

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA

UNITED STATES OF AMERICA,

v.

CHRISTOPHER WORRELL,

Defendant.

Case No. 1:21-cr-292-RCL

ORDER

The Clerk of the Court shall place into the record redacted versions of the following documents on which the Court relied for its Order of Contempt [106]:

1. A September 20, 2021, Unity Health Care Consultation Request transmitted from Department of Corrections (“DOC”) to U.S. Marshals Service (“USMS”).
2. An email exchange between DOC and USMS occurring between September 17, 2021 and September 24, 2021.
3. DOC Attorney Advisor Michelle K. Wilson’s email response to USMS on October 8, 2021, upon receipt of the Court’s Order to transmit required information to USMS.
4. An email from the USMS Medical Management Branch with a timeline concerning communications between DOC and USMS regarding the need for Worrell’s hand surgery.
5. A October 14, 2021, Unity Health Care Consultation Request transmitted from DOC to USMS.
6. An Electronic Medical Submission form submitted by the DOC to the USMS on October 14, 2021.

IT IS SO ORDERED.

Date: _____

10/15/21



Royce C. Lamberth
United States District Judge

CTF

Unity Health Care Consultation Request	
Referring Provider Signature [Redacted]	Date 9/20/21
Referring Provider Name [Redacted]	pager/phone #
<i>(Stamp or print clinic name, address, telephone # and fax below.)</i>	

PATIENT NAME (LAST, FIRST) Warrell, Christopher	
<input type="checkbox"/> MEDICAID <input type="checkbox"/> MEDICARE OTHER _____	ID NUMBER 397183
DATE OF BIRTH [Redacted]	SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ADDRESS (STREET, CITY, APT)	
STATE, ZIP	PHONE
SOCIAL SECURITY #	MEDICAL RECORD #

SPECIALIST NAME Halt M.D.	AUTHORIZATION #	NUMBER OF VISITS AUTHORIZED <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> _____
SPECIALIST ADDRESS		PHONE
DIAGNOSIS 1. @ Finger 5th metacarpal neck 2. Fracture ICD 815.09	<input type="checkbox"/> INITIAL CONSULTATION	<input checked="" type="checkbox"/> FOLLOW-UP EVALUATION
REASON FOR REFERRAL So you p. re @ 5th metacarpal fx in 05/2021. Initially referred and recommended for surgery. Still awaiting date for surgery. pls consider.	APPOINTMENT DATE	APPOINTMENT TIME AM / PM
CONSULTANT'S REPORT		
CONSULTANT SIGNATURE ▶	PROVIDER #	DATE
FOR OFFICE USE ONLY <input type="checkbox"/> Mail Referral to Pt. <input type="checkbox"/> Call Pt. to Pick Up Referral <input type="checkbox"/> Fax Referral to Consultant <input type="checkbox"/> Pt. Waiting _____ <input type="checkbox"/> Patient Will Pick Up Referral on (date) Other:		

Amund
9/30/21
9/20/21

NOTE: Consultant, please mail all correspondence/findings to the address listed above for the Health Center. Thank You!

Central Detention Facility

1901 D Street, SE Washington, DC 20003
Fax:

September 20, 2021

Page 1
Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

09/10/2021 - Chronic Care Clinic: f/u cutaneous lymphoma

Provider: Margaret Crenshaw - MD

Location of Care: Correctional Treatment Facility

Chronic Care

Current Medications: METOPROLOL TARTRATE 25 MG ORAL TABLET (METOPROLOL TARTRATE)

Take 1 tab P.o bid.

ACETAMINOPHEN 500 MG ORAL TABLET (ACETAMINOPHEN) Take 2 tabs po BID as needed for pain;

Route: ORAL

HPI

Current Problems:

EPIDERMOID CYST (ICD-706.2) (ICD10-L72.0)

URINARY HESITANCY (ICD-788.64) (ICD10-R39.11)

LOWER BACK PAIN (ICD-724.2) (ICD10-M54.5)

PREDIABETES (ICD-790.29) (ICD10-R73.03)

FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE (ICD-204.80) (ICD10-C85.10)

SQUAMOUS CELL CARCINOMA OF THE HEAD, NECK AND BASE OF TONGUE, 2007 (ICD-199.1)
(ICD10-C80.1)

HX OF COVID-19 (ICD10-U07.1)

HYPERTENSION (ICD-401.9) (ICD10-I10)

Current Medications:

METOPROLOL TARTRATE 25 MG ORAL TABLET (METOPROLOL TARTRATE) Take 1 tab P.o bid.

