

TO INCLUDE:

- a) Identifying Data
- b) Previous Criminal History
- c) Presenting Complaint
- d) History of Present Illness
- e) Physical Findings
- f) Mental State
- g) Current Problems
- h) Discharge Medications
- i) Future Management Plans
- j) Final Diagnosis

DATE OF DISCHARGE 94-02-09

DATE PREPARED 94-04-11

IDENTIFYING DATA:

NAME: GAO, Feng
 ADDRESS: #258 East 58th Ave.,
 Vancouver, B. C. V5X 1V9
 AGE: 34 years
 SEX: Male
 RACE: Chinese
 EDUCATION: States has Ph.D. in Mathematics
 OCCUPATION: Unemployed
 RELIGION: Unknown
 MARITAL STATUS: Single

METHOD OF AND REASON FOR ADMISSION:

Mr. Feng Gao was admitted to F.P.I. at 1510 hours on January 26, 1994. He arrived walking, handcuffed, accompanied by two ambulance attendants. Prior to admission the patient was seen at the Vancouver Forensic Outpatient Clinic. The patient was expressing delusions of persecution. It was felt the patient needed closer observation. Two medical certificates were received, one by [REDACTED] and the second by [REDACTED].

PREVIOUS CRIMINAL HISTORY:

Available from the Crime Index Section.

PRESENTING COMPLAINT:

"I came here because I don't want to take Haldol anymore."

HISTORY OF PRESENT ILLNESS:

Feng Gao's first admission to a mental health facility was in December 1993. He was admitted to U.B.C. for three weeks' duration. He states he was suffering from



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Patient Identification Area

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 B.D. 59-01-29
 ADM. 1 #208506

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a delusional disorder. He stated he was treated with Haldol a couple of times a day. When discharged he was receiving Haldol 5 mg o.d. p.o.

In January/February 1993 the patient was admitted to U.B.C. for a delusional disorder. The length of stay was three weeks. He was treated with Haldol medication.

In October 1993 Mr. Gao was admitted to V.G.H. The patient states that he was suffering from a delusional disorder. He was treated with Haldol medication. The length of stay was four to five days' duration.

The patient also expressed that he was seeing a private psychiatrist in March/April 1992. He was seeing Dr. Ronald Remick for stress. Treatment prescribed: sleeping pills. He saw a psychiatrist on four to five occasions.

The patient's first admission to F.P.I. was on January 26, 1994. The patient was experiencing delusions of persecution.

PHYSICAL FINDINGS:

1981 - Appendix removed. No further complications.

January 1994 - The patient currently feels that he is in good physical health.

The patient states that as a young child he was in a coma; duration of and age at time of incident unknown.

Allergies: Penicillin (Coma ?).

MENTAL STATE:

Mr. Feng Gao is a 35 year old oriental male. During interview the patient was dressed appropriately in clean clothes, hair was uncombed and slightly greasy.



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The patient is oriented in the three spheres. The patient is currently aware that he is on probation.

The patient was questioned as to why he was sent here to F.P.I. He stated, "They don't know if I have schizophrenia or not." "So the doctor feels I can take a large injection or take pills here."

Mood - the patient describes his mood as "alright." Voice tone is slightly flattened. The patient denies any depressive type thinking at this time.

Thinking and speech - the patient speaks at a normal rate and tone. He answers questions freely. No pressure, poverty or possession of speech noted.

Thought blocking - none evident.

Ability to abstract:

"Stitch in time..."
Patient's response, "I don't know."

"Out of the frying pan..."
Patient's response, "From all ready in a lot of trouble, to more trouble."

"People in glass houses..."
Patient's response, "You find yourself in a situation of difficulty, don't want to do anything to aggravate it."

Perceptual disorders - the patient currently denies hearing any voices at this time and also denies any visual hallucinations.

Concentration - the patient is able to concentrate and answer appropriately to questioning during the assessment procedure.

Serial seven's:
Patient's response, "7, 14, 21, 28, 35, 42...105," etc.
Completed task easily with only a few minor pauses.



