2014. I have not yet furnished a copy of those receipts to
 DePaul's accounting and finance on 8/25/2014 and that my wife would come along
 that month with a lot of food in my kitchen when DePaul's April Proctoring
 receipts showing purchase of a lot of produce on 8/25/2014 which are evidence
 purchases from Goodwill, Taco Bell and other stores in August 2014 indicating
 the amount being shown early, roughly. Also, in 2014 I found many receipts for
 that on 8/25/2014 my wife had a distressed abdomen which was evidence that
 agreement 2 of my whereabouts 8/25/2012 (Crumsey Dec 30) which is evidence
 photo of wife (the top photo dated 2014/08/25 on the flip non-cover back of
 and 13 of the transcript for the 8/25/2012 meeting). I provided to Crumsey a
 my wife had said that she (my wife) was roughly (this is reflected on pages 18
 covered or implied essentially that a person had conveyed to her (Brenda) that
 testimony by Brenda Mercer in the 8/25/2012 trial in which Mr. Mercer
 discredited, and was apparently based on apparently unnecessary hearsay

“Moreover, Dan continues to indicate that, if appointed as Deborah’s guardian, he would only allow her to be seen by medical professionals who would not prescribe antipsychotic medications for her, and would “doctor shop” as necessary to ensure that result, unless otherwise ordered by a court.”

The above quotation implied that it would inappropriate for me to try to find a psychiatrist whose health care philosophy closely matched mine.

- The Final Report implies that I was negligent in not obtaining “regular health care” for my wife (p. 5). I took my wife to a family doctor at Mill Creek Medical Associates (the place she had gone for years when she needed to see a family doctor) on February 3, 2014 for an ear condition, and we saw Dr. Haegele; No one there told me that I needed to bring my wife back for anything such as a physical, and the only medical activities they recommended were the following: “If there are continued problems --will need ENT evaluation” and “Follow up with Psychiatry as scheduled/needed” (see copy of Patient Instructions provided that day at Appendix H). I also submitted to Chancery an audio recording for that visit that is practically irrefutable evidence that no one there gave me any other instructions in terms of getting medical attention for my wife. Also note that during most if not all of her five brief psychiatric hospitalizations during the period of December 2009 through July 2014 apparently a physical examination of my wife was done by a physician and various laboratory tests were ordered (including for cholesterol); I submitted to Chancery a copy of medical records I had for all but one of those brief psychiatric hospitalizations that documented that a physical and lab tests were done.

REASONS FOR GRANTING THE PETITION

In the U.S. Supreme Court case of *Palmore v. Sidoti* (466 U.S. 429 (1984), this Court acknowledged essentially that a child living with a stepparent of a different race “may be subject to a variety of pressures and stresses not present if the child were living with parents of the same racial or ethnic origin.” Yet this Court concluded essentially that such possible downsides to having a stepparent of a different race did not justify removing the child from the custody of its natural mother.

An obvious parallel of *Palmore* with the instant case is that the state has a legitimate interest in promoting the best interests of the ward. But unlike *Palmore*, in which this Court acknowledged possible downsides to the arrangement (i.e., for the child to live with a stepparent of a different race), in the instant case, the Delaware courts did not even explicitly allege (much less make a plausible case) that non-mainstream physicians tend to be inferior to mainstream physicians, to justify what essentially amounts to Chancery coercing my wife’s guardian to not select mainstream physicians for her.

If this Court can see through the missteps and falsehoods of Delaware government staff (including Adult Protective Services and Chancery) and the attorney *ad litem*, and realize that I am not only fit to be my wife’s guardian, but am likely vastly superior to the average person in terms of health knowledge and

and finally directly subordinate to the ultimate decision in terms of hearing knowledge and
admitted to what you realize that I am not only in to be my wife's knowledge but
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select individuality knowledge for now

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An obvious feature of knowledge with the present case is that the knowledge is a
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In the U.S. Supreme Court case of *Raymond v. Dixon* (188 U.S. 450 (1903))

PERSONS FOR OBTAINING THE PERSON

commitment to my wife, then it appears this Court make a ruling favorable to me similar to it's ruling in *Palmore*.