ACETAMINOPHEN 500 MG ORAL TABLET (ACETAMINOPHEN) Take 2 tabs po BID as needed for pain;
Route: ORAL

Current Allergies:

* PERCOCET: HIVES (Critical)

#. Primary cutaneous follicular b cell lymphoma

-recurrent, with lesions now on face, neck, and upper chest

-following with HUH oncology with recommendation for: repeat skin bx, bone marrow bx and PET/CT for interim staging

---skin bx completed, awaiting pathology

-pt took down dressing as recommended yesterday, sutures still in place (due for removal next week)

---bone marrow biopsy was completed 6/2021 and is WNL

---PET/CT scans done 6/2021 and significant for new "mildly active" submandibular and cervical lymphnodes c/f possible lymphomatous/tumor involvement

---given PET findings, seen by ENT with rec for US-guided FNA with interventional radiology which was scheduled completed, pathology pending

-pt reports no changes today other than continued persistent itching which did not improve with prev trial of antihistamine

[--additional history--]

-initially dx 2007 and tx w rituximab with subsequent recurrence and repeat tx w rituximab c/b

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

development of an allergic vs infusion reaction

-recurrence dx again in 2019 with recommendation from onc at that time for repeat chemotherapy which the patient declined

-opted instead for treatment with an alternative medicine provider who prescribed topical rapamycin and naltrexone

-this regimen has not been continued as it is not evidence based and pt was instead referred to HUH oncology as above

#. hepatitis testing

-pt requesting screening for hepatitis

-states he is concerned he was exposed to hep A

-is currently asymptomatic

-denies nausea, vomiting, diarrhea, abd pain, fever

#. HTN, h/o tachycardia

-on metoprolol reported h/o HTN and tachycardia

-BP and HR have been consistently WNL

-today, pt states he is only taking metoprolol once a day because he is worried about low blood pressure

-is asymptomatic --denies SOB, DOE, dizziness, and fatigue

#. L shoulder pain

-working with PT

#. R 5th metacarpal neck fracture

-seen by Dr. Wilson (ortho hand) and rec'd for surgical repair

-awaiting OR date

ROS: Denies fever, chills, CP, SOB, DOE, nausea, vomiting, diarrhea, and joint pain

Vital Signs

Height: 75 in.

Weight: 263 lbs.

BMI: 32.99

Temperature: 97.5 degrees F

Temp Site: Tympanic

Respirations: 16

Pulse Rate: 80

Rhythm: Regular

Blood Pressure: 119/84 mm Hg

(mm Hg)

Pulse Ox: 99%

Physical Exam

General Appearance

Comfortable, NAD

Respiratory

Central Detention Facility

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Fax:

September 20, 2021

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

Effort: Normal

Musculoskeletal

Gait & Station: Normal

Mental Status and Exam

Mood & Affect: Normal

Assessment and Plan

Assessment/Plan:

FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE - Unchanged.

-skin and lymph node biopsies have now been completed

-awaiting pathology

-onc f/u pending

SCREENING FOR HEPATITIS.

-pt c/f hep A exposure, asymptomatic

-will screen as below with plan for vaccine if non-immune given high -risk

-HCV negative on intake

Orders: Hep A Ab, Total; HBsAg Screen; Anti-HBs; Hep A Ab, IgM

HYPERTENSION.

-BP has been well-controlled and occ low, asymptomatic

-unclear indication for metoprolol

-will d/c and re-eval at next visit

Risks, benefits, and alternatives to treatment plan discussed.

Follow-up: for suture removal in 1 weeks.

Problems reviewed today.

Medications reviewed today.

Allergies reviewed today.

Directives reviewed today.

New Orders: Hep A Ab, Total [006726]

HBsAg Screen [006510]

Anti-HBs [006395]

CBC With Diff [005009]

Hep A Ab, IgM [006734]

Process Orders

Check Orders Results:

LabCorp: ABN not required for this insurance.

Tests Sent for requisitioning (September 10, 2021 9:19 AM):

09/10/2021: LabCorp -- Hep A Ab, Total [006726] (signed)

09/10/2021: LabCorp -- HBsAg Screen [006510] (signed)

09/10/2021: LabCorp -- Anti-HBs [006395] (signed)

09/10/2021: LabCorp -- CBC With Diff [005009] (signed)

09/10/2021: LabCorp -- Hep A Ab, IgM [006734] (signed)

Central Detention Facility

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Fax:

September 20, 2021

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

Electronically Signed by Margaret Crenshaw - MD on 09/10/2021 at 2:47 PM

Central Detention Facility

1901 D Street, SE Washington, DC 20003

Fax:

September 20, 2021

Page 1

Urgent Care

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

06/10/2021 - Urgent Care: Patient Return Ortho (Wilson)

Provider: Charles Sarbeng - DNP

Location of Care: Correctional Treatment Facility

Patient Return

Hospital: HUH

Return Type: Outside Consultation

Comments: patient returned from HUH ortho with Dr Wilson. Report

Diagnosis: right small finger metacarpal diaphyseal fracture sustained 21/2 weeks ago.

Recommended surgical fixation. Obtain pre-op labs, cbc, bmp, covid test, urine drug screen, ekg, cxt, call orthopedic clinic at (202)-865-1183 for any question.

referral generated

labs ordered

covid screening, EKG and CXR pending surgery date

Process Orders

Check Orders Results:

LabCorp: ABN not required for this insurance.