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Month reversal:

Patient's response, "December, November, October, September, August, July, June, May, April, March, February, January" The patient completed the task easily.

Memory:

The patient is currently able to recall recent and remote events in his life without difficulty.

The patient stated his name, Feng Gao, and current address, 258 E. 58th Ave., Vancouver.

The patient was able to repeat above when asked to three minutes later.

General Information:

6 large cities of Canada? Patient's response, "Vancouver, Toronto, Halifax, Ottawa, Montreal, Edmonton."

Capital of Canada? Patient's response, "Ottawa."

Capital of England? Patient's response, "London."

Name of Prime Minister? Patient's response, "John Chretien."

Ruling Political Party (Provincial)? Patient's response, "N.D.P."

Ruling Political Party (Federal)? Patient's response, "Liberals."

Intelligence: The patient has a good general knowledge base and good use of the English language, even though this is his second language.

Insight and judgement: The patient stated that he felt the government was after him. He does not feel this way anymore.



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The patient feels he is not mentally ill. He is aware that he is currently under a probation order.

The patient currently dislikes being treated with Haloperidol. The patient states that he does not mind being treated with oral Risperidone. When questioned about taking medications the patient replied that being on or off is not an option he has.

The patient states he is willing to take follow-up care at the Vancouver Outpatient Clinic, but states this is part of the probation order.

The patient has a history of non-compliance and this is likely to continue in the future.

While residing on ward R2East the patient was receiving the following medications: Risperidone 3 mg p.o. b.i.d.

Initial assessment was conducted by Dr. Adilman on January 26, 1994.

The patient comes from the Outpatient Clinic with a diagnosis of Paranoid Schizophrenia and Obsessive Compulsive. The patient had been non-compliant with his oral Haloperidol medication. The patient expressed that it made him depressed and that he couldn't concentrate. The patient denied mental illness.

Notes from the Outpatient Clinic indicated that Feng had become increasingly paranoid and has told his family that he would like to go to radio and T.V. stations to have his predicament broadcast. The patient stated that these thoughts were in the past and these were the cause of his changes. The patient states he is no longer paranoid.

In regard to his charges the patient stated that he believed that a former boss at U.B.C. was conspiring against him. The patient stated he had no proof and that he repeatedly called a lawyer. He stated this was wrong



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and that it got him into trouble. The patient replied that he is now on probation and has to follow doctor's orders.

The patient states he's here at F.P.I. because he refused to take oral Haldol. The patient also expressed that the doctor at the Outpatient Clinic told him he would have to come to F.P.I. for a new medication with less side effects. He states he is willing to take a new medication.

When Dr. Adilman got up to leave the interview the patient asked, "Just what did [REDACTED] write about me on those notes?"

s.19(1)(a)

s.19(1)(a)

It was [REDACTED] assessment that, due to the patient's non-compliance with oral medications, he is a potential risk to others given his paranoid belief.

Plan: Risperidone medications.

While on ward R2East the patient was cooperative to treatment regime. Only after three days of being hospitalized the patient was questioning when he would see his doctor and be discharged.

On the same day that evening the patient expressed that the psychiatrist made a mistake in the diagnosis and that he shouldn't be here.

On the ward the patient would socialize with his peers and also participate in ping pong games.

On January 30, 1994 the patient expressed that he felt he was ready to return to the community. The patient states that he likes the Risperidone much better. He states it makes him a little bit drowsy but no muscle stiffness or soreness. The patient then went on to say, "I think I probably don't need medication." "But if I have to take medication it's better than the Haldol." The patient was encouraged to discuss this issue with his Treatment Team.



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On January 31, 1994 the patient was interviewed by

[REDACTED]
S.19(1)(a)

The patient expressed that he is not schizophrenic and doesn't need medications. The patient is currently taking his Risperidone. He remains cooperative to ward routine.

When questioned about his charges the patient replied that he became suspicious of his female boss at U.B.C. Computer Sciences when she told him he had no chance of acquiring a position he applied for. He states he withdrew his application and began to accuse her of conspiring against him, the reason being that he was critical of her.

