

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION

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In re:	:	
	:	
TEHUM CARE SERVICES, INC.,	:	Case No. 23-90086
	:	(Chapter 11)
	:	
Debtor.	:	
	:	

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**MOTION BY CREDITOR DAVID ROSE FOR LEAVE  
TO FILE UNTIMELY PROOF OF CLAIM**

Creditor, David Rose (“Creditor”), by his undersigned attorneys, hereby moves this Court to grant leave for Creditor to file an untimely proof of claim in the bankruptcy proceeding filed by debtor Tehum Care Services, Inc. (“Debtor”). Creditor was not provided with sufficient notice of the bankruptcy filing. The claims bar date was August 14, 2023 but Creditor has not received notices from Debtor’s bankruptcy proceeding including notice of the deadline to file a proof of claim. Creditor is not listed as a creditor in Debtor’s schedules of assets and liabilities nor is Creditor listed on Debtor’s mailing matrix for purposes of notification.

Pursuant to Federal Rule of Bankruptcy Procedure 3002(c)(6) and Local Rule 3003-1(c)(4), this Court may extend the time in which a creditor may file a claim by not more than sixty days from the date of the order granting the motion if the court determines either (1) notice of commencement of the bankruptcy case was insufficient under the circumstances to give creditor a reasonable time to file a proof of claim because the debtor failed to timely list the creditor’s name and address as required by Rule 1007(a); or (2) notice was insufficient under the circumstances to give creditor a reasonable time to file a proof of claim.

Creditor engaged counsel on or about March 26, 2024, and in June 2024, counsel discovered the bankruptcy proceeding and that the deadline for filing proofs of claim had passed



without notice of the deadline being provided to Creditor by Debtor. At all times relevant to this proceeding, Creditor has been an inmate incarcerated at the North Branch Correctional Institute in Cumberland, Maryland. Creditor promptly retained local counsel to proceed with this Motion. Accordingly, Creditor requests leave to file the proof of claim attached hereto as **Exhibit A** (the “Proof of Claim”).

WHEREFORE, Creditor respectfully requests that this Court enter an Order granting Creditor an extension of time to file the Proof of Claim on or before sixty days from the date of entry of the Order.

Dated: July 1, 2024

Respectfully submitted,

**SILVERMAN THOMPSON SLUTKIN & WHITE LLC**

By: /s/ Jodie E. Buchman  
Jodie E. Buchman (admitted pro hac vice)  
400 E. Pratt Street, Suite 900  
Baltimore, Maryland 21202  
Telephone: (410) 385-2225  
Facsimile: (410) 547-2432  
Email: jbuchman@silvermanthompson.com

*Counsel for David Rose*

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that on this 1st day of July, 2024, the foregoing was delivered via ECF to all parties registered to receive electronic filings.

/s/ Jodie E. Buchman  
Jodie E. Buchman (admitted pro hac vice)

# **EXHIBIT A**

**Fill in this information to identify the case:**

Debtor 1 Tehum Care Services, Inc.

Debtor 2  
(Spouse, if filing) \_\_\_\_\_

United States Bankruptcy Court for the: Southern District of Texas

Case number 23-90086

Official Form 410

**Proof of Claim**

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

1. Who is the current creditor? David Rose  
 Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor \_\_\_\_\_

2. Has this claim been acquired from someone else?  No  
 Yes. From whom? \_\_\_\_\_

	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
3. Where should notices and payments to the creditor be sent?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>Jodie E. Buchman</u> Name	_____ Name
	<u>400 E. Pratt St., Suite 900</u> Number Street	_____ Number Street
	<u>Baltimore MD 21202</u> City State ZIP Code	_____ City State ZIP Code
	Contact phone <u>410-385-2225</u>	Contact phone _____
	Contact email <u>jbuchman@silvermanthompson.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	

4. Does this claim amend one already filed?  No  
 Yes. Claim number on court claims registry (if known) \_\_\_\_\_ Filed on \_\_\_\_\_  
 MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?  No  
 Yes. Who made the earlier filing? \_\_\_\_\_

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?  No  
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim? \$ 2,000,000.00. Does this amount include interest or other charges?  
 No  
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.  
  
Personal Injury/Medical Malpractice/Constitutional Violations

9. Is all or part of the claim secured?  No  
 Yes. The claim is secured by a lien on property.  
**Nature of property:**  
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
 Motor vehicle  
 Other. Describe: \_\_\_\_\_  
  
**Basis for perfection:** \_\_\_\_\_  
 Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)  
  
**Value of property:** \$ \_\_\_\_\_  
**Amount of the claim that is secured:** \$ \_\_\_\_\_  
**Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)  
  
**Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_  
  
**Annual Interest Rate** (when case was filed) \_\_\_\_\_ %  
 Fixed  
 Variable

10. Is this claim based on a lease?  No  
 Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff?  No  
 Yes. Identify the property: \_\_\_\_\_

**12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**

No

Yes. Check one:

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Up to \$3,350\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

Wages, salaries, or commissions (up to \$15,150\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

Other. Specify subsection of 11 U.S.C. § 507(a)(    ) that applies.

**Amount entitled to priority**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

**Part 3: Sign Below**

**The person completing this proof of claim must sign and date it. FRBP 9011(b).**

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

**A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.**

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

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

Executed on date 07/01/2024  
MM / DD / YYYY

/s/ Jodie E. Buchman

Signature

**Print the name of the person who is completing and signing this claim:**

Name Jodie E. Buchman  
First name Middle name Last name

Title Attorney and Authorized Agent

Company Silverman Thompson Slutkin & White LLC  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 400 E. Pratt Street, Suite 900  
Number Street

Baltimore MD 21202  
City State ZIP Code

Contact phone 410-385-2225 Email jbuchman@silvermanthompson.com

*In re Tehum Care Services, Inc.*, Case No. 23-90086

**Classification of Claim**

Debtor Tehum Care Services, Inc. (“Debtor”) filed a voluntary petition for relief under Chapter 11 of Title 11 of the United States Bankruptcy Code on February 13, 2023 (“Petition Date”). Prior to the Petition Date, Creditor David B. Rose (“Creditor”) filed a Complaint against Debtor (formerly known as Corizon Health, Inc.) in the United States District Court for the District of Maryland, Case No. 1-22-cv-2158-SAG. A true and correct copy of the Complaint is attached as **Exhibit A**. As of the Petition Date, Creditor claims he is entitled to compensation and damages from Debtor in the amount of \$2,000,000.00.

Creditor reserves the right to periodically supplement and/or amend this Proof of Claim from time to time and to assert additional claims and claims entitled to administrative priority in this bankruptcy case. Creditor also reserves the right to amend and/or supplement this Proof of Claim in all other respects. The filing of this Proof of Claim is not an acknowledgment or admission that the Bankruptcy Court has jurisdiction over Creditor and/or Creditor does not waive any rights to a jury trial, arbitration or enforcement of a choice of law or venue selection clause by filing this Proof of Claim. This Proof of Claim is not intended to be and shall not be construed as an election of remedies. The filing of this Proof of Claim shall not waive and is without prejudice to any and all claims, defenses, causes of action and remedies that Creditor may have against Debtor or any non-debtors, all of which are expressly preserved. This Proof of Claim shall not operate as an admission or waiver of claims, defenses, causes of action or remedies that Creditor may have against any of the Debtor or non-debtors under applicable law, nor shall the filing of this Proof of Claim be deemed to consent to entry of final judgment by the Bankruptcy Court under *Wellness International Network, Ltd., et al v. Sharifi*, 135 U.S. 1932 (2015).



# **EXHIBIT A**

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MARYLAND

David B. Rose DOC # 295681

DOB: 10/19/1974

North Branch Correctional Institution

14100 McMullen Highway SW

Cumberland, Maryland 21502

*(Full name, date of birth, identification #, address of petitioner)*

**Plaintiff,**

v.

Corizon Health, Inc., et al.

*See full Defendant list, attached hereto*

*(Full name and address of respondent)*

**Defendant(s).**

\*  
\*  
\*  
\*  
\*

FILED ENTERED  
LOGGED RECEIVED

AUG 25 2022

AT BALTIMORE  
CLERK U.S. DISTRICT COURT  
DISTRICT OF MARYLAND  
BY DEPUTY

Case No.: \_\_\_\_\_  
*(Leave blank. To be filled in by Court.)*

**COMPLAINT**

I. Previous Lawsuits

A. Have you filed other cases in state or federal court dealing with the same facts as in this case or against the same defendants?

YES  NO

B. If you answered YES, describe that case(s) in the spaces below.

1. Parties to the other case(s):

Plaintiff: \_\_\_\_\_

Defendant(s): \_\_\_\_\_

2. Court (if a federal court name the district; if a state court name the city or county):

\_\_\_\_\_

- 3. Case No.: \_\_\_\_\_
- 4. Date filed: \_\_\_\_\_
- 5. Name of judge that handled the case: \_\_\_\_\_
- 6. Disposition (won, dismissed, still pending, on appeal): \_\_\_\_\_  
\_\_\_\_\_
- 7. Date of Disposition: \_\_\_\_\_

II. Administrative Proceedings

A. If you are a prisoner, did you file a grievance as required by the prison's administrative remedy procedures?

YES  NO

1. If you answered YES:

a. What was the result? \_\_\_\_\_  
\_\_\_\_\_

b. Did you appeal? \_\_\_\_\_

YES  NO

2. If you answered NO to either of the questions above, explain why: \_\_\_\_\_

Claim against medical contractors  
\_\_\_\_\_  
\_\_\_\_\_

III. Statement of Claim

(Briefly state the facts of your case. Include dates, times, and places. Describe what each defendant did or how he/she is involved. If you are making a number of related claims, number and explain each claim in a separate paragraph.)

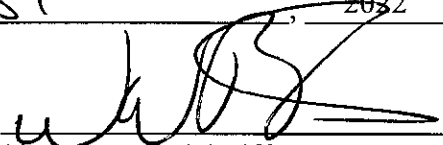
See Statement of Claim, attached hereto.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IV. Relief

(State briefly what you want the Court to do for you.)

As more fully set forth in Statement of Claim, page 12, Plaintiff respectfully prays that this  
Honorable Court enters judgment against Defendants and award Mr. Rose injunctive relief,  
monetary damages, and other and further relief appropriate.

SIGNED THIS 23<sup>rd</sup> day of August, 2022.

  
\_\_\_\_\_  
Signature of Plaintiff

David B. Rose, 295681  
\_\_\_\_\_

Printed Name

North Branch Correctional Institution

14100 McMullen Highway, SW

Cumberland, Maryland 21502  
\_\_\_\_\_

Address

N/A  
\_\_\_\_\_

Telephone Number

N/A  
\_\_\_\_\_

Email Address

**LIST OF DEFENDANTS**

*David B. Rose, DOC# 295681, v. Corizon Health, Inc., et al.*

**CORIZON HEALTH, INC.;**  
7240 Parkway Drive, Suite 350  
Hanover, Maryland 21076

**Resident Agent:**  
The Corporation Trust, Inc.  
2405 York Road, Suite 201  
Lutherville-Timonium, Maryland 21093

**YESCARE, CORP.;**  
7240 Parkway Drive, Suite 350  
Hanover, Maryland 21076

**No Resident Agent Provided**

**SOLAIDE AKINTADE, MD MPH;**  
7240 Parkway Drive, Suite 350  
Hanover, Maryland 21076

**ASRESAHEGN GETACHEW, MD;**  
NBCI  
14100 McMullen Highway, SW  
Cumberland, Maryland 21502

**Primary Practice Setting:**  
6990 Columbia Gateway Dr # 350  
Columbia, Maryland 21046

**SANDRA J. BOETTINGER, RN; and**  
NBCI  
14100 McMullen Highway, SW  
Cumberland, Maryland 21502

**DEFENDANT(S) JOHN/JANE DOE.**

## **STATEMENT OF CLAIM**

### **PARTIES**

1. Pro se\* plaintiff David Rose, #295681, is a prisoner in the custody of Maryland's Department of Public Safety and Correctional Services (DPSCS) and, at all times material to this case was, and currently is, an inmate at the North Branch Correctional Institution (NBCI), a DPSCS-operated prison located in Cumberland, Maryland.

2. Defendant Corizon Health, Inc., is a for-profit corporation headquartered in the State of Tennessee with its principal place of business in New Castle, Delaware. At the time of the events alleged herein, Corizon provided medical services under contract to inmates at DPSCS facilities, including NBCI, where Mr. Rose is housed. Under information and belief, Corizon's contract to provide medical services began on January 1, 2019.