Tests Sent for requisitioning (June 10, 2021 1:54 PM):

06/10/2021: LabCorp -- CBC With Diff [005009] (signed)

06/10/2021: LabCorp -- Basic Metab Panel [322758] (signed)

Electronically Signed by Charles Sarbeng - DNP on 06/11/2021 at 9:30 AM

Howard University Hospital

WORRELL, CHRISTOPHER		MRN 1337101	Gender M	DOB [REDACTED]		
Phone [REDACTED]	SSN [REDACTED]	Account # [REDACTED]	Patient Class [REDACTED]	Attending 999979 EDHUH PHYSICIAN	Admitted [REDACTED]	Discharged [REDACTED]

Admitting: Primary Care

Referring: Consulting:

Problems

Date	Code	Description	Type
No Records to Display			

Report Information		HAND, RIGHT, COMPLETE (Radiology)	Status:	Final
Report ID:	c5988ef0-234e-e87e-b77d-767b39d0f5eb	Ordered By:	904292 MICHEAL TESFAZION	Ordered/Requested On:
Result Report/Status Change:	2021-05-16	Ordered by Physician ID:		Body Site:
Collected On:		Priority:		Specimen Source:
Copy To:		Received On:		Interpreter:
Observed On:	2021-05-16			

Narrative

EXAMINATION: HAND, RIGHT, COMPLETE
EXAM DATE: May 16 2021
CPT: 73130

Clinical History: FALL,,

Study: WRIST, RT COMPLETE, 3 views and right hand, 3 views.

FINDINGS: Right hand, 3 views.

There is displaced transverse fracture of the fifth metacarpal bone distal waist region with angulation. There is evidence of old trauma of the fourth metacarpal bone with foreshortening. There are focal intramedullary lucencies through the shaft of the fourth metacarpal bone. This is compatible with prior screw and plate placements. There is diffuse soft tissue swelling of the thenar region. The joint spaces are intact. No foreign body is identified.

Impression: There is displaced transverse fracture of the distal waist of the region of the fifth metacarpal bone.

Evidence of prior fracture with foreshortening of the fourth metacarpal bone.

Signed by: Estelle Cooke-Sampson, M.D. Signed Date 5/17/2021 1:01 AM

Unrestricted

READING MD: ESTELLE COOKE-SAMPSON MD
REVIEWING MD: ESTELLE COOKE-SAMPSON MD
REVIEWED/SIGNED ON: May 17 2021 1:01A
TRANSCRIBED BY: May 17 2021 1:01A

Howard University Hospital

WORRELL, CHRISTOPHER	MRN 1337101	Gender M	DOB [REDACTED]
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Phone [REDACTED]	SSN [REDACTED]	Account # [REDACTED]	Patient Class [REDACTED]	Attending 999979 EDRUH PHYSICIAN	Admitted [REDACTED]	Discharged [REDACTED]
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Admitting:

Primary Care:

Referring:

Consulting:

Problems

Date	Code	Description	Type
No Records to Display			

Report Information

HAND, RIGHT, COMPLETE (Radiology)		Status	Final
Report ID:	c2e1af8e-748a-0105-736c-7396da82977b	Ordered By:	904292 MICHEAL TESFAZION
Result Report/Status Change:	2021-05-17	Ordered by Physician ID	Body Site:
Collected On:		Priority:	Specimen Source:
Copy To:		Received On:	Interpreter:
Observed On:	2021-05-17		

Narrative

EXAMINATION: HAND, RIGHT, COMPLETE
EXAM DATE: May 17 2021
CPT: 73130

Clinical History: Post reduction.

Technique: Frontal, oblique and lateral views of the right hand were submitted for evaluation utilizing a portable technique.

Findings: A partial cast has been placed to stabilize a previously described acute angulated fracture through the distal shaft of the fifth metacarpal bone (see prior report dated 5/16/2021). There is minimal to no change in the appearance of the fracture fragments. Please correlate clinically.

Impression: As above.

Signed by: Bonnie Davis, M.D. Signed Date 5/17/2021 5:23 PM

Unrestricted

READING MD: BONNIE DAVIS MD
REVIEWING MD: BONNIE DAVIS MD
REVIEWED/SIGNED ON: May 17 2021 5:23P
TRANSCRIBED BY: May 17 2021 5:23P

Howard University Hospital

WORRELL, CHRISTOPHER		MRN 1337101	Gender M	DOB [REDACTED]		
Phone [REDACTED]	SSN	Account #	Patient Class	Attending 999979 EDHUH PHYSICIAN	Admitted	Discharged

Admitting: Primary Care:
Referring: Consulting:

Problems

Date	Code	Description	Type
No Records to Display			

Report Information		WRIST, RT COMPLETE (Radiology)	Status	Final
Report ID:	a0a5aff1-bbca-317f-1832-390e4f928361	Ordered By:	904292 MICHEAL TESFAZION	Ordered/Requested On:
Result Report/Status Change:	2021-05-16	Ordered by Physician ID:		Body Site:
Collected On:		Priority:		Specimen Source:
Copy To:		Received On:		Interpreter:
Observed On:	2021-05-16			

Narrative

EXAMINATION: WRIST, RT COMPLETE
EXAM DATE: May 16 2021
CPT: 73110

Clinical History: FALL,,

Study: WRIST, RT COMPLETE, 3 views and right hand, 3 views.

FINDINGS: Right hand, 3 views.

There is displaced transverse fracture of the fifth metacarpal bone distal wrist region with angulation. There is evidence of old trauma of the fourth metacarpal bone with foreshortening. There are focal intramedullary lucencies through the shaft of the fourth metacarpal bone. This is compatible with prior screw and plate placements. There is diffuse soft tissue swelling of the thenar region. The joint spaces are intact. No foreign body is identified.

Impression: There is displaced transverse fracture of the distal wrist of the region of the fifth metacarpal bone.

Evidence of prior fracture with foreshortening of the fourth metacarpal bone.

Signed by: Estelle Cooke-Sampson, M.D. Signed Date 5/17/2021 1:01 AM

Unrestricted

READING MD: ESTELLE COOKE-SAMPSON MD
REVIEWING MD: ESTELLE COOKE-SAMPSON MD
REVIEWED/SIGNED ON: May 17 2021 1:01A
TRANSCRIBED BY: May 17 2021 1:01A

Central Detention Facility

1901 D Street, SE Washington, DC 20003

Fax:

September 20, 2021

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Urgent Care

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

05/17/2021 - Urgent Care: Patient Return: HUH ER

Provider: Cheikhna Aidara - PA

Location of Care: Correctional Treatment Facility

Vital Signs

Height: 75 in.

Temperature: 97.8 degrees F

Temp Site: Oral

Respirations: 20

Pulse Rate: 77

Rhythm: Regular

Blood Pressure: 116/87 mm Hg

(mm Hg)

Pulse Ox: 96%

Patient Return

Hospital: HUH

Return Type: Emergency Department

Medications: None

Records Received: Yes

Comments: Consult sheet with recommendations received.

Referrals Written: Yes

Comments: Follow up with Dr Wilson in a week.

Follow-Up: Chronic Care Clinic, Outside Clinic

Scheduled: Yes

Comments: Patient recommended to follow up in two days with Ortopedic Dr Wilson.

Electronically Signed by Cheikhna Aidara - PA on 05/17/2021 at 5:11 AM

Thanks.

Lamont J. Ruffin
United States Marshal (A)
District for the District of Columbia - (D/DC)
[REDACTED]

Sent from mobile - pardon any typos

NOTICE: This email (including any attachments) is intended for the use of the individual or entity to which it is addressed. It may contain information that is privileged, confidential, or otherwise protected by applicable law. If you are not the intended recipient (or the recipient's agent), you are hereby notified that any dissemination, distribution, copying, or use of this email or its contents is strictly prohibited. If you received this email in error, please notify the sender immediately and destroy all copies.

On Sep 24, 2021, at 4:49 PM, [REDACTED] (USMS) [REDACTED]@usms.doj.gov> wrote:

Good Afternoon,

I have just spoken to Michelle Wilson (OGC) via phone and she has confirmed that defendant Christopher Worrell (USMS# 34356-509) refused to have surgery. Please see below response I received earlier this week from Michelle.

From: [REDACTED] (USMS) [REDACTED]@usms.doj.gov>
Sent: Tuesday, September 21, 2021 4:06 PM
To: Ruffin, Lamont (USMS) [REDACTED]@usms.doj.gov>
Cc: [REDACTED] (USMS) [REDACTED]@usms.doj.gov>
Subject: FW: Christopher Worrell (USMS# 34356-509)

FYI

From: Wilson, Michelle (DOC) [REDACTED]@dc.gov>
Sent: Tuesday, September 21, 2021 3:51 PM
To: [REDACTED] (USMS) [REDACTED]@usms.doj.gov>
Cc: [REDACTED]@unityhealthcare.org>; [REDACTED]@unityhealthcare.org>; [REDACTED]@unityhealthcare.org>; [REDACTED]@usms.doj.gov>; [REDACTED] (USMS) [REDACTED]@usms.doj.gov>; [REDACTED] (USMS) [REDACTED]@usms.doj.gov>
Subject: [EXTERNAL] Re: Christopher Worrell (USMS# 34356-509)

Good afternoon,

I am away from my computer right now and cannot search back that far on my phone. There have been so many emails and exchange of medical records for Mr. Worrell that I cannot be sure as to what was discussed or disclosed with a search.

As for the refusal, he refused care by HUH and therefore was not scheduled for surgery.

Michelle K. Wilson
 Attorney Advisor
 District of Columbia Department of Corrections

Please excuse any errors, this message was sent from my iPhone.

On Sep 21, 2021, at 3:19 PM, [REDACTED] (USMS) [REDACTED] <[\[REDACTED\]@usdoj.gov](mailto:[REDACTED]@usdoj.gov)> wrote:

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Good Afternoon Michelle,

Per Marshal Ruffin, was USMS ever notified of inmate Christopher Worrell's (DCDC# 377183) injury? Also, when you stated that Mr. Worrell "refused care from HUH" is this a follow-up visit or did inmate Worrell refuse surgery? Just so that I am clear, before I relay this information to the courts (Judge Lamberth?

From: Wilson, Michelle (DOC) [REDACTED] <[\[REDACTED\]@dc.gov](mailto:[REDACTED]@dc.gov)>
Sent: Monday, September 20, 2021 9:56 AM
To: [REDACTED] (USMS) [REDACTED] <[\[REDACTED\]@usms.doj.gov](mailto:[REDACTED]@usms.doj.gov)>; [REDACTED] <[\[REDACTED\]@UnityHealthCare.org](mailto:[REDACTED]@UnityHealthCare.org)>; [REDACTED] <[\[REDACTED\]@UnityHealthCare.org](mailto:[REDACTED]@UnityHealthCare.org)>; [REDACTED] <[\[REDACTED\]@UnityHealthCare.org](mailto:[REDACTED]@UnityHealthCare.org)>
Cc: [REDACTED] (USMS) [REDACTED] <[\[REDACTED\]@usms.doj.gov](mailto:[REDACTED]@usms.doj.gov)>; [REDACTED] (USMS) <[\[REDACTED\]@usms.doj.gov](mailto:[REDACTED]@usms.doj.gov)>; [REDACTED] (USMS) <[\[REDACTED\]@usms.doj.gov](mailto:[REDACTED]@usms.doj.gov)>; [REDACTED] >
Subject: [EXTERNAL] RE: Christopher Worrell (USMS# 34356-509)

Good morning,

To follow up on last week's email: Mr Worrell refused care from HUH ortho and was initially *not scheduled for a recommended surgery because of his recalcitrance*. He is still being seen and has follow-up with ortho.

Please let me know if you have additional questions.

Michelle K. Wilson

Attorney Advisor
D.C. Department of Corrections
Office of the General Counsel
2000 14th Street, N.W., 7th Floor
Washington, D.C. 20009

[Redacted]
[Redacted]
[Redacted]
[Redacted]@dc.gov
www.doc.dc.gov
<image001.png>

From: Wilson, Michelle (DOC)
Sent: Friday, September 17, 2021 3:33 PM
To: [Redacted] (USMS) [Redacted]@usdoj.gov>; [Redacted]
[Redacted]@UnityHealthCare.org>; [Redacted]@UnityHealthCare.org>;
[Redacted]@UnityHealthCare.org>
Cc: [Redacted] (USMS) [Redacted]@usdoj.gov>; [Redacted]
(USMS) [Redacted]@usdoj.gov>; [Redacted] (USMS)
[Redacted]@usdoj.gov>
Subject: RE: Christopher Worrell (USMS# 34356-509)

Good afternoon,

Per your request please see the attached medical records for Mr. Worrell. Code 2700

Please note that Mr. Worrell had physical therapy on the arm/shoulder area as recently as 9/15/2021. I will provide further details from the medical unit once it I have received it.

Have a good weekend.

Michelle K. Wilson
Attorney Advisor
D.C. Department of Corrections
Office of the General Counsel
2000 14th Street, N.W., 7th Floor
Washington, D.C. 20009

[Redacted]
[Redacted]
[Redacted]@dc.gov
www.doc.dc.gov
<image001.png>

From: [Redacted] (USMS) [Redacted]@usdoj.gov>
Sent: Friday, September 17, 2021 2:24 PM

To: [REDACTED] (DOC) [REDACTED] [@dc.gov](mailto:[REDACTED]@dc.gov); [REDACTED] [@UnityHealthCare.org](mailto:[REDACTED]@UnityHealthCare.org); [REDACTED] [@UnityHealthCare.org](mailto:[REDACTED]@UnityHealthCare.org); [REDACTED] [@UnityHealthCare.org](mailto:[REDACTED]@UnityHealthCare.org)>

Cc: [REDACTED] (USMS) [REDACTED] [@usdoj.gov](mailto:[REDACTED]@usdoj.gov); [REDACTED] (USMS) [REDACTED] [@usdoj.gov](mailto:[REDACTED]@usdoj.gov); [REDACTED] (USMS) [REDACTED] [@usdoj.gov](mailto:[REDACTED]@usdoj.gov)>

Subject: FW: Christopher Worrell (USMS# 34356-509)

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Good Afternoon Michelle & DC Jail medical staff,

Can someone please provide medical documentation or further information in regards to inmate Christopher Worrell (DCDC# 377183) medical status? Approximately 83 days ago defendant Worrell broke his wrist while housed at DC Jail. Our office is inquiring whether inmate Worrell received medical treatment for his broken wrist and when was treatment rendered?

From: [REDACTED] (USMS)
Sent: Friday, September 17, 2021 1:32 PM
To: [REDACTED] (USMS) [REDACTED] [@usms.doj.gov](mailto:[REDACTED]@usms.doj.gov)>
Subject: Christopher Worrell (USMS# 34356-509)

Good Afternoon,

I just received a call from the Marshal inquiring as to defendant Christopher Worrell (DCDC# 377183) medical status. Approximately 83 days ago defendant Worrell broke his wrist while housed at DC Jail-CTF. Judge Lamberth plans on filing an order today. Do you know if this defendant ever received medical care and when was his wrist treated?

Thank you in advance,

[REDACTED]
*Deputy U.S. Marshal
Criminal Investigator
District of Columbia, District Court*

[REDACTED]
[REDACTED] [@usdoj.gov](mailto:[REDACTED]@usdoj.gov)

From: "Wilson, Michelle (DOC)" [REDACTED]@dc.gov>
Date: October 8, 2021 at 3:45:01 PM EDT
To: "[REDACTED] (USMS)" [REDACTED]@usms.doj.gov>, "Glover, Eric (DOC)" [REDACTED]@dc.gov>
Cc: "Booth, Quincy (DOC)" [REDACTED]@dc.gov>
Subject: [EXTERNAL] RE: Order in USA v. Worrell

Good afternoon Marshal [REDACTED],

Please be advised that I spoke with the medical team. Resident Worrell is scheduled for a re-evaluation by the hospital surgeon next week on October 14, 2021. DOCs medical team has requested from the surgeon's office that Mr. Worrell return to the facility with the appropriate medical note. DOC will provide the documentation following Mr. Worrell's return from the medical appointment.

Michelle K. Wilson
Attorney Advisor
D.C. Department of Corrections
Office of the General Counsel
2000 14th Street, N.W., 7th Floor
Washington, D.C. 20009

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]@dc.gov

www.doc.dc.gov

<image001.png>

From: [REDACTED] (USMS) [REDACTED]@usdoj.gov>
Sent: Friday, October 8, 2021 3:12 PM
To: Wilson, Michelle (DOC) [REDACTED]@dc.gov>; Glover, Eric (DOC) [REDACTED]@dc.gov>
Cc: Booth, Quincy (DOC) [REDACTED]@dc.gov>
Subject: RE: Order in USA v. Worrell

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See attached order.

From: [REDACTED] (USMS)
Sent: Friday, October 8, 2021 3:05 PM

To: Wilson, Michelle (DOC) [REDACTED]@dc.gov>; Glover, Eric (DOC) [REDACTED]@dc.gov>

Subject: FW: Order in USA v. Worrell

Good afternoon Michelle,

Please see the attached order pertaining to inmate Worrell.

R/

[REDACTED], MBA
Supervisory Deputy U.S. Marshal
District of Columbia - District Court

[REDACTED]
[REDACTED]@usdoj.gov

From: [REDACTED] (USMS) [REDACTED]@usms.doj.gov>
Sent: Tuesday, October 12, 2021 4:56 PM
To: Ruffin, Lamont (USMS) [REDACTED]@usms.doj.gov>; [REDACTED] (USMS) [REDACTED]@usms.doj.gov>
Subject: RE: [EXTERNAL] RE: Order in USA v. Worrell

Good Afternoon All,

Here is the MMB timeline on Mr. Worrell's case:

5/25/21 – Medical submission was received for an orthopedic follow-up after ER discharge for fracture of 5th metacarpal bone of right hand. Approved by MMB with instruction: If further testing, treatment, or surgery is required, please enter another submission with supporting objective medical documentation/notes, lab results, x-rays, diagrams, proposed treatment plan, etc. for review by MMB prior to care.

9/21/21 – MMB received a medical submission was received for orthopedic surgery stating Mr. Worrell has a right small finger metacarpal diaphyseal fracture sustained 21/2 weeks ago;
recommended surgical fixation.

9/22/21 – MMB returned medical submission back to jail requesting the full ortho (hand specialist) narrative notes for review. What was attached on 9/22/21 did not include Dr. Wilson's notes (see attached).

9/27/21 - PC Supervisor [REDACTED] called me to clarify what is needed. He sent an email to jail medical contact to get the needed additional documentation. He stated will forward documents to MMB once received.

9/29/21 – Sent an email to PC Supervisor [REDACTED] for a status update. He immediately responded that he emailed the request to the jail a second time.

10/5/21 – Sent another email to PC Supervisor [REDACTED] to follow-up on this request. He copied me on an email that he sent back to the jail contacts for a status update.

10/6/21 – Received an email from PC Supervisor [REDACTED] with attached medical documents (see attached). Once reviewed I noticed that it was the same documents already sent without the orthopedic surgery (hand specialist notes). Sent an email back to PC Supervisor Deputy [REDACTED] that I was closing the request since unable to review without supportive documentation.

10/6/21 – Administratively denied medical submission per MMB policy stating the following: This submission was returned with request for additional information a minimum of 14 days ago and an attempt was made to obtain the information directly from the facility. The requested information has not been received by MMB. Therefore, MMB is unable to complete adjudication of this request. If the detention facility wishes to have a medical determination made for this medical request, please submit a new request with the required supporting medical documentation.
Thank you.

10/12/21 – Received an email @ 1231 from PC Supervisor [REDACTED] with attachment of additional medical documents (250 pages) and an email stating, Resident Worrell is scheduled for a re-evaluation by the hospital surgeon next week on October 14, 2021. DOCs medical team has requested from the surgeon's office that Mr. Worrell return to the facility with the appropriate

medical note. DOC will provide the documentation following Mr. Worrell's return from the medical appointment. Due to the copious amount of miscellaneous notes MMB nurse review had not been completed.

10/12/21 – MMB received a medical submission @ 1531 requesting for an ortho surgery follow-up on 10/14/21 for a re-evaluation due to worsening pain. Approved by MMB with instruction: If further testing, treatment, or surgery is required, please enter another submission with supporting objective medical documentation/notes, lab results, x-rays, diagrams, proposed treatment plan, etc. for review by MMB prior to care.

10/12/21 – Received an email @ 1541 from PC Supervisor [REDACTED] that **included the HUH orthopaedics and rehabilitative services note dated 6/10/21 sent from jail that MMB was requesting since 9/22/21.** Specialist stated, has a significant injury though will be treated conservatively with ulnar gutter cast and follow-up in 3-4 weeks for re-evaluation. An addendum was added and signed by Dr. Wilson stating that surgery is indicated and patient wants to have surgery. Scheduling was to be done as soon as possible. Jail medical included an updated note dated 10/7/21 stating that Dr. Wilson wants him to be seen for a re-evaluation and determine next steps.

Respectfully,

[REDACTED], DNP, MPH, RN
CDR, U.S. Public Health Service
Nurse Utilization Review Coordinator
Prisoner Operations Division
Medical Management Branch
United States Marshals Service
Washington, D.C. 20530-1000

[REDACTED]
Nurse Case line: [REDACTED]
[REDACTED]@usdoj.gov

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10/14/21

10/14/21

Unity Health Care Consultation Request

Referring Provider Signature: [Redacted] *10/8/21* Date

Referring Provider Name: [Redacted] MD pager/phone #

Health Orthopedic Clinic

PATIENT NAME (LAST, FIRST) *Warrell, Christopher*

MEDICAID MEDICARE ID NUMBER *377183*

OTHER _____

DATE OF BIRTH [Redacted] SEX MALE FEMALE

ADDRESS (STREET, CITY, APT)

STATE, ZIP PHONE

SOCIAL SECURITY # MEDICAL RECORD #

SPECIALIST NAME *HWH Ormo Wilson* AUTHORIZATION # NUMBER OF VISITS AUTHORIZED 1 2 _____

SPECIALIST ADDRESS PHONE

DIAGNOSIS 1. 5th metacarpal fx INITIAL CONSULTATION FOLLOW-UP EVALUATION

2. APPOINTMENT DATE *10/14/21* APPOINTMENT TIME *12:30* AM (PM)

REASON FOR REFERRAL

SO x10 M C fx of 5th metacarpal, prev recommended for surgical repair but improving pain. Please eval / tx

CONSULTANT'S REPORT

CONSULTANT SIGNATURE PROVIDER # DATE

FOR OFFICE USE ONLY

Mail Referral to Pt. Call Pt. to Pick Up Referral Fax Referral to Consultant Pt. Waiting _____

Patient Will Pick Up Referral on (date) Other: _____

NOTE: Consultant, please mail all correspondence/findings to the address listed above for the Health Center. Thank You!

10/15/21

1901 E Street, SE Washington, DC 20003
Fax:

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Urgent Care

CHRISTOPHER WORRELL

Male DOB: [REDACTED] 377183

Home: 377183

06/10/2021 - Urgent Care: Patient Return Ortho (Wilson)
Provider: Charles Sarbeng - DNP
Location of Care: Correctional Treatment Facility

Patient Return

Hospital: HUH

Return Type: Outside Consultation

Comments: patient returned from HUH ortho with Dr Wilson. Report

Diagnosis: right small finger metacarpal diaphyseal fracture sustained 21/2 weeks ago.

Recommended surgical fixation. Obtain pre-op labs, cbc, bmp, covid test, urine drug screen, ekg, cxt, call orthopedic clinic at [REDACTED] for any question.

referral generated

labs ordered

covid screening, EKG and CXR pending surgery date

Process Orders

Check Orders Results:

LabCorp: ABN not required for this insurance.

Tests Sent for requisitioning (June 10, 2021 1:54 PM):

06/10/2021: LabCorp -- CBC With Diff [005009] (signed)

06/10/2021: LabCorp -- Basic Metab Panel [322758] (signed)

Electronically Signed by Charles Sarbeng - DNP on 06/11/2021 at 9:30 AM

Correctional Treatment Facility

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

06/11/2021 - Chronic Care Clinic: f/u cutaneous lymphoma, hand fx

Provider: Margaret Crenshaw - MD

Location of Care: Correctional Treatment Facility

Chronic Care

Current Medications: METOPROLOL TARTRATE 25 MG ORAL TABLET (METOPROLOL TARTRATE)
Take 1 tab P.o bid.

ASPIRIN 81 MG TAB (ASPIRIN) Take one tab po Qdaily.

ANALGESIC BALM OINT (LINIMENTS OINT) AAA bid prn.x10 dys First dose now; Route: EXTERNAL
CVS DRY EYE RELIEF 0.2-0.2-1 % OPHTHALMIC SOLUTION (GLYCERIN-HYPROMELLOSE-PEG
400) 1-2 gtt in eyes prn; Route: OPHTHALMIC

IBUPROFEN 600 MG ORAL TABLET (IBUPROFEN) Take one tab po TID as needed for pain. take
medication with food to avoid GI upset; Route: ORAL

* HOLD ASPIRIN 6/5, 6/6, 6/7. RESUME AFTER PROCEDURE

LIDOCAINE HCL 2 % EXTERNAL GEL (LIDOCAINE HCL) apply to affected area bid prn for pain; Route:
EXTERNAL

HPI

Current Problems:

DENTAL DISORDER NOS (ICD-525.9) (ICD10-K08.9)

HEADACHE, MIXED (ICD-784.0) (ICD10-G44.89)

PAIN IN LEFT SHOULDER (ICD-719.41) (ICD10-M25.512)

FRACTURE OF FIFTH METACARPAL BONE, RIGHT HAND (ICD-815.09) (ICD10-S62.306A)

EPIDERMOID CYST (ICD-706.2) (ICD10-L72.0)

URINARY HESITANCY (ICD-788.64) (ICD10-R39.11)

LOWER BACK PAIN (ICD-724.2) (ICD10-M54.5)

PREDIABETES (ICD-790.29) (ICD10-R73.03)

FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE (ICD-204.80) (ICD10-C85.10)

SQUAMOUS CELL CARCINOMA OF THE HEAD, NECK AND BASE OF TONGUE, 2007 (ICD-199.1)
(ICD10-C80.1)

HX OF COVID-19 (ICD10-U07.1)

HYPERTENSION (ICD-401.9) (ICD10-I10)

Current Medications:

METOPROLOL TARTRATE 25 MG ORAL TABLET (METOPROLOL TARTRATE) Take 1 tab P.o bid.

ASPIRIN 81 MG TAB (ASPIRIN) Take one tab po Qdaily.

ANALGESIC BALM OINT (LINIMENTS OINT) AAA bid prn.x10 dys First dose now; Route: EXTERNAL
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* HOLD ASPIRIN 6/5, 6/6, 6/7. RESUME AFTER PROCEDURE

LIDOCAINE HCL 2 % EXTERNAL GEL (LIDOCAINE HCL) apply to affected area bid prn for pain; Route:
EXTERNAL

Current Allergies:

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

* PERCOCET: HIVES (Critical)

Other HPI

#. Primary cutaneous follicular b cell lymphoma

-initially diagnosed in 2007 and treated initially with rituximab

-with subsequent recurrence and treatment again with rituximab with development of an allergic vs infusion reaction

-recurrence documented again in 2019 which was the last time the pt had imaging but did not undergo the oncology-recommended treatment at that time but instead was following with an alternative medicine provider who prescribed topical rapamycin and naltrexone

-the patient currently has skin lesions on his face, neck, and upper chest

-the patient was seen by HUH oncology on 5/19/21 to re-establish oncology care

-recommendations were for a repeat skin bx, bone marrow bx and PET/CT for interim staging

-pt completed bone marrow biopsy and PET/CT

-awaiting results which have not been received here yet

-pt reports he is doing well

-bone marrow bx site healing well

-no concerns today

#. SCC of head/neck, base of tongue

-treated with surgery, chemo, and XRT in 2007

-had not had recent surveillance imaging prior to incarceration but no s/s c/f recurrence

#. R 5th metacarpal neck fracture

-seen by Dr. Wilson (ortho hand) this week

-rec'd for surgical repair

#. HTN, h/o tachycardia

-on metoprolol h/o HTN and tachycardia

-BP and HR are both WNL today

#. L shoulder pain

-pt reports new L shoulder pain over the past few weeks

-may have started after fall with R hand fx as above

-describes the pain as "a muscular pain"

-xray was done which showed some mild joint narrowing but no acute process

-was prev referred to PT which is pending

Review of Systems

ROS reviewed. No changes.

Vital Signs

Height: 75 in.

Weight: 253 lbs.

BMI: 31.74

Temperature: 97.5 degrees F

Temp Site: Tympanic

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

Respirations: 16
Pulse Rate: 81
Rhythm: **Regular**
Blood Pressure: **108/73** mm Hg
(mm Hg)
Pulse Ox: 97%

Physical Exam

General Appearance

Comfortable, NAD

Respiratory

Effort: Normal

Musculoskeletal

Gait & Station: Normal

Skin

Inspection: very small healed biopsy site over right sacrum without any drainage, discharge, or erythema

Mental Status and Exam

Mood & Affect: Normal

Assessment and Plan

Hypertension Control: Controlled

Assessment/Plan:

FRACTURE OF FIFTH METACARPAL BONE, RIGHT HAND.

-following with orthopedics and recommended for surgical repair

-working to coordinate OR date and will do requested preop work up including labs, EKG, and CXR

-of note, pt has requested that he NOT be scheduled for any outside medical appointments next week so he has a chance to get the commissary order he has placed for "healthy" foods he feels he does not get on the trays

-reviewed w pt the risks of potentially delaying care, pt accepts these and reiterates his request for no outside visits next week

-will d/w referral coordinator to ensure no visits next week

FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE.

-recurrent disease, following with oncology and awaiting dermatology eval for biopsy

-was rec'd for PET/CT and bone marrow bx which were completed

-unable to review PET and bone marrow biopsy reports until after patient visit

-bone marrow bx reviewed showing normal bone marrow

-PET/CT results reviewed as below

- significant for mildly active R submandibular and left