

DATE TIME

RADIOLOGY DEPARTMENT  
Computed Tomography Provisional Report

CT head

DATE

9 Dec 92

RADIOLOGIST

Dr. Flak

CONTRAST

NON CONTRAST

Dec 9/92 - Res. Note

- Dr. Chapman
- On level III x 48 hrs, no attempts @ elopement, no agitation, no violence or threats towards others.
- declining T sedation in past + poor case. → excess Ativan?
- Intermittent restlessness but no evidence of amblyopia or EPS
- Dismissed implications being on level IV:
  - up to 2 hr. off ward
  - advised against going to Comp Sci Bldg.
  - Rampass to get clothes tomorrow if OK today.
- Objectively more calm, less discussion about government persecution, and quite accessible
- Perry seems resigned to having Review Panel + Justice System handle his case and recognizes being resistive or confrontative. Would not help.
  - ∴ developing some insight into recent behavior.

Plan - Level IV privileges  
to Compu room

Likely search (included) logs → tabs on laundry  
will check CT scan

NB. EEG abn → intermittent, paroxysmal B-activity

(c) post. quad. which at times spreads contralaterally

∴ admit CT scan. ? Repeat EEG

J. Alan [Signature]

P. Alan [Signature]

DR CHAPMAN, L  
 29 JAN 59 H 33 YRS  
 PHN 9120140136  
 92-06352  
 P2W P2W  
 DATE: 30 NOV 92

HISTORY AND PROGRESS NOTES

- 1. Age, Occupation, Race
- 2. Complaints
- 3. History of Present Illness
- 4. Past Illness
- 5. Family History
- 6. Personal History
- 7. Functional Enquiry
- 8. Physical Examination
- 9. Differential Diagnosis Provisional Diagnosis
- 10. Progress Notes
- 11. Summary and Final Diagnosis

DATE	TIME	Notes
Dec 10/92		<p><u>Supervisor's Note:</u></p> <p>Pt seen today</p> <ul style="list-style-type: none"> <li>- has had ground privileges → doing well</li> <li>- returned from pass as scheduled</li> <li>- cooperative on ward.</li> <li>- yesterday he met Dr Krikpatrick when he went to Main Library, they talked ~ 10 mins</li> <li>- he states he has not been to the Comp-Sci bldg.</li> </ul> <p>CTscan - Normal → patient informed</p> <p>EEG - non-specific abnormality of posterior hemisphere              → should be reviewed w/ neurology.</p> <p>Pf - Day pass Sat + Sun → can have day pass Fri after seen by Dr Chan.</p> <ul style="list-style-type: none"> <li>- next week consider drug med</li> <li>? review panel</li> </ul> <p style="text-align: right;"><i>[Signature]</i></p>
Dec. 11/92		<p><u>Res. Note</u></p> <ul style="list-style-type: none"> <li>- Good NPO yesterday. Went swimming</li> <li>- Delusions remains though intensity somewhat as he is less agitated when describing them</li> <li>- Sleep ✓</li> <li>- Discussed passes this w/e</li> <li>- Some blunting in affect, likely related to Haldol.</li> <li>- No EPS</li> </ul> <p>Plan - Nurse Consult              D/P today, Sat + Sun.</p> <p style="text-align: right;"><i>[Signature]</i></p>