3. Defendant YesCare Corp. is a for-profit corporation incorporated on January 31, 2022 in Texas and has the same headquarters as Corizon. According to [YesCareCorp.com](https://www.yescarecorp.com), YesCare acquired all of Corizon's employees and active contracts in early 2022. (YESCARE CORP., Exhibit A); ([yescarecorp.com](https://www.yescarecorp.com), Exhibit B).

4. Defendant Solaide Akintade, MD MPH, is a physician licensed by the State of Maryland's Board of Physicians to practice medicine. At the time of the events alleged herein, Defendant Akintade served as the Statewide Utilization Management (UM) Medical Director (MD). Defendant Akintade makes recommendations on the appropriateness of care for identified diagnoses and evaluates treatment plans, including Mr. Rose's. Defendant Akintade acted

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\* Prisoner Rights Information System of Maryland, Inc., (PRISM) assisted in the preparation of this pro se civil rights complaint. However, PRISM is not entering its appearance at this time.

individually and/or through actual and/or apparent agents, servants, and/or other employees. Defendant Akintade is sued in her individual capacity.

5. Defendant Asresahegn Getachew, MD, is a physician licensed by the State of Maryland's Board of Physicians to practice medicine. At the time of the events alleged herein, Defendant Getachew held a supervisory position for DPSCS's medical contractor. Defendant Getachew makes recommendations on the appropriateness of care for identified diagnoses and evaluates treatment plans, including Mr. Rose's. Defendant Getachew acted individually and/or through actual and/or apparent agents, servants, and/or other employees. Defendant Getachew is sued in his individual capacity.

6. Defendant Sandra J. Boettinger, RN, is a registered nurse. At the time of the events alleged herein, Defendant Boettinger served as the UM Nurse for DPSCS's medical contractor. Defendant Boettinger makes recommendations on the appropriateness of care for identified diagnoses and evaluates treatment plans, including Mr. Rose's. Defendant Boettinger acted individually and/or through actual and/or apparent agents, servants, and/or other employees. Defendant Boettinger is sued in her individual capacity.

7. Defendant(s) John/Jane Doe are Corizon/YesCare medical provider(s) at NBCI who provided medical services to inmates at NBCI, including Mr. Rose. Several signatures on Mr. Rose's medical records are illegible, preventing proper identification of all Defendants at this time. Moreover, at the time of the events alleged herein, Mr. Rose was denied treatment by several medical providers whose identities are presently unknown to him but will be determined through discovery. Defendant(s) John/Jane Doe acted individually and/or through actual and/or apparent agents, servants, and/or other employees. Defendant(s) John/Jane Doe are sued in their individual capacities.

### STATEMENT OF FACTS

The previous paragraphs are incorporated as if fully set forth herein.

8. Plaintiff David Rose (Mr. Rose) underwent cataract removal surgery in his right eye in 2011.

9. The subject of this Complaint, however, began in June of 2021, when Mr. Rose started to feel discomfort and experience blurred vision and blindness in his right eye.

10. A Corizon/YesCare provider observed Mr. Rose's condition, prescribed him a steroidal eye drop, and referred Mr. Rose to the optometry or ophthalmology clinic. (July 24, 2021, Exhibit C) ("Subjective: Associated symptoms: Pt reports right red eye, increasing feeling of pressure and vision loss to right eye. Objective: Physical Examination Findings: Right eye appears red and painful. Pt is unable to look at light without squint[ing]").

11. On August 2, 2021, Mr. Rose attended an optometry appointment and was diagnosed with a subluxated lens in his right eye. (DPSCS Optometry Initial Eye Examination Form, Aug. 2, 2021, Exhibit D).

12. On August 7, 2021, Mr. Rose submitted a "Sick Call Slip" complaining as follows: "My eye still hurts, red, sore, irritated when the air hits it and when I move it. It feels like something [is stuck in] my eye in the back. The milky drops and ointment aren't doing anything." Mr. Rose indicated that the pain began seven weeks prior, on approximately July 19, 2021. (DPSCS Sick Call Request / Encounter Form, Aug. 17, 2021, Exhibit E).

13. On August 20, 2021, Mr. Rose was seen by the ophthalmology department, where it was noted that Mr. Rose was experiencing a subluxated 3-piece intraocular lens (IOL) and cornea decompensation in his right eye. (DPSCS Ophthalmology Visit, Aug. 20, 2021, Exhibit F).



14. In response to the visit and diagnosis, a Corizon/YesCare ophthalmologist initiated a consultation for Mr. Rose, requesting as follows: “Please eval[uate] for surgical repair with sutured IOL, right eye.” (Consultation, Aug. 20, 2021, Exhibit G) (“Procedure/Test Requested: Wilmer eye general ophthalmology clinic”).

15. Accordingly, by August 2021, Mr. Rose was diagnosed with a dislocated IOL and the consulting Corizon/YesCare ophthalmologist had requested the necessary reparative surgery. Nonetheless, Defendant Getachew continued to treat Mr. Rose’s pain and blindness with an eye patch and eye drops. (Aug. 27, 2021, Exhibit H) (“Pt was not given eye patch. Provided [sic]).

16. On September 16, 2021, an ophthalmologist from The Johns Hopkins Wilmer Eye Institute (Wilmer) confirmed that Mr. Rose’s symptoms were manifested complications from his 2011 surgery and reaffirmed Mr. Rose’s diagnosis of a dislocated IOL. Wilmer’s provider added that Mr. Rose’s lens was broken inferiorly and endorsed surgery to remove the dislocated IOL. (Johns Hopkins Hospital, Sept. 16, 2021, Exhibit I).

17. On October 5, 2021, Defendant Getachew submitted a consultation in which he requested approval for surgery recommended by at least two specialists, to remove the dislocated IOL, and for Mr. Rose to receive a pars plana vitrectomy (PPV) and a replacement IOL. Defendant Getachew waited over two months from Mr. Rose’s first diagnosis in August 2021 to submit the consultation for this necessary medical treatment. (Consultation, Oct. 5, 2021, Exhibit J).

18. After further delay, Defendant Getachew submitted a second consultation requesting that Mr. Rose first have another appointment with Wilmer before scheduling the surgery, despite being seen a month prior. (Consultation, Oct. 28, 2021, Exhibit K).

19. Notwithstanding over three months of specialists’ recommendations for surgery and Mr. Rose’s complaints of pain, Corizon/YesCare providers continued to assuage Mr. Rose’s

pain and blindness with an eye patch. (Office of Inmate Health Services, Nov. 24, 2021, Exhibit L).

20. At a “Chronic Care Nurse Prep” visit in December 2021, the Corizon/YesCare provider noted: “Pt has been scheduled for eye surgery, but **not until May of 2022. Optometrist sent email asking if it could be scheduled sooner.** Off-site scheduler has been contacted about this issue. Pt will return in 90 days for next [Chronic Care] visit and lab work. **No complaints voiced, other than his eye is becoming more painful.**” (Office of Inmate Health Services, Dec. 8, 2021, Exhibit M) (emphases added).

21. Despite an optometrist’s request that Mr. Rose’s surgery be scheduled before May, 2022, Mr. Rose was not seen in Chronic Care for another three months. On March 15, 2022, the Corizon/YesCare provider noted that Mr. Rose was still waiting on his surgery, and that he needed a new eye patch. (Office of Inmate Health Services, March 15, 2022, Exhibit N).

22. Mr. Rose was provided a replacement eye patch on March 18, 2022. (Office of Inmate Health Services, March 18, 2022, Exhibit O).

23. In response to a “Sick Call Slip” filed by Mr. Rose, a scheduled “Nurse Sick Call” visit took place on March 21, 2022 to follow up on Mr. Rose’s eye surgery. (Office of Inmate Health Services, March 21, 2022, Exhibit P).

24. Mr. Rose attended an appointment with Wilmer on May 2, 2022, over six months after Defendant Getachew’s consultation requesting a pre-surgery appointment. At this appointment, the Wilmer ophthalmologist consulted with a retina fellow and recommended Mr. Rose attend the next available appointment with a retina specialist. (Johns Hopkins Hospital, May 2, 2022, Exhibit Q).

25. Two weeks later, a Corizon/YesCare provider noted that a consultation to request the recommended appointment with a retina specialist at Wilmer *would* be generated. (NEXTGEN, May 17, 2022, Exhibit R).

26. Subsequently, the Corizon/YesCare provider submitted a consultation requesting appointments with both a retina specialist and a general ophthalmologist at Wilmer. (Consultation, May 17, 2022, Exhibit S).

27. On May 20, 2022, Defendant Boettinger denied the consultation and provided an alternative treatment plan (ATP) for Mr. Rose to, instead, see an on-site ophthalmologist. Defendant Boettinger submitted the ATP for further review by the Statewide UMMD, Defendant Akintade. (Addendum, May 20, 2022, Exhibit T) (“medical necessity has not been demonstrated at this time.”).

28. On May 27, 2022, Mr. Rose attended a scheduled “Nurse Sick Call” visit, where he was told there were presently no eye patches available, so he would have to wait for a replacement. (NEXTGEN, May 27, 2022, Exhibit U).

29. Nearly two months later, Defendant Akintade agreed with Defendant Boettinger’s ATP, denying the recommended appointment with Wilmer specialists. (Addendum, July 12, 2022, Exhibit V).

30. On July 26, 2022, Defendant Getachew submitted another consultation that requested Mr. Rose undergo surgery to removal the dislocated IOL and for Mr. Rose to receive a PPV and a new lens. (Consultation, July 26, 2022, Exhibit W) (“Action Requested: Wilmer eye clinic for removal of dislocated lens GES Retina”).

31. The following day, Defendant Getachew submitted a second similar consultation requesting an evaluation of Mr. Rose’s retina. (Consultation, July 27, 2022, Exhibit X) (“Action

Requested: Retinal evaluation at Wilmer eye clinic before removal of dislocated lens GES Retina”).

32. Since at least July 27, 2022, Mr. Rose has been addressing the pain caused by sensitivity to light in his right eye by wearing a homemade eye patch, made from the fabric of a face mask, because the facility-provided eye patches do not fit his head.

33. On July 28, 2022, PRISM sent YesCare officials a letter informing them of the seriousness of Mr. Rose’s medical condition, the necessity of treatment, and Mr. Rose’s intention to pursue legal action. (Prisoner Rights Information System of Maryland, Inc., July 28, 2022, Exhibit Y).

34. The following day, after receiving PRISM’s letter, Defendant Boettinger approved the request for Mr. Rose to receive a retinal evaluation at Wilmer. (Addendum, July 29, 2022, Exhibit Z).

35. On August 3, 2022, Mr. Rose attended a visit at Wilmer. However, instead of seeing a retina specialist, which had been recommended first on May 2, 2022 and multiple times after, Mr. Rose only met with a general ophthalmologist and was told, again, that he needs to see a retina specialist before surgery. The provider reiterated the information from May 2, 2022, that no medical action can be taken for the dislocated IOL until Mr. Rose sees a retina specialist and receives a retina scan. (Johns Hopkins Hospital, Aug. 3, 2022, Exhibit AA).

36. Defendants have known since at least May 2, 2022 that the necessary surgery cannot occur without Mr. Rose first receiving a retina scan, however Corizon/YesCare providers only scheduled an appointment with a general ophthalmologist for August 3, 2022. This error rendered Mr. Rose’s August 3, 2022 appointment with Wilmer futile and further delayed treatment, forcing Mr. Rose to remain in pain and experience elongated blindness. (*Id.*) (“patient

keeps getting scheduled for regular GES please ensure he gets a GES retina appt next time for combined IOL removal + PPV + sutured IOL”).

37. On August 5, 2022 Mr. Rose attended a “Chronic Care Nurse Prep” visit where he complained of daily headaches. In response, the Corizon/YesCare provider noted “consult placed for ophthalmology visit. He will be seen again in 4 weeks.” (NEXTGEN, Aug. 5, 2022, Exhibit BB).

38. Following the appointment, Defendant Getachew submitted another consultation requesting a retinal evaluation at Wilmer, and for the removal of Mr. Rose’s dislocated IOL. (Consultation, Aug. 5, 2022, Exhibit CC) (“I reviewed the consultant report they recommended GES retinal appointment for combined IOL removal + PPV + sutured IOL”).