He admits that he was admitted to U.B.C. Hospital and, upon discharge, repeatedly returned to the hospital demanding that they review and revise their diagnosis: delusional disorder; saying that he was not ill. He was arrested for assault of a security guard there.

The patient also admits to harassing a lawyer by repeatedly calling her and further admits that in November 1992 he wanted to contact Gloria Macarenco (host of CBC News program) and be interviewed by her so that he could tell people; (1) he was wrongly accused and diagnosed and, (2) that the Charletown Accord was a scam planned by Prime Minister Brian Mulroney. He admits that all these actions and thoughts were inappropriate but states he no longer feels paranoid or suspicious.

The patient also called Forensic Outpatients numerous times in the past month in regards to his medications and concerns in regards to his mother's visit to Outpatients.

When questioned about these behaviours the patient described these actions as excessive but denies that they are a sign of mental illness.



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Assessment: ? Paranoid Schizophrenia.
Poor insight.

Plan: Continue Risperidone.

As assessed by [REDACTED]
S.19(1)(a)

On February 4, 1994 the patient expressed that his mother and father did not get along and that they were always fighting. The patient stated he came from China to the U.S.A. in 1982. The patient continued to say that he has a Ph.D. in mathematics. The patient then came to live in Vancouver in a basement suite. His mother is currently visiting and leaving in June. The patient then expressed: "I don't know why I'm on medications." "I guess it calms me down." The patient remains cooperative to ward routine and takes his current medication regime without complaint.

S.19(1)(a)
The patient was interviewed by [REDACTED] on February 7, 1994. The patient has a Review Panel on February 9, 1994 and on February 11, 1994 has a court date for charges of harassment filed by a law firm. The patient described these charges as follows: "I only wanted to have a female lawyer represent me because I talk to female lawyers better." "She refused my case on the grounds that it was a conflict of interest." "I continued to try and make the point that it wasn't and that I wanted her representation." "I realize that now." The patient denied that he believed his lawyer, at the time, was conspiring against him.

When questioned about the incidents at U.B.C. he stated he hadn't thought about them in a long time. "Yes, I suspect I may have been wrongly denied the teaching position, but I can't prove it. There's no point in pursuing it."

The patient also expressed that he has no current plans to contact the CBC. The patient denies receiving messages from radio or T.V. The patient denies having a mental illness but agrees to take medications if a doctor orders them.



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b) Previous
Criminal
History

Assessment: The patient continues to deny any mental illness and his suspicious nature suggests that he is suffering from paranoid schizophrenia.

c) Presenting
Complaint

d) History of
Present
Illness

Plan: Recommend he stay at F.P.I. for a short while longer and stay on Risperidone.

e) Physical
Findings

As assessed by [REDACTED] 3.19 (1)(a)

f) Mental State

g) Current
Problems

On February 9, 1994 the patient was discharged in care of self. He was given medication: Risperidone 3 mg p.o. b.i.d. x 14 day supply. The patient is to return to Vancouver. The patient has no follow-up appointment arranged. He states he is to go to the Vancouver Outpatient Clinic on Tuesday. The patient is capable at the time of discharge.

h) Discharge
Medications

i) Future
Management
Plans

CURRENT PROBLEMS:

j) Final
Diagnosis

1. Alteration in thought processes (persecutory type thinking).
2. Lacks insight into his mental condition.
3. Non-compliance re: medication regime.

MEDICATIONS:

At time of discharge: Risperidone 3 mg p.o. b.i.d.

Supply given: 14 day supply of Risperidone 3 mg p.o. b.i.d.

FUTURE MANAGEMENT PLANS:

1. No follow-up appointment arranged.
2. The patient states he is to go to the Vancouver Outpatient Clinic.



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3. The patient has a history of medication non-compliance. The patient was encouraged to continue follow-up care.

[REDACTED]

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3.19 (i)(a)
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REFER TO PAGE 11 FOR FINAL DIAGNOSIS



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FINAL DIAGNOSIS:

AXIS I: *Paranoid Schizophrenia*

AXIS II: *No Dx*

AXIS III: *No Dx*

[REDACTED]

April 11, 1994

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8.19(1Xa)



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