It is not sufficient that I be appointed guardian without great changes in Chancery's findings of fact. Master LeGrow's "poison-packed" Final Report must be vacated, not only because of its many false findings, but because it essentially coerces whomever is my wife's guardian to avoid purposely seeking out a non-mainstream psychiatrist for my wife.

Also, for the judicial process to not only fail to punish Adult Protective Services staff that lie about citizens, but to reward their dishonesty by granting guardianship according to their wishes, emboldens and gives the green light to such agencies to lie at will to achieve their ends.

A government that mandates uniformity in medical practice squelches innovation and competition between modes of care that tend to improve the quality and decrease the price of health care. Though Master LeGrow gave lip-service to being non-judgmental regarding whether antipsychotic medication was appropriate for my wife, her opinion was a thinly-veiled attempt to coerce the keeping of my wife under mainstream psychiatry. One manner in which this was evidenced was her implied criticism that I would "doctor shop" (inappropriate term⁵) to find a

⁵ The term "doctor shopping" normally apparently refers to a crime involving an attempt to improperly obtain multiple prescriptions for the same drug from multiple physicians without the physicians being aware that other physicians are also prescribing the same drug for the patient (this practice is apparently engaged in by certain drug abusers). I have not done this nor do I have any intention to.

psychiatrist whose health care philosophy closely matched mine, as if seeking such a psychiatrist was a crime or unethical. That implied criticism is baseless and contrary to common sense. If in acquiescence to Master LeGrow a guardian is to act contrary to his instincts and deliberately not use his own impressions of what good health care is or what kinds of health care practitioners are best, then there don't seem to be many other ways of selecting doctors other than 1) Selecting doctors that are best-rated by other doctors (which would almost certainly result in selecting a mainstream physician, since most physicians are mainstream and thus are likely to hold in high esteem other mainstream physicians and are probably unwilling to endorse the practices of non-mainstream physicians), or 2) Randomly selecting a doctor (which based on simple probability is likely to result in selection of a mainstream physician). This is all but a mandate for guardians to select mainstream physicians for their wards. This is discriminatory against non-mainstream physicians and potential guardians who prefer non-mainstream physicians, a completely unwarranted restriction of a guardian's freedom, and in conflict with other government agencies that have licensed non-mainstream physicians (and thus have given them a stamp of approval to practice).

Potential systematic improper practices of Delaware Chancery include the conflation of the two concepts of materials being admitted in the case record, and admission of materials into evidence (this may have been done in an attempt to avoid admitting some of my materials into evidence).

I was not allowed by Chancery to listen to the recording for the 6/12/2015 hearing. This may be a violation of a provision in the Delaware Constitution regarding courts being open. I believe there might be a similar provision in the U.S. Constitution or a federal law.

It looks like Delaware Supreme Court may have improperly dismissed my wife's appeal to them of Chancery's guardianship decision. She filed with them a motion for reimbursement, to which neither Kevin nor Mr. Layton responded. If that motion had been granted, it might have made her capable of hiring a private attorney to represent her in that case. The Delaware Supreme Court never ruled on that motion. Thus it appears my wife may have been denied due process with regard to her appeal to the Delaware Supreme Court (Case No. 424, 2016).

Date: 1/30/2018


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STANDARD and not previously held as a result of the fact that the
provisions of the Standard are not binding on the parties to the contract.
The fact that the Standard is not binding on the parties to the contract

will be a factor in the determination of the parties to the contract.

It is the policy of the Department of the Interior to encourage the
development of the oil and gas resources of the United States and to
provide for the conservation of the same. The Department is authorized
to issue orders and regulations for the purpose of carrying out this policy.
The Department is also authorized to issue orders and regulations for the
purpose of carrying out the policy of the Department of the Interior to
encourage the development of the oil and gas resources of the United States
and to provide for the conservation of the same.

Very truly yours,
Director

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