39. On August 11, 2022, YesCare responded to PRISM’s July 28, 2022 letter (Exhibit Y) in the form of a letter from Defendant Akintade. (YesCare, Aug. 10, 2022, Exhibit DD).

40. On August 12, 2022, Defendant Boettinger denied the request for a retinal evaluation prior to surgery and for the surgery itself, despite having just approved the same request on July 29, 2022. Defendant Boettinger submitted the ATP to the Statewide UMMMD, Defendant Akintade, for further review. (Addendum, Aug. 12, 2022, Exhibit EE) (“ATP: Based on the information provided, medical necessity has not been demonstrated at this time. Necessity for retinal evaluation prior to surgery is not as surgery is not indicated. Stable chronic dislocated IOL. [Best corrected visual acuity] in both eyes is 20/20. Indications for surgery are glaucoma or uveitis/retinal detachment. None is evidence. Consider continued annual exam at site with ophthalmology.”).

41. Subsequently, on the same date, Defendant Akintade overrode Defendant Boettinger's ATP and approved the request for Mr. Rose's retinal evaluation. (Addendum, Aug. 12, 2022, Exhibit FF).

42. On the same day, Mr. Rose also attended an on-site ophthalmology visit, where the Corizon/YesCare provider noted that Mr. Rose had been "seen @ Wilmer eye [three] times[;] now plans to see a retina specialist." (DPSCS Ophthalmology Visit, Aug. 12, 2022, Exhibit GG).

43. At this time, Mr. Rose's pain and blindness are not being treated. Instead, Mr. Rose continues to wear his homemade eye patch. Corizon/Yes Care's lack of appropriate response to Mr. Rose's diagnosis has left him nearly blind in his right eye, absent medical intervention, and constantly in pain.

44. Signatures on medical records are not decipherable, but throughout all times relevant to this Complaint, Mr. Rose was seen by Defendants Getachew, Akintade, and Boettinger and other Corizon/YesCare providers.

45. At various times relevant to this Complaint, all Defendants were aware of Mr. Rose's need for medical attention, but failed to either provide it or ensure the necessary care was available.

## **COUNT I**

**(Against All Defendants)**

**Violation of Constitutional Rights Under Color of State Law, 42 U.S.C. § 1983  
Cruel and Unusual Punishment under the Eighth and Fourteenth Amendments  
to the U.S. Constitution**

The previous paragraphs are incorporated as if fully set forth herein.

46. The Eighth Amendment protects Mr. Rose, as an inmate at NBCI, against “unnecessary and wanton infliction of pain” by virtue of its guarantee against cruel and unusual punishment. *Gregg v. Georgia*, 428 U.S. 153, 173 (1976).

47. Mr. Rose’s dislocated IOL constitutes a serious medical need requiring proper treatment, and the actions and/or inactions of Defendants, under the color of state law, in addressing and/or failing to address that condition, establishes deliberate indifference which is proximately causing Mr. Rose’s substantial and unnecessary suffering, and permanent blindness in his right eye absent medical intervention.

48. Among other things, Defendants have actual and/or constructive knowledge that the medical staff members at NBCI are denying Mr. Rose medical treatment that has previously been recommended to him and that would have been effective in properly curing Mr. Rose’s dislocated IOL. Defendants have actual and/or constructive knowledge of the delay and/or denial of access to medically necessary medical treatment by virtue of, among other sources, proper exercise of their official duty to be informed of and sign off on inmates’ medical needs, medical visit records, medical alerts, medical staff, sick call slip requests, and inmate grievances. Defendants also have other manifest opportunities to be informed of the delay and/or deliberate denial of medically necessary care to Mr. Rose.

49. Despite knowledge of the seriousness of Mr. Rose’s medical condition, Defendants and their actual and/or apparent agents, servants, and/or employees, on numerous occasions over an excessively lengthy period, failed to provide Mr. Rose with constitutionally adequate medical care, notwithstanding numerous medical professionals noting the medical necessity of such care. Defendants’ failures were intentional, reckless, and/or deliberately indifferent.

50. Defendants failed to ensure proper treatment of Mr. Rose's dislocated IOL. Defendants' failure to appropriately act upon their knowledge of Mr. Rose's medical condition and the absence of medical care, and to provide Mr. Rose proper medical treatment, amounted to authorization of the actions and/or inactions of their employees and/or agents. Defendants' inaction affirmatively caused Mr. Rose substantial and unnecessary blindness, which will continue absent medical intervention.

51. By depriving Mr. Rose of basic medical care, Defendants continue, to date, to act with deliberate indifference and reckless disregard towards Mr. Rose's serious health need, thus violating his rights under the Eighth Amendment of the United States Constitution. In addition to Defendants' individual deliberate indifference to Mr. Rose's medical needs, Defendants' failures to adequately supervise servants and/or employees and agents violated the Eighth and Fourteenth Amendments of the U.S. Constitution, which protects Mr. Rose from cruel and unusual punishment.

## **COUNT 2**

### **(Against All Defendants)**

#### **Medical Negligence**

The previous paragraphs are incorporated as if fully set forth herein.

52. Throughout the time of these events, Defendants acted as professional health care providers to Mr. Rose, possessing the degree of skill and knowledge which is ordinarily possessed by those who devote special study and attention to the practice of medicine.

53. Mr. Rose sought care and treatment from Defendants, specifically for the performance of removal of a dislocated IOL, a pars plana vitrectomy, and the implementation of a new lens.



54. Defendants owed Mr. Rose a duty to meet the community standard of care, by exercising the degree of medical care and skill which a reasonably competent hospital, physician, and/or similar health care provider would have exercised under similar circumstances while treating Mr. Rose.

55. In breach of their duty to Mr. Rose, Defendants negligently failed to provide Mr. Rose with the community standard of medical care, in unreasonably failing to provide adequate treatment for his dislocated IOL.

56. As a direct and proximate cause of Defendants' failure to provide treatment for Mr. Rose's dislocated IOL, and without any contributory negligence on the part of Mr. Rose, Mr. Rose remains nearly blind in his right eye and in constant pain.

#### **PRAYER FOR RELIEF**

WHEREFORE, Plaintiff prays that the Court enter judgment against Defendants on the above claims, and respectfully requests that the Court award Mr. Rose:

- A) Injunctive relief in the form of proper treatment of his serious medical condition,
- B) Money damages in an amount to be proven at trial, including awards of compensatory damages, punitive damages, and attorneys' fees and costs under 42 U.S.C. § 1988, in the event an attorney is appointed in this case; and
- C) Such other and further relief as this Court may deem just, equitable, and proper.

#### **DEMAND FOR TRIAL BY JURY**

Pursuant to Rule 38(b) of the Federal Rules of Civil Procedure, Mr. Rose demands a trial by jury on all triable matters.

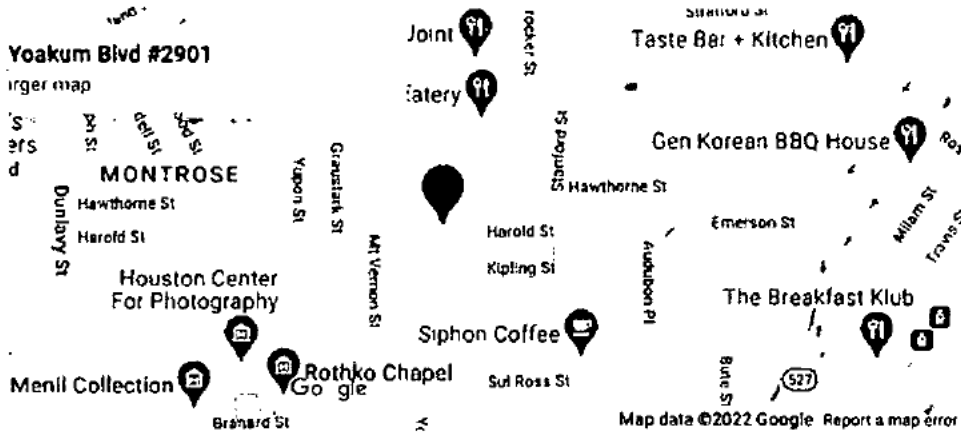
Name: YESCARE CORP  
Incorporation Date: 2022-01-31  
Status: Active  
Entity Type: TEXAS PROFIT CORPORATION  
Secretary of State (SOS) File Number: [REDACTED]  
State: TX  
County: Harris  
SOS File Number: [REDACTED]  
Effective Date: 2022-01-31  
Expiration Date: 2022-01-31  
Status: Active

VIVID EV LLC  
FREEHILL MIRAMAR GEORGETOWN LP  
PBC TOMBALL GP LLC  
PBC TOMBALL LLC  
SANTOS REAL ESTATE VENTURE I, LLC  
MCRT GEORGETOWN TX LLC  
GEORGETOWN JV HOLDING LLC  
GEORGETOWN JV OWNER LP  
FERROUS METAL TRANSFER CO.

Added: 2022-02-17 16:00 Updated: 2022-02-17 16:00

Registered Office Address

Address: 3411 YOAKUM BLVD APT 2901, HOUSTON, TX 77006



Similar Names

- CORPUS CHRISTI SIGN COMPANY LLC
- CORPORATE CERTIFICATES, LLC
- CORPORATE GUIDANCE SOLUTIONS INC
- CORPUS CHRISTI 2016 LLC
- CORPUS DUMPSTER RENTALS LLC
- CORPORATE JET CHARTERS LLC
- CORPORATE GOES COUNTRY L.L.C.
- CORPORATIVO 999, INC.
- CORPUS CHRISTI LAWN CARE LLC
- CORPUS CHRISTI PSYCHIC LLC

...IRE LLC

ROMAN MEDICAL SOLUTIONS, LLC

ts

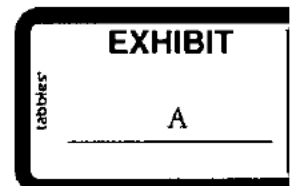
NOT THE OFFICIAL WEBSITE OF THIS COMPANY, DON'T SEEK SUPPORT SERVICE HERE PLEASE

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Our Motivation

See All Available Positions

CAREERS



As the correctional healthcare pioneer and leader for 40 years, YesCare provides client partners with high quality healthcare and reentry services that will improve the health and safety of our patients, break the cycle of recidivism and better the communities where we live and work.

\*YesCare acquired all of the employees and active contracts of Conzon Health in early 2022.

### Quick Links

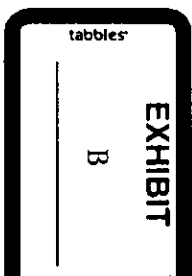
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### Contact

Job Inquiries  
800-989-7471  
careers@yescarecorp.com

Media Inquiries  
media@yescarecorp.com

Business Development:  
clientservices@yescarecorp.com



SITE: WCI

COMPLETED BY: Burnice L. Swan, RN 07/24/2021 12:55 PM

Patient Name: DAVID ROSE

IDOC#: 295681

DOB: [REDACTED]

Patient presenting with chief complaint(s)of: eye complaint.

**MISCELLANEOUS AND OTHER COMPLAINTS**

**Subjective:**

Associated symptoms: Pt reports right red eye, increasing feeling of pressure and vision loss to right eye.

**Objective:**

Physical Examination Findings

Right eye appears red and painful. Pt is unable to look at light without squint.

**Assessment:**

alteration in senses--eye

**Plan:** Called and spoke with J.Clark NP to discuss patient. Alerted her of condition and change in vision.

**MEDICATIONS**

<u>Brand Name</u>	<u>Dose</u>	<u>Sig Codes</u>	<u>Start Date</u>	<u>Stop Date</u>
Norvir	100 Mg	1 po QD	06/04/2021	10/04/2021
Prezista	400 Mg	Tab 2 PO QD	06/04/2021	10/04/2021
Lipitor	10 Mg	1 PO HS	06/04/2021	10/04/2021
Zyrtec	10 Mg	1 PO Q am	06/04/2021	10/04/2021
Truvada	200 Mg-300 Mg	1 PO Q am	06/04/2021	10/04/2021

**ORDERS**



completed  
completed  
completed

Case 1:19-cv-02159-SAC Document 1-1 Filed 08/25/22 Page 4 of 49

Physician contacted for treatment and orders  
Medication allergies and other contraindications reviewed and pregnancy ruled out prior to treatment  
Sick call if signs and symptoms of infection develop or symptoms do not subside

**Provider: Asresahegn Getachew, MD**

**Document generated by: Burnice L. Swan, RN 07/24/2021 12:59 PM**

refer to  
AMD



Department of Public Safety and Correctional Services  
 Optometry Initial Eye Examination Form

Chief Complaint: ~~to see from 200 ft~~ ~~cannot see out of right eye~~ ~~constrictions~~ distance + near 1-2 months ago

Date: 8/2/2021 Age: 46 Sex: M / F Race: A A Seg: P.D. 69

HISTORY: head out by 20 yrs OD, thinks the lens has fallen, was painful using  
 eye drops not see AMD

• Symptoms / onset	<input checked="" type="checkbox"/> Retinal Picture	Yes / No
• Location	<input checked="" type="checkbox"/> D.M. I ( ) II ( )	
• Quality / Severity	<input type="checkbox"/> Glaucoma	
• Duration / Timing	<input checked="" type="checkbox"/> HTN	
• Context / Modifiers	<input checked="" type="checkbox"/> HIV / AIDS	<input checked="" type="checkbox"/> Cholesterol

Dist V A 20/30  
 SC OS 20/30  
 Externals / Other

near OD 20/400  
 SC OS 20/25

Old Rx OD +1.75  
 OS ~~20/200~~ PLANO  
 V A 20/20

IOP @	OD
NCT	
GOLDMANN/Tonopen	OS

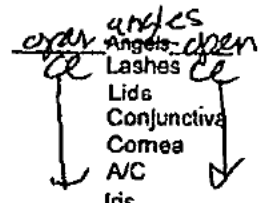
Subjective  
 OD  
 OS

V A  
 20/  
 20/

Pupils ~~PEARL~~ Mood / Orientation  
 EOMS Cover / CVF  
 Dilation @  
 0.5% Tropicamide  
 1% Tropicamide  
 2.5% Phenylephrine

Final Rx  
 OD  
 OS  
 SLE: OD

ADD  
 V A  
 20/  
 20/  
 OS



	C/D	cup	vessels	macula
OD	0.3	1/3	Arteries	flat
OS	0.3	1/3		

Assessment: subluxated lens  
 refer to AMD to/fu

Plan: FU after AMD Date:

Codes:

Patient's Last, First Name: ROSE, David Facility: NBCI

Date of Birth: [redacted] SID / DOC #: 295681 Provider: [signature]



DEPARTMENT OF PUBLIC SAFETY & CORRECTIONAL SERVICES  
 SICK CALL REQUEST/ENCOUNTER FORM

*Print*

DIRECTIONS:

Section I to be completed by Inmate/Detainee.  
 Section II to be completed by Healthcare Staff.

MEDICAL TRIAGE  B  U  CR

SIGNATURE

DATE/TIME

Inmate must state specific reason for requesting  
 Medical/Dental/Mental Health services.

VERIFICATION SIGNATURE (DATE REC'D)



SECTION I: TO BE COMPLETED BY INMATE/DETAINEE

Name: DAVID ROSE DOC/SID# 295481 / 1447184 Cell#: 4-A-55 Facility: NRCT

Allergies: \_\_\_\_\_ Date: 8-7-21

SICK CALL RELATED ISSUES

State your problem. / How can we help you? (Please be specific):  Medication not Received.

my eye still hurts and sure irritated when the air hits it and when I walk it it feels like something is sticking in the back of my eye drops and ointment aren't doing anything

- A. Where does it hurt? Right eye and irritated to the air sometimes it stings me  
 B. When did it start on 7/4/21 ASD  
 C. Has it happened before? NO How often? \_\_\_\_\_

NON - SICK CALL RELATED ISSUES

- Medical Records Request  Other (Specify below)  
 Medication Refill  
 Eye Glass Repair Request  
 Work Clearance Request  
 Dental Exam/Filling/Denture Request

PLACE MED REFILL STICKER HERE

PLACE MED REFILL STICKER HERE

PLACE MED REFILL STICKER HERE

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SECTION II: TO BE COMPLETED BY HEALTHCARE PERSONNEL

Healthcare Encounter Documented In EPHR  
 Comments: seen in CC

A. Gernew, MD/PA  
 PROVIDER

9/9/23 0925  
 DATE/TIME

SICK CALL REQUEST / ENCOUNTER FORM FORWARDED TO:

- DENTAL  
 MENTAL HEALTH  
 MEDICAL RECORDS  
 OTHER (Specify): \_\_\_\_\_

DATE / TIME SENT

DATE / TIME RECEIVED

SIGNATURE

SIGNATURE

RESPONSE TO INMATE/DETAINEE:

DPSCS Form OTS 130-114-1

EXHIBIT

E





Department of Public Safety and Correctional Services  
 Ophthalmology Visit

Inmate's Last, First Name <b>ROSE David</b>		SID/DOC# <b>295681</b>	Facility <b>NBCI</b>
Referring Dr.	PCP	<input type="checkbox"/> Initial Consultation	<input checked="" type="checkbox"/> Follow-Up

Chief Complaint:

HPI: 46 y/o male by traumatic cataract in  
 - 2 months ago, "went blind" in OD - looks "out of focus"  
 HVO  
 feels like lens fell out of place. For the past month,  
 OD red, watery and open it.

Ocular Meds: prednisolone qhs OD; KES w/ OD. 7 no sig. ins.  
 Systemic Meds: HIV meds

Allergies			Oriented x3: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
VSC <b>20</b> <b>10</b> <b>10</b>	W	A	Mood TA <b>15</b> Time <b>14</b> <b>9:35 AM</b>
VCC	M	Rx	

Physical Exam:

		NL	AB	Description of Abnormalities
Confrontation of VF				
Motility				
External & Adnexa				
Pupils				
Conjunctiva				
Cornea				
Anterior Chamber				
Iris				
Lens				
Fundus:	Disc			
Dilated	Vessels			
1.1% Myd	Macula			
0.2% Neo 9.3m	Periphery			
Tech	Vitreous			

*Handwritten notes in table:*  
 3+ conj hyperemia OD  
 F edema OD  
 optic visible through pupil - pseudo pigment where hyper  
 fundus cataract  
 poor dilation; 0.1% Myd OD

IMPRESSION / PLAN

**Subluxed 3-piece IOL & decompensation OD**

Amalar Grid  IBS/IGA/CP Control  Surgery R/S/A Discussed  Discussed signs/symptoms re:ha tear and detachment in detail

Return: next clinic days / weeks / mos / years / PRN Signature: [Signature] Date: 8/20/21

DPSCS Form OTS 130-130 2





**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Amy Green-Simms, MD      08/20/2021 10:53 AM**

**Patient: DAVID ROSE**  
[REDACTED]

**ID#: 295681**

**DOB: 1**

Off-site  
Urgent  
10:53 AM

Reference #:  
Date of Request: 08/20/2021

3rd Party Insurance: (VA, Workmen's Comp, Federal, Interstate Compact, etc.):  
Maryland DPSCS

*For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.*

**Procedure/Test Requested: Wilmer eye general ophthalmology clinic**

**Signs & Symptoms:**

**Date of Onset:**

46 yr old man with HIV and subluxed 3-piece IOL in the right eye with haptic through pupil, abrading endothelium and causing corneal decompensation x 2 months. Please eval for surgical repair with sutured IOL, right eye. Vision = hand motion at 6 feet in the right eye; 20/40 left eye.

**Site Medical Provider: Amy Green-Simms MD      08/20/2021**

**Copy this form and paste in an email and send form to designated reviewer**

**(For UM use only)**

Criteria Source: M & R      Interqual      Other  
Criteria met: Yes      No      Deferred

**Reviewer comments:**

**Recommendation for visit appointment:**

**# Visits:**



**NAME: ROSE, DAVID BERNARD**  
**NUMBER: 295681**  
**D.O.B.:** [REDACTED]

## CONSULTATION

---

**SITE: NBCI**

**COMPLETED BY: Amy Green-Simms, MD      08/20/2021 10:53 AM**

**UM Review #:**

**Reviewer Name:**

**Date Reviewed:**

*Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.*

NAME: ROSE, DAVID BERNARD  
NUMBER: 295681  
D.O.B.: [REDACTED]

**SITE:** NBCI  
**COMPLETED BY:** Burnice L. Swan, RN 08/27/2021 7:18 AM  
**Patient Name:** DAVID ROSE  
**IDOC#:** 295681  
**DOB:** [REDACTED]

**Patient presenting with chief complaint(s) of:** eye issues.

**Vital Signs:**

<u>Date</u>	<u>Time</u>	<u>Temp</u>	<u>Pulse</u>	<u>Pattern</u>	<u>Resp</u>	<u>Pattern</u>	<u>BP</u>	<u>Sp O2</u>	<u>Peak Flow</u>
08/27/2021	1:12 PM	97.4	72		18		140/88	97	

**MISCELLANEOUS AND OTHER COMPLAINTS**

**Subjective:**

Associated symptoms: Pt saw optometry and was told to wear and eye patch after instilling prescribed drops

**Objective:**

Physical Examination Findings

Pt was not given eye patch. Provided

**Assessment:**

alteration in comfort

**Plan:**

**MEDICATIONS**

<u>Brand Name</u>	<u>Dose</u>	<u>Sig Codes</u>	<u>Start Date</u>	<u>Stop Date</u>
Atropine Sulfate	1 %	daily od	08/20/2021	11/20/2021
Prezista	400 Mg	Tab 2 PO QD	06/04/2021	10/04/2021
Norvir	100 Mg	1 po QD	06/04/2021	10/04/2021
Lipitor	10 Mg	1 PO HS	06/04/2021	10/04/2021
Zyrtec	10 Mg	1 PO Q am	06/04/2021	10/04/2021
Truvada	200 Mg-300 Mg	1 PO Q am	06/04/2021	10/04/2021

**ORDERS**

EXHIBIT

H

completed  
completed  
completed

Case 1:22-cv-02198-SAG Document 1-1 Filed 08/29/24 Page 11 of 49  
Sick call if signs and symptoms of infection develop or symptoms do not subside  
(Miscellaneous) Patient education provided. Patient voiced understanding.

Provider: Asresahegn Getachew, MD

Document generated by: Burnice L. Swan, RN-08/27/2024-1:26 PM

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295681 8/20/21

# Johns Hopkins Hospital

<b>ROSE, DAVID</b>	MRN [REDACTED]	Gender M	DOB [REDACTED]
--------------------	-------------------	-------------	-------------------

Phone [REDACTED]	SSN [REDACTED]	Account # [REDACTED]	Patient Class [REDACTED]	Attending 213219 SEZEN KARAKUS	Admitted [REDACTED]	Discharged [REDACTED]
---------------------	-------------------	-------------------------	-----------------------------	-----------------------------------	------------------------	--------------------------

Admitting: Primary Care:  
 Referring: Consulting:

## Problems

Date	Code	Description	Type
No Records to Display			

## Report Information

Report ID:	Progress Notes (Transcription)	Status:	Final
a5b07dc2-971e-b15f-f07f-4e4f30a3d2af	Ordered By: 213219 SEZEN KARAKUS	Ordered/Requested On:	
Result Report/Status Change:	Ordered by Physician ID:	Body Site:	
Collected On:	Priority:	Specimen Source:	
Copy To:	Received On:	Interpreter:	
Observed On: 2021-09-16			

### Narrative

**Problem List Items Addressed This Visit**  
 Eye/Vision problems  
 Dislocated IOL (Intraocular lens) - Primary  
 Overview  
 9/16/2021 - First Wilmer Eval  
 Notes remote hx of "scratch" to right eye in childhood & 10 years old, denies this eye being "weak eye".  
 He does not know when he developed cataract right eye but notes it was removed 2010 (Dr. Summerfield (Bon Secour)) and reports uncomplicated surgery  
 Initial complaints right eye started 8/2021, treated with mydratic agents  
 UBM 9/16/2021 shows posterior displaced IOL with highly reflective opacities overlying the Intraocular lens OD.  
 IOL calcs show similar AL both eyes  
 Current Assessment and Plan  
 PT presents with reported dislocated IOL. On exam the capsule appears broken inferiorly, the IOL is visible in inferior periphery of retina. No obvious retinal detachment or tear visible. Vision can be improved with high power + lens  
 -- Will discuss with retina + anterior segment to plan for IOL removal, PPV, sutured IOL.  
 Attending attestation  
 I have reviewed the resident's note related to this encounter, and I agree with the documented findings and plan of care. I obtained history from the patient and was present with the resident during the key portions of service on 9/16/2021. I personally examined the patient and revised plan of care related to this encounter.  
 Sezen Karakus, M.D.

*[Handwritten Signature]*  
 10/5/21

**EXHIBIT**  
 I

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 10/05/2021 7:16 PM**

**Patient: DAVID ROSE**

**ID#: 295681**

**DOB: 1**

Off-site

Reference #:

Date of Request: 10/05/2021

7:16 PM

3rd Party Insurance: (VA, Workmen's Comp, Federal, Interstate Compact, etc.):  
Maryland DPSCS

*For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.*

---

**Procedure/Test Requested: Ophthalmology to rmove dislocated IOL**

On October 4, 2021 patient was evaluated at Wilmer eye clinic. He was diagnosed with dislocated IOL, broken inferiorly. No retinal detachment. The ophthalmologist recommended removal of IOL, PPV and sutured IOL. I am submitting consult as per ophthalmologist recommendation

**Site Medical Provider: Asresahegn Getachew, MD 10/05/2021**

**Copy this form and paste in an email and send form to designated reviewer**

---

**(For UM use only)**

**Criteria Source: M & R Interqual Other**  
**Criteria met: Yes No Deferred**

**Reviewer comments:**

**Recommendation for visit appointment:**

**# Visits:**



---

**NAME: ROSE, DAVID BERNARD**  
**NUMBER: 295681**  
**D.O.B.: [REDACTED]**

## CONSULTATION

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 10/05/2021 7:16 PM**

**UM Review #:**

**Reviewer Name:**

**Date Reviewed:**

*Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.*

**NAME: ROSE, DAVID BERNARD**  
**NUMBER: 295681**  
**D.O.B.: [REDACTED]**

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 10/28/2021 12:53 PM**

**Patient: DAVID ROSE**

**ID#: 295681**

**DOB: 1**

Off-site

Reference #:

Date of Request: 10/28/2021

12:53 PM

3rd Party Insurance: (VA, Workmen's Comp, Federal, Interstate Compact, etc.):  
Maryland DPSCS

*For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.*

**Procedure/Test Requested: Ophthalmologist eval at wilmer eye clinic**

I spoke with Dr.Sabharwal ophthalmologist from Wilmer eye clinic and he said the would like to see the patient to do some studies on his eye before he is scheduled for surgery.

I am submitting consult for ophthalmology evaluation before his eye surgery.

On October 4, 2021 patient was evaluated at Wilmer eye clinic. He was diagnosed with dislocated IOL, broken inferiorly. No retinal detachment. The ophthalmologist recommended removal of IOL, PPV and sutured IOL. I am submitting consult as per ophthalmologist recommendation

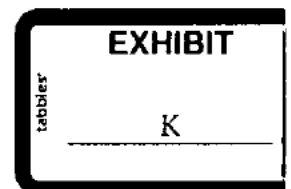
**Site Medical Provider: Asresahegn Getachew, MD 10/28/2021**

**Copy this form and paste in an email and send form to designated reviewer**

**(For UM use only)**

**Criteria Source: M & R Interqual Other**  
**Criteria met: Yes No Deferred**

**Reviewer comments:**



**NAME: ROSE, DAVID BERNARD**  
**NUMBER: 295681**  
**D.O.B.: [REDACTED]**



## CONSULTATION

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 10/28/2021 12:53 PM**

**Recommendation for visit appointment:**

**# Visits:**

---

**UM Review #:**

**Reviewer Name:**

**Date Reviewed:**

*Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.*

**NAME: ROSE, DAVID BERNARD**  
**NUMBER: 295681**  
**D.O.B.:** [REDACTED]

**SITE: NBCI**

**COMPLETED BY: Ernest K. Massalla, RN 11/24/2021 7:00 PM**

---

**PATIENT: DAVID ROSE**  
**DATE OF BIRTH: [REDACTED]**  
**DATE: November 24, 2021**  
**VISIT TYPE: Nurse Sick Call - Scheduled**

---

**Reason(s) for visit**

- 1. eye patch

**Nursing Comments**

Patient alert and stable , denies any discomfort to his right eye, patch replaced.

**Height and Weight**

**Vitals**

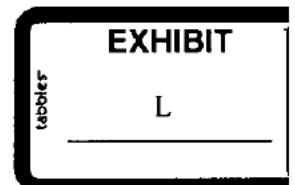
**Allergies**

**Allergen/Ingredient**  
No Known Drug Allergies

**Brand**

**Reaction:**

**Document generated by: Ernest K. Massalla, RN 11/24/2021 7:33 PM**



**SITE: NBCI**

**COMPLETED BY: Lori Keister, LPN 12/08/2021 2:03 PM**

---

**PATIENT: DAVID ROSE**  
**DATE OF BIRTH: [REDACTED]**  
**DATE: December 08, 2021**  
**VISIT TYPE: Chronic Care Nurse Prep**

---

**Reason(s) for visit**

- 1. Assisted provider with CC telemedicine**

**Nursing Comments**

Assisted provider with physical exam of patient. Verbal permission was given to be seen by provider via telemedicine. Pt ambulated steadily and independently into exam room. Pt is alert and oriented x 3, calm and cooperative with care. Lungs sound clear and no dyspnea is noted on exertion or at rest. Apical pulse is regular. Bowel sounds present in all 4 quads. Pt denies constipation, diarrhea, or difficulty urinating. Skin is warm, dry, and intact. No edema noted BLE.

Pt has been scheduled for eye surgery, but not until May of 2022. Optometrist sent email asking if it could be scheduled sooner. Off-site scheduler has been contacted about this issue. Pt will return in 90 days for next CC visit and lab work. No complaints voiced, other than his eye is becoming more painful.

**Height and Weight**

**Vitals**

**Allergies**

**Allergen/Ingredient**  
No Known Drug Allergies

**Brand**

**Reaction:**

**Document generated by: Lori Keister, LPN 12/08/2021 2:03 PM**

**EXHIBIT**

**M**

tabbles

**SITE: WCI**

**COMPLETED BY: Sue Brant, RN 03/15/2022 12:25 PM**

**PATIENT: DAVID ROSE**  
**DATE OF BIRTH: [REDACTED]**  
**DATE: March 15, 2022**  
**VISIT TYPE: Chronic Care Nurse Prep**

Reason(s) for visit

1. CCC with RMD via Telemedicine

Nursing Comments

Patient seen today via Telemedicine with RMD for chronic care visit. He verbally agrees to be seen via Telemedicine. He walked in to exam room without difficulty. Able to stand on scale for weight without difficulty. He is pleasant.

AAOx3. Patient has hx of intraocular lens in right eye, is wearing eye patch today. He is requesting a new eye patch to replace the current one which he states is worn out. He is awaiting surgery on his eye at Johns Hopkins.

Skin w/d

Color good

Denies chest pain or shortness of breath. Lungs CTA, heart sounds regular.

Abdomen soft with bowel sounds present. He denies difficulty with bowel or bladder.

Pedal pulses present. There is no lower extremity edema present.

Plan:

Provider requesting IC nurse to contact ID specialist to consider change in regimen or medications. IC nurse contacted by this writer and discussed above.

Follow up chronic care in 90 days.

Height and Weight

Date	Height Ft	Height In	Height Cm	Weight Lb	Weight Kg
03/15/2022	5.0	8.0		182.0	

Vitals

Time	Ht Ft	Ht In	Height Method	Wt Lb	Wt Kg	Weight Context	BMI
12:25 PM	5.0	8.0	carried forward	182.0		dressed with shoes	27.67

Time	Temp	Route	BP	Position	Site	Method	Cuff	Pulse	Pattern
12:25 PM	97.8		119/81	sitting	left arm	automatic	large	64	regular

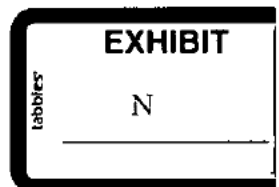
Time	Resp	PulseOx	PulseOxAmb	Timing	PeakFlow	Timing	Method
12:25 PM	18	98					

Allergies

Allergen/Ingredient  
 No Known Drug Allergies

Brand

Reaction:



**SITE: NBCI**  
**COMPLETED BY: Lori Kelster, LPN 03/18/2022 9:39 AM**

---

**PATIENT: DAVID ROSE**  
**DATE OF BIRTH: [REDACTED]**  
**DATE: March 18, 2022**  
**VISIT TYPE: Chart Update**

---

Reason(s) for visit  
1. medical supplies

Nursing Comments  
Pt was given new eye patch and disposable eye pads for replacement of his old one.

Height and Weight

Vitals

<u>Allergies</u>	<u>Brand</u>	<u>Reaction:</u>
<u>Allergen/Ingredient</u> No Known Drug Allergies		

Document generated by: Lori Kelster, LPN 03/18/2022 9:40 AM



**SITE: NBCI**  
**COMPLETED BY: Ernest K. Massalla, RN 03/21/2022 7:04 AM**

---

**PATIENT: DAVID ROSE**  
**DATE OF BIRTH: [REDACTED]**  
**DATE: March 21, 2022**  
**VISIT TYPE: Nurse Sick Call - Scheduled**

---

**Reason(s) for visit**  
**1. follow up eye surgery**

**Nursing Comments**  
Issues resolved.

**Height and Weight**

**Vitals**

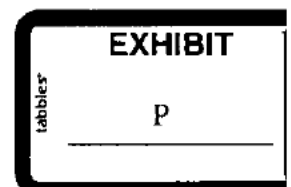
**Allergies**

**Allergen/Ingredient**  
No Known Drug Allergies

**Brand**

**Reaction:**

**Document generated by: Ernest K. Massalla, RN 03/21/2022 8:13 PM**



# Johns Hopkins Hospital

<b>ROSE, DAVID</b>		MRN	Gender	DOB
			M	
Phone	SSN	Account #	Patient Class	Attending
				845627-EVERARDO HERNANDEZ-QUINTELA
			Admitted	Discharged

Admitting: Primary Care:  
 Referring: Consulting:

## Problems

Date	Code	Description	Type
No Records to Display			

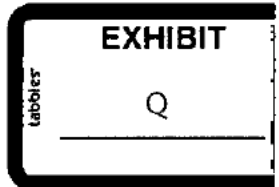
## Report Information

Report ID:	Progress Notes (Transcription)	Status:	Final
c5d301f7-ac2d-849a-8a48-d5c832cca74a	Ordered By: 845627 EVERARDO HERNANDEZ-QUINTELA	Ordered/Requested On:	
Result Report/Status Change: 2022-05-02	Ordered by Physician ID:	Body Site:	
Collected On:	Priority:	Specimen Source:	
Copy To:	Received On:	Interpreter:	
Observed On: 2022-05-02			

### Narrative

#### Problem List Items Addressed This Visit

**Other**  
**Dislocated IOL (intraocular lens)**  
**Overview**  
 9/16/2021 - First Wilmer Eval  
 Notes remote hx of "scratch" to right eye in childhood & 10 years old, denies this eye being "weak eye".  
 He does not know when he developed cataract right eye but notes it was removed 2010 (Dr. Summerfield (Bon Secour)) and reports uncomplicated surgery  
 Initial complaints right eye started 6/2021, treated with mydriatic agents  
 UBM 9/16/2021 shows posterior displaced IOL with highly reflective opacities overlying the intraocular lens OD.  
 IOL calcs show similar AL both eyes  
**Current Assessment and Plan**  
 Stable, dislocated IOL in left eye  
 No visible retinal detachment  
 Commented with Retina Fellow who recommends next available appointment with GES  
**Retina**



**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Adane T. Negussie, PA 05/17/2022 4:22 PM**

**NEXTGEN**  
 HEALTHCARE INFORMATION SYSTEMS

PATIENT NAME: DAVID BERNARD ROSE  
 DATE OF BIRTH: Patient DOB: [REDACTED]  
 DOC # 295681  
 DATE: 05/17/2022 4:22 PM  
 VISIT TYPE: Provider Visit-scheduled

*For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.*

**Consultation Orders**

Visit Location	Request Type	Site	Outpatient Date	Release Date	Cost Center	Incarceration Date
----------------	--------------	------	-----------------	--------------	-------------	--------------------

Off-site Routine

Phone	Fax	Action Requested	Action Requested 2	Responsible Party	Service Type	Provider
		GES Retina	Wilmer Eye Clinic / Ophthalmology			

Visit Type	Follow Up #	Multiple Visit Tx	Med Provider	Provider Date	Med Director	Director Date
F/U	3					

# Treatments	Exam Data/Objective Findings	Proceed w Service	Alternative Treatment Plan
	This is a 47yo AAM with pmhx of HLD, Chronic Rhinitis, HIV+ over 17yrs now on Bictarvy who presents for scheduled provider visit. On 05/02/2022 he was evaluated by Wilmer Eye at JHH and was found to have stable dislocated IOL (intraocular lens) in the right eye. No visible retinal detachment. Recommended to schedule with GES Retina. Visual Acuity on the left is 20/20 using Snellen Eye Chart. Right eye is blurred, only sees shadow. Will generate consult.	N	N

Diagnosis 1	Code 1	Status 1	Diagnosis 2	Code 2	Status 2
-------------	--------	----------	-------------	--------	----------





**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Adane T. Negussie, PA 05/17/2022 4:22 PM**

Diagnosis 3	Code 3	Status 3	Diagnosis 4	Code 4	Status 4
<b>Onset Date</b>	<b>Signs and Symptoms</b>		<b>Lab &amp; Xray Data</b>		<b>Failed Outpatient Therapy</b>
	This is a 47yo AAM with pmhx of HLD, Chronic Rhinitis, HIV+ over 17yrs now on Bictarvy who presents for scheduled provider visit. On 05/02/2022 he was evaluated by Wilmer Eye at JHH and was found to have stable dislocated IOL (intraocular lens) in the right eye. No visible retinal detachment. Recommended to schedule with GES Retina. Visual Acuity on the left is 20/20 using Snellen Eye Chart. Right eye is blurred, only sees shadow. Will generate consult.				

**Utilization Management**

M&R	Interqual	Other	Other Source	Visit Appt	Criteria Met	Rec. # Visits
N	N	N			Pending	
<b>Notes</b>			<b>UM Review #</b>	<b>Reviewer Name</b>	<b>Reviewer Date</b>	

**Medications**

Medications (active prior to today)

Medication Name	Sig Description	Start Date	Stop Date	Refilled	Rx Elsewhere
Lipitor 10 mg tablet	take one by mouth at bedtime	03/15/2022	07/15/2022	05/29/2014	N
Zyrtec 10 mg tablet	take one by mouth every morning	03/15/2022	07/15/2022	11/27/2019	N
Bictarvy 50 mg-200 mg-25 mg tablet	take 1 tablet by oral route every day	05/11/2022	09/07/2022		N

Provider: Adane Negussie, PA

Document generated by: Adane T. Negussie, PA 05/18/2022 01:06 PM



**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Adane T. Negussie, PA      05/17/2022 4:22 PM**

*Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.*

**FACILITY: Maryland**

**SITE: THRESHOLD**

**COMPLETED BY: Sandra J. Boettinger, UMRN on 05/20/2022**

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**Patient: DAVID ROSE**

**ID#: 295681**

**DOB:** [REDACTED]

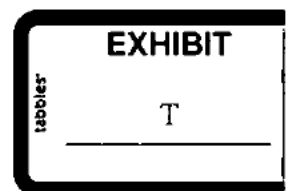
**UM ATP 05/19/2022:** "ATP: Based on the information provided, medical necessity has not been demonstrated at this time. Consider on site ophthalmology follow up as VA remains stable."

ATP Submitted to Statewide UMMD for further review.

**(For UM use only)**

**UM Disposition**

---



**NAME: ROSE, DAVID BERNARD.**

**NUMBER:**

# NEXTGEN

HEALTHCARE INFORMATION SYSTEMS

PATIENT: DAVID ROSE  
DATE OF BIRTH: [REDACTED]  
DATE: 05/27/2022 07:20 PM  
DOC#: 295681  
VISIT TYPE: Nurse Sick Call - Scheduled

## Nurse Visit

Reason for visit: eye patch

Statement of complaint (in patient's words): I need my eye patch replaced.

### Nurse Protocols:

### Medications

Medication	Sig	Comment
Biktarvy 50 mg-200 mg-25 mg tablet	take 1 tablet by oral route every day	
Lipitor 10 mg tablet	take one by mouth at bedtime	
Zyrtec 10 mg tablet	take one by mouth every morning	

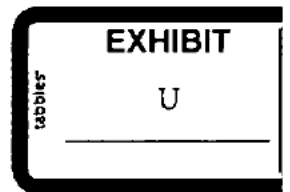
### Social History:

Reviewed, no changes.

### General Comments

Patient alert, requesting for his eye patch to be replaced, presently there are no eye patches. Patient informed that once the patches come in his will be replaced, understanding voiced.

Document generated by: Ernest K. Massalla, RN 05/28/2022 11:37 AM



**ADDENDUM**

**FACILITY: Maryland**

**SITE: THRESHOLD**

**COMPLETED BY: Sandra J. Boettinger, UMRN on 07/12/2022**

---

**Patient: DAVID ROSE**

**ID#: 295681**

**DOB** [REDACTED]

**Statewide UMMD ATP 07/12/2022 : "Case reviewed, agree with ATP recommendation for or site ophthalmology follow up as VA remains stable."**

**(For UM use only)**

**UM Disposition**

---



**NAME: ROSE, DAVID BERNARD.**

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 07/26/2022 9:46 PM**



PATIENT: DAVID BERNARD ROSE  
 DATE OF BIRTH: Patient DOB: [REDACTED]  
 DOC # 295681  
 DATE 07/26/2022 9:46 PM  
 VISIT TYPE: Chart Update

*For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.*

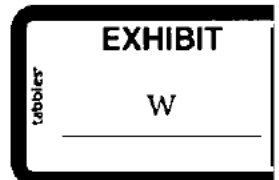
**Consultation Orders**

Visit Location	Request Type	Site	Outpatient Date	Release Date	Cost Center	Incarceration Date
Off-site		NBCI				
Off-site	Routine					

Phone	Fax	Action Requested	Action Requested 2	Responsible Party	Service Type	Provider
		Wilmer eye clinic for removal of dislocated lens				
		GES Retina		Wilmer Eye Clinic / Ophthalmology		

Visit Type	Follow Up #	Multiple Visit Tx	Med Provider	Provider Date	Med Director	Director Date
F/U	3					

# Treatments	Exam Data/Objective Findings	Proceed w Service	Alternative Treatment Plan
	The patient is 47-year-old with dislocated IOL. He was evaluated at Wilmer eye clinic and they note IOL is broken and displaced inferiorly. No retinal detachment. The ophthalmologist recommended removal of IOL , PPV	N	N



**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 07/26/2022 9:46 PM**

and sutured IOL.

I am submitting consult for removal of IOL, PPV and suture IOL.

N N

**Diagnosis 1 Code 1 Status 1 Diagnosis 2 Code 2 Status 2**

**Diagnosis 3 Code 3 Status 3 Diagnosis 4 Code 4 Status 4**

**Onset Date Signs and Symptoms Lab & Xray Data Failed Outpatient Therapy**

This is a 47yo AAM with pmhx of HLD, Chronic Rhinitis, HIV+ over 17yrs now on Bictarvy who presents for scheduled provider visit. On 05/02/2022 he was evaluated by Wilmer Eye at JHH and was found to have stable dislocated IOL (intraocular lens) in the right eye. No visible retinal detachment. Recommended to schedule with GES Retina. Visual Acuity on the left is 20/20 using Snellen Eye Chart. Right eye is blurred, only sees shadow. Will generate consult.

**Utilization Management**

M&R	Interqual	Other	Other Source	Visit Appt	Criteria Met	Rec. # Visits
N	N	N			Pending	
N	N	N			Pending	

Notes	UM Review #	Reviewer Name	Reviewer Date

**Medications**

Medications (active prior to today)

### CONSULTATION

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 07/26/2022 9:46 PM**

Medication Name	Sig Description	Start Date	Stop Date	Refilled	Rx Elsewhere
Biktavy 50 mg-200 mg-25 mg tablet	take 1 tablet by oral route every day	05/11/2022	09/07/2022		N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	11/21/2022	07/25/2022	N
Lipitor 10 mg tablet	take one by mouth at bedtime	07/25/2022	11/21/2022	07/25/2022	N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	11/21/2022	07/25/2022	N

*Provider: Asresahegn Getachew, MD*

*Document generated by: Asresahegn Getachew, RMD 07/26/2022 09:48 PM*

*Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.*



**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 07/27/2022 6:55 PM**

**NEXTGEN**  
 HEALTHCARE INFORMATION SYSTEMS

PATIENT **DAVID BERNARD ROSE**  
 DATE OF BIRTH Patient DOB: [REDACTED]  
 DOC #: 295681  
 DATE: 07/27/2022 6:55 PM  
 VISIT TYPE: Chart Update

*For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.*

**Consultation Orders**

Visit Location	Request Type	Site	Outpatient Date	Release Date	Cost Center	Incarceration Date
----------------	--------------	------	-----------------	--------------	-------------	--------------------

Off-site		NBCI				
Off-site		NBCI				
Off-site	Routine					

Phone	Fax	Action Requested	Action Requested 2	Responsible Party	Service Type	Provider
		Retinal evaluation at Wilmer eye clinic before removal of dislocated lens				
		GES Retina		Wilmer Eye Clinic / Ophthalmology		

Visit Type	Follow Up #	Multiple Visit	Med Provider	Provider Date	Med Director	Director Date
------------	-------------	----------------	--------------	---------------	--------------	---------------

F/U	3					
-----	---	--	--	--	--	--

# Treatments	Exam Data/Objective Findings
--------------	------------------------------

Proceed w Service
-------------------

Alternative Treatment
-----------------------

<b>EXHIBIT</b>
X

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 07/27/2022 6:55 PM**

The patient is a 47-year-old with a history of HIV disease, which needs the removal of dislocated ILO. The Wilmer ophthalmologist recommends retinal evaluations at Wilmer eye clinic by a Retinal specialist to decide how to approach the removal of dislocated IOL. I called and discussed with the JHH ophthalmologist and requested if they could do the retinal evaluation and do the surgery on the same day. The ophthalmologist said this could not be done on the same day and recommended a pre-surgery assessment. I am submitting pre-IOL removal retinal evaluation at Wilmer eye clinic.

	Plan
N	N
N	N

Diagnosis 1	Code 1	Status 1	Diagnosis 2	Code 2	Status 2
-------------	--------	----------	-------------	--------	----------

Diagnosis 3	Code 3	Status 3	Diagnosis 4	Code 4	Status 4
-------------	--------	----------	-------------	--------	----------

Onset Date	Signs and Symptoms	Lab & Xray Data	Failed Outpatient Therapy
------------	--------------------	-----------------	---------------------------

This is a 47yo AAM with pmhx of HLD, Chronic Rhinitis, HIV+ over 17yrs now on Bictarvy who presents for scheduled provider visit. On 05/02/2022 he was evaluated by Wilmer Eye at JHH and was found to have stable dislocated IOL (intraocular lens) in the right eye. No visible retinal detachment. Recommended to schedule with GES Retina. Visual Acuity on the left is 20/20 using Snellen Eye Chart. Right eye is blurred, only sees shadow. Will generate consult.

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 07/27/2022 6:55 PM**

**Utilization Management**

M&R	Interqual	Other	Other Source	Visit Appt	Criteria Met	Rec. # Visits
N	N	N			Pending	
N	N	N			Pending	
N	N	N			Pending	

Notes	UM Review #	Reviewer Name	Reviewer Date

**Medications**

Medications (active prior to today)

Medication Name	Sig Description	Start Date	Stop Date	Refilled	Rx Elsewhere
Biktarvy 50 mg-200 mg-25 mg tablet	take 1 tablet by oral route every day	05/11/2022	09/07/2022		N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	11/21/2022	07/25/2022	N
Lipitor 10 mg tablet	take one by mouth at bedtime	07/25/2022	11/21/2022	07/25/2022	N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	11/21/2022	07/25/2022	N

Provider: Asresahegn Getachew, MD

Document generated by: Asresahegn Getachew, RMD 07/27/2022 06:56 PM

*Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.*

PRISONER RIGHTS INFORMATION SYSTEM OF MARYLAND, INC.  
P.O. BOX 929  
CHESTERTOWN, MARYLAND 21620

July 28, 2022

Darrin Mitchell, Associate Vice President of Operations  
YesCare Corporation  
7240 Parkway Drive, Suite 350  
Hanover, Maryland 21076

RE: David Rose, DOC# 295681, NBCI

Dear Mr. Mitchell:

This letter is in reference to the medical treatment YesCare is providing to David Rose. At this time, Mr. Rose is receiving inadequate medical care under the Eighth Amendment to the U.S. Constitution.

Mr. Rose is experiencing blindness and extreme pain in his right eye stemming from complications from cataract removal surgery in 2011. On October 4, 2021, an ophthalmologist at the Wilmer Eye Institute diagnosed Mr. Rose with a dislocated interocular lens and recommended he undergo surgery to remove the dislocated lens, to receive a pars plana vitrectomy, and to suture a replacement lens. This surgery requires up to date evaluations to ensure the proper treatment is provided.

Medical records dated December 8, 2021 provide that Mr. Rose was scheduled to undergo surgery in May 2022, and that an optometrist emailed the medical department requesting it be scheduled sooner than May. On May 19, 2022, Utilization Management denied Mr. Rose's surgery and provided as follows: "[Alternative Treatment Program]: Based on the information provided, medical necessity has not been demonstrated at this time. Consider on site ophthalmology follow up as [visual acuity] remains stable."

Mr. Rose's dislocated lens is currently being treated with pain medication and an eye patch. Failure to treat a dislocated lens may result in more severe conditions, including permanent blindness or a detached retina. PRISM's medical consultant, Cornealius Stamp, M.D., has advised that it is medically necessary Mr. Rose receives the prescribed reparative surgery immediately.

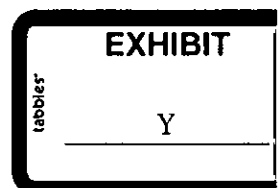
YesCare's current treatment plan constitutes deliberate indifference to Mr. Rose's serious medical condition and is in violation of Mr. Rose's right to receive adequate medical treatment under the Eighth Amendment. Accordingly, PRISM is prepared to assist Mr. Rose in pursuing legal action.

YesCare's immediate response to this letter indicating their decision in this matter will be appreciated.

Regards,



Victoria Devore, PRISM Staff Attorney  
(410) 528-1400 | vdevore@prisminc.org



APPENDIX

**FACILITY: Maryland**

**SITE: THRESHOLD**

**COMPLETED BY: Sandra J. Boettinger, UMRN on 07/29/2022**

---

**Patient: DAVID ROSE**

**ID#: 295681**

**DOB:** [REDACTED]

**UM Approval 07/29/2022: Approved for GES Retina Evaluation.**

**(For UM use only)**

**UM Disposition**

---



**NAME: ROSE, DAVID BERNARD.**

**NUMERED-**

**Johns Hopkins Hospital**

<b>ROSE, DAVID</b>		MRN	Gender	DOB		
			M			
Phone	SSN	Account #	Patient Class	Attending	Admitted	Discharged
				912249 IVES VALENZUELA		

Admitting: Primary Care:  
 Referring: Consulting:

**Problems**

Date	Code	Description	Type
No Records to Display			

**Report Information**

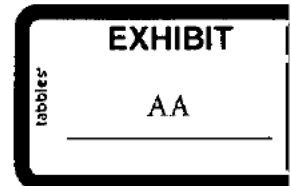
Report ID:	Progress Notes (Transcription)	Status:	Final
d77e8afc-39a5-38fa-b2e8-dccdf28fb5fo	Ordered By: 826522 LOKA THANGAMATHESVARA N	Ordered/Requested On:	
Result Report/Status Change:	Ordered by Physician ID:	Body Site:	
Collected On:	Priority:	Specimen Source:	
Copy To:	Received On:	Interpreter:	
Observed On: 2022-08-03			

Narrative

Attestation signed by Ives Antonio Valenzuela, MD at 8/3/2022 4:04 PM  
 I discussed the patient with the Resident and agree with their note which accurately reflects my plan and management recommendations. In summary, 47yoM with dislocated IOL here for follow-up. Patient needs to see GES Retina for surgical planning OD. Found to have small drusen OS incidentally on OCT MAC today, also to be evaluated by retina next visit with FAF. Rest of pfan as above. Date of service 08/03/2022  
 Ives A. Valenzuela, MD  
 Glaucoma Division  
 Wilmer Eye Institute

Problem List Items Addressed This Visit

Other  
 Dislocated IOL (intraocular lens) - Primary  
 Overview  
 9/16/2021 - First Wilmer Eval  
 Notes remote hx of "scratch" to right eye in childhood & 10 years old, denies this eye being "weak eye".  
 He does not know when he developed cataract right eye but notes it was removed 2010 (Dr. Summerfield (Bon Secour)) and reports uncomplicated surgery  
 Initial complaints right eye started 6/2021, treated with mydriatic agents  
 UBM 9/16/2021 shows posterior displaced IOL with highly reflective opacities overlying the intraocular lens OD.  
 IOL calcs show similar AL both eyes  
 Current Assessment and Plan  
 Stable, dislocated IOL in left eye  
 No visible retinal detachment  
 Commented with Retina Fellow who recommends next available appointment with GES Retina (patient keeps getting scheduled for regular GES please ensure he gets a GES retina appt next time for combined IOL removal + PPV + sutured IOL)  
 Discussed with: Dr. Valenzuela  
 Drusen  
 Current Assessment and Plan  
 Small drusen left eye, OCT shows drusen with no underlying CNV. Disruption of EZ zone.  
 Patient asymptomatic, no family history of inherited retinal conditions, not symptomatic.  
 However given young age and development of drusen, will need to be monitored.  
 -- recommend FAF and OCT retina at next visit  
 -- further evaluation at GES retina.



# NEXTGEN

HEALTHCARE INFORMATION SYSTEMS

NAME: DAVID ROSE  
 MRN: [REDACTED]  
 ID: 295681  
 DATE: 08/05/2022 10:58 AM  
 SPECIALTY: Chronic Care Nurse Prep

Established patient

### History of Present Illness:

1. 199

Assisted provider with physical exam of patient. Verbal permission was given to be seen by provider via telemedicine. Pt ambulated steadily and independently into exam room. Pt is alert and oriented x 3, calm and cooperative with care. Lungs sound clear and no dyspnea is noted on exertion or at rest. Apical pulse is regular. Bowel sounds present in all 4 quads. Pt denies constipation, diarrhea, or difficulty urinating. Skin is warm, dry, and intact. Pt complains of headaches daily. consult placed for ophthalmology visit. He will be seen again in 4 weeks.

### PROBLEM LIST:

Problem Description	Onset Date	Chronic	Clinical Status	Notes
HIV	08/05/2022	Y		The patient has history of HIV and he is on Biktarvy with good immunologic and virologic response. On 6/6/2022 HIV viral load undetectable and absolute CD4 count 939

### Problem List (not yet mapped to SNOMED-CT®):

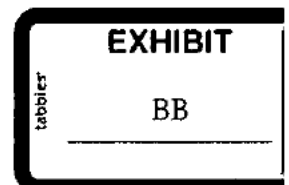
Problem Description	Onset Date	Notes
Hiv Disease	11/03/2008	

### Social History:

Reviewed, no changes.

### Medications (active prior to today)

Medication Name	Sig Description	Start Date	Stop Date	Refilled	Rx Elsewhere
Biktarvy 50 mg-200 mg-25 mg tablet	take 1 tablet by oral route every day	05/11/2022	09/07/2022		N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	11/21/2022	07/25/2022	N
Lipitor 10 mg tablet	take one by mouth at bedtime	07/25/2022	11/21/2022	07/25/2022	N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	08/05/2022	07/25/2022	N





**Allergies**

Ingredient	Reaction (Severity)	Medication Name	Comment
NO KNOWN DRUG ALLERGIES			

11/26/2014

**Height**

Time	ft	in	cm	Last Measured	Height Position	Measured By
9:59 AM	5.0	8.00	172.72	12/08/2021	0	Lori Keister, LPN

**Weight/BSA/BMI**

Time	lb	oz	kg	Context	BMI kg/m2	BSA m2	Measured By
9:59 AM	182.00		82.554	dressed with shoes	27.67		Lori Keister, LPN

**Blood Pressure**

Time	BP mm/Hg	Position	Side	Site	Method	Cuff Size	Measured By
9:59 AM	128/83	sitting	left	arm	automatic	adult	Lori Keister, LPN

**Temperature/Pulse/Respiration**

Time	Temp F	Temp C	Temp Site	Pulse/min	Pattern	Resp/min	Measured By
9:59 AM	97.2	36.2	ear	83	regular	16	Lori Keister, LPN

**Pulse Oximetry/FIO2**

Time	Pulse Ox (Rest %)	Pulse Ox (Amb %)	O2 Sat	O2 L/Min	Timing	FiO2 %	L/min	Delivery Method	Finger Probe	Measured By
9:59 AM	94		RA		Pre-tx				R Index	Lori Keister, LPN

**Pain Scale**

Time	Pain Score	Method	Measured By
9:59 AM	0	Numeric Pain Intensity Scale	Lori Keister, LPN

**Medications (Added, Continued or Stopped this visit)**

Started	Medication	Directions	Instruction	Stopped
05/11/2022	Biktarvy 50 mg-200 mg-25 mg tablet	take 1 tablet by oral route every day		09/07/2022
07/25/2022	Lipitor 10 mg tablet	take one by mouth at bedtime		11/21/2022
07/25/2022	Zyrtec 10 mg tablet	take one by mouth every morning		08/05/2022
07/25/2022	Zyrtec 10 mg tablet	take one by mouth every morning		11/21/2022

Date Placed	Time Placed	Site	Side	Date Read	Time Read	Result
10/26/2014	8:43 AM	2RA	Right	10/28/2014		0 mm
10/09/2013	12:01 PM			10/11/2013		0 mm
ROSE, DAVID BERNARD. 1447184				8/05/2022 10:58 AM	2/3	



10/22/2012	10:27 AM						0 mm
11/23/2011	1:56 PM						0 mm
10/18/2011	8:29 AM						0 mm
10/26/2010	8:57 AM	LA	Left				0 mm
11/10/2009	2:12 PM	RA					0 mm
11/10/2009	3:15 PM	LA					0 mm
							10/05/2018
							10/14/2015
							10/19/2016
							10/10/2017

Date Placed	Time Placed	Date Read	Dose	Units	Exp Date	Manufacturer	Lot #
10/26/2014	8:43 AM	10/28/2014	0.1	mL	01/28/2016	JHP Pharmaceuticals	717238
10/09/2013	12:01 PM	10/11/2013	0.1	mL			
10/22/2012	10:27 AM	10/24/2012	0.1	mL			
11/23/2011	1:56 PM	11/25/2011	0.1	mL			
10/18/2011	8:29 AM	10/20/2011	0.1	mL			
10/26/2010	8:57 AM	10/28/2010	0.1	mL	09/05/2011	JHP Pharmaceuticals	134223
11/10/2009	2:12 PM	11/12/2009	0.1	mL	11/30/2010	JHP Pharmaceuticals	111057
11/10/2009	3:15 PM	11/12/2009	0.1	mL	11/30/2010	JHP	111057
		10/05/2018	0.1	mL			
		10/14/2015	0.1	mL			
		10/19/2016	0.1	mL			
		10/10/2017	0.1	mL			

*Provider:*

Getachew, MD, Asresahegn 08/08/2022 10:02 AM

Document generated by: Lori Keister, LPN 08/08/2022 10:02 AM

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 08/05/2022 4:46 PM**



PATIENT: **DAVID BERNARD ROSE**  
 DATE OF BIRTH: Patient DOB [REDACTED]  
 DOC #: 295681  
 DATE: 08/05/2022 4:46 PM  
 VISIT TYPE: Provider Visit-scheduled

*For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.*

**Consultation Orders**

Visit Location	Request Type	Site	Outpatient Date	Release Date	Cost Center	Incarceration Date
Off-site		NBCI				
Off-site		NBCI				
Off-site		NBCI				
Off-site	Routine					

Phone	Fax	Action Requested	Action Requested 2	Responsible Party	Service Type	Provider
		Retinal evaluation at Wilmer eye clinic GES retinal evaluation and removal of IOL Wilmer eye clinic for removal of dislocated lens GES Retina				Wilmer Eye Clinic / Ophthalmology

Visit Type	Follow Up #	Multiple Visit Tx	Med Provider	Provider Date	Med Director	Director Date



**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 08/05/2022 4:46 PM**

F/U 3

# Treatments	Exam Data/Objective Findings	Proceed w Service	Alternative Treatment Plan
	<p>The patient is a 47-year-old with a history of HIV disease, which needs the removal of dislocated IOL. The Wilmer ophthalmologist recommends retinal evaluations at Wilmer eye clinic by a Retinal specialist to decide how to approach the removal of dislocated IOL. I called and discussed with the JHH ophthalmologist and requested if they could do the retinal evaluation and do the surgery on the same day. The ophthalmologist said this could not be done on the same day and recommended a pre-surgery assessment. I am submitting pre-IOL removal retinal evaluation at Wilmer eye clinic.</p>	N	N
	<p>Dislocated IOL: Patient was evaluated at Wilmer eye clinic (JHH) . I reviewed the consultant report they recommended GES retinal appointment for combined IOL removal+ PPV+ sutured IOL)</p> <p>I am submitting consult as per recommendation of per ophthalmologist recommendation. Please include the consultant recommendation with the consult</p>	N	N
	<p>The patient is 47-year-old with dislocated IOL. He was evaluated at Wilmer eye clinic and they note IOL is broken and displaced inferiorly. No retinal detachment. The ophthalmologist recommended removal of IOL , PPV and sutured IOL. I am submitting consult for removal of IOL, PPV and suture IOL.</p>	N	N
	<p>This is a 47yo AAM with pmhx of HLD, Chronic Rhinitis, HIV+ over 17yrs now on Bictarvy who presents for scheduled provider visit. On 05/02/2022 he was evaluated by Wilmer Eye at JHH and was found to have stable dislocated IOL (intraocular lens) in the right eye. No visible retinal detachment. Recommended to schedule with GES Retina. Visual Acuity on the left is 20/20 using Snellen Eye Chart. Right eye is blurred, only sees shadow. Will generate consult.</p>	N	N

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 08/05/2022 4:46 PM**

**Diagnosis 1      Code 1      Status 1      Diagnosis 2      Code 2      Status 2**

**Diagnosis 3      Code 3      Status 3      Diagnosis 4      Code 4      Status 4**

**Onset Date      Signs and Symptoms      Lab & Xray Data      Failed Outpatient Therapy**

This is a 47yo AAM with pmhx of HLD, Chronic Rhinitis, HIV+ over 17yrs now on Bictarvy who presents for scheduled provider visit. On 05/02/2022 he was evaluated by Wilmer Eye at JHH and was found to have stable dislocated IOL (intraocular lens) in the right eye. No visible retinal detachment. Recommended to schedule with GES Retina. Visual Acuity on the left is 20/20 using Snellen Eye Chart. Right eye is blurred, only sees shadow. Will generate consult.

**Utilization Management**

M&R	Interqual	Other	Other Source	Visit Appt	Criteria Met	Rec. # Visits
N	N	N			Pending	
N	N	N			Pending	
N	N	N			Pending	
N	N	N			Pending	

**Notes      UM Review #      Reviewer Name      Reviewer Date**

**CONSULTATION**

**SITE: NBCI**

**COMPLETED BY: Asresahegn Getachew, RMD 08/05/2022 4:46 PM**

**Medications**

Medications (active prior to today)

Medication Name	Sig Description	Start Date	Stop Date	Refilled	Rx Elsewhere
Biktarvy 50 mg-200 mg-25 mg tablet	take 1 tablet by oral route every day	05/11/2022	09/07/2022		N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	11/21/2022	07/25/2022	N
Lipitor 10 mg tablet	take one by mouth at bedtime	07/25/2022	11/21/2022	07/25/2022	N
Zyrtec 10 mg tablet	take one by mouth every morning	07/25/2022	08/05/2022	07/25/2022	N

Provider: Asresahegn Getachew, MD

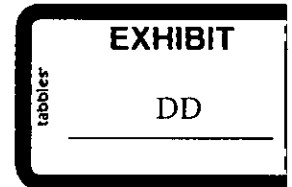
Document generated by: Asresahegn Getachew, RMD 08/05/2022 04:50 PM

*Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.*



8/10/22

Prisoner Rights Information System of Maryland, Inc.  
PO Box 929  
Chestertown, Maryland 21620



Dear Prisoner Rights Information System of Maryland, Inc.,

Thank you for the inquiries regarding patient David Rose, DOC# 295681. Currently, he is at North Branch Correctional Institution (NCBI) in Cumberland, MD. After a review of your correspondence, we have found the summary to be incorrect. Please see below response:

Mr. Rose has a history of traumatic cataract and was noted to be experiencing blindness and extreme pain in his right eye stemming from complications from cataract removal surgery in 2011.

A consult was received by the onsite ophthalmology provider for the patient to be evaluated for surgical repair with sutured intraocular lens for the right eye. This was approved and the patient was seen at the Wilmer eye clinic on October 4, 2021. He was diagnosed with a dislocated intraocular lens and recommended he undergo surgery to remove the dislocated lens, to receive a pars plana vitrectomy, and to suture a replacement lens. This surgery requires up to date evaluations to ensure the proper treatment is provided. The consult was approved and per the notes in the scheduling system, the patient was scheduled by Wilmer clinic for May 2022 despite the consult having been approved in October 2021. Of note, there was another consult entered into CAREs on October 29<sup>th</sup> 2021 for the patient to be evaluated prior to surgery and this was approved as well.

Notes indicate that the patient was scheduled for a retina specialist evaluation on 05/02/2022 at the Wilmer clinic with recommendations to have eye dilation completed prior to surgery.

On May 18 2022, a consult for GES retina evaluation was placed and this consult was given an alternative treatment plan which noted that the retina evaluation procedure could be completed by the onsite ophthalmologist. The actual surgery for the IOL was not denied and as noted earlier, the surgery was already approved. The case was discussed with the site team during a case review and the site team was asked to reach out to the provider at the Wilmer clinic to see if this procedure could be completed by a YesCare onsite ophthalmologist or if the procedure could be completed on the same day as the surgery. Per the site provider, the provider at the Wilmer clinic stated that the preference is that the procedure is completed on a different date. The site provider subsequently submitted a new consult and this was approved and the procedure was scheduled for August 3<sup>rd</sup> at 2pm. The patient is currently pending a surgery date from the Wilmer clinic. Please note that the delays in this patient's care were not caused by the YesCare team as the surgery was approved since October 2021 however the patient was not given an evaluation date until over 7 months later.

If PRISM's medical consultant, Cornealius Stamp, M.D., has any further questions about the care that Mr. Rose has received thus far or have additional questions regarding the approval process, I would be happy to schedule a peer to peer conversation to discuss further.

Sincerely,

Solaide Akintade, MD MPH  
UM Medical Director  
YesCare

**FACILITY: Maryland**

**SITE: THRESHOLD**

**COMPLETED BY: Sandra J. Boettinger, UMRN on 08/12/2022**

---

**Patient: DAVID ROSE**

**ID#: 295681**

**DOB:** [REDACTED]

UM ATP 08/12/2022: "ATP: Based on the information provided, medical necessity has not been demonstrated at this time.

Necessity for retinal evaluation prior to surgery is not as surgery is not indicated .

Stable chronic dislocated IOL. BCVA in both eyes is 20/20.

Indications for surgery are glaucoma or uveitis/ retinal detachment.

None is evident.

Consider continued annual exam at site with ophthalmology.

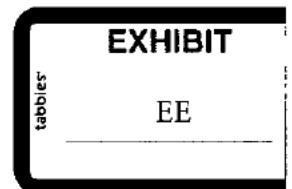
<https://www.eyeworld.org/2022/spontaneous-lens-dislocation/>"

**ATP Submitted to Statewide UMMD for further review.**

**(For UM use only)**

**UM Disposition**

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**NAME: ROSE, DAVID BERNARD.**

**ATTACHED.**



**FACILITY: Maryland**

**SITE: THRESHOLD**

**COMPLETED BY: Sandra J. Boettinger, UMRN on 08/12/2022**

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**Patient: DAVID ROSE**

**ID#: 295681**

**DOB:** [REDACTED]

**UM Approval 08/12/2022: Approved for GES retinal evaluation.**

**(For UM use only)**

**UM Disposition**

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**EXHIBIT**

**FF**

tabbles

**NAME: ROSE, DAVID BERNARD.**

**NUMBER:**



Department of Public Safety and Correctional Services  
 Ophthalmology Visit

Inmate's Last, First Name: ROSE DAVID SID/DOCH: 295681 Facility: MBCI  
 Referring Dr: \_\_\_\_\_ PCP: \_\_\_\_\_  
 Initial Consultation  Follow-Up

Chief Complaint:

HPI: 47 yrs old fin subluxed 3-4x a day  
seen @ Wilmer eye 3 times  
has plans to see a retina specialist  
helps 2 per cent

Ocular Mods: old gls OD atropine daily OD wears eye patch  
 Systemic Mods: Zyrtec / Lipitor

Allergies: NKDA  
 VSC: 20 25 W: \_\_\_\_\_ A: \_\_\_\_\_ Oriented x3: Y N  
 VCC: \_\_\_\_\_ M: \_\_\_\_\_ Rx: \_\_\_\_\_  
 TA: 15 Time: 9:38 AM  
12

Physical Exam:

	NL	AB	Description of Abnormalities
Confrontation of VF			
Motility			
External & Adnexa			<u>20/20</u>
Pupils	<u>/</u>		
Conjunctiva	<u>/</u>		
Cornea	<u>/</u>		
Anterior Chamber	<u>/</u>		<u>clear</u>
Iris	<u>/</u>		
Lens	<u>/</u>		<u>fully subluxed IOL OD</u>
Fundus: Dilated			
1% Myd	<u>/</u>		<u>0.5/0.2</u>
2% Neo	<u>/</u>		
Tech: <u>CZ</u>	<u>/</u>		
Disc	<u>/</u>		
Vessels	<u>/</u>		
Macula	<u>/</u>		
Periphery	<u>/</u>		
Vitreous	<u>/</u>		

IMPRESSION/PLAN:

Subluxed IOL OD - plans for surgery / likely subluxed IOL OD  
ASC to Wilmer

Anker Gnd  BSA/ATC/CP Control  Surgery R/S/A Discussed  Discussed signs/symptoms retina tear and detachment detail  
 Return: 3 days / weeks / mos / years / PRN Signature: \_\_\_\_\_ Date: 8/12/22  
 DPSCS Form OTS 130-130-2



DAVIDS ROSE # 275-681  
# 1447184

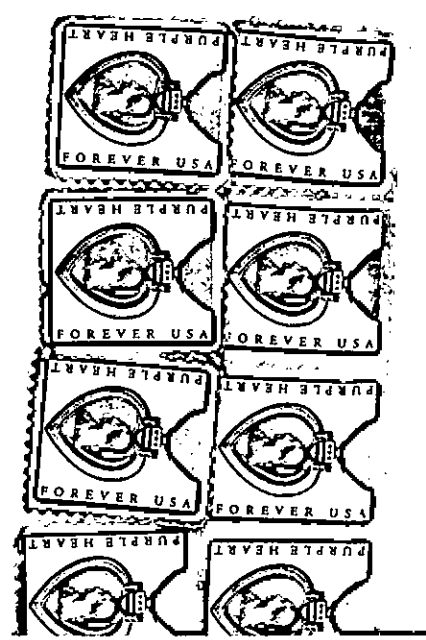
NBCI

14182 McMillen Hwy S.W.

Gumbarland, Maryland

21502

FILED  
AUG 25 2022  
CLERK OF DISTRICT COURT  
BALTIMORE, MARYLAND



Clerk of Court

U.S. District Court

101 W. Lombard Street

Baltimore, Maryland

21201

OUTGOING  
NBCI Inmate Mail

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION

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In re:	:	
	:	
	:	Case No. 23-90086
TEHUM CARE SERVICES, INC.,	:	(Chapter 11)
	:	
Debtor.	:	

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**ORDER GRANTING MOTION BY CREDITOR DAVID ROSE FOR LEAVE  
TO FILE UNTIMELY PROOF OF CLAIM**

Upon consideration of the Motion by Creditor David Rose for Leave to File Untimely Proof of Claim (the “Motion”), any response thereto, and for good cause shown, it is on this \_\_\_\_ day of \_\_\_\_\_, 2024, hereby

ORDERED, that the Motion is GRANTED; and it is further

ORDERED, that Creditor’s Proof Claim attached to the Motion as **Exhibit A** is deemed filed as of August 14, 2023.

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Christopher M. Lopez  
United States Bankruptcy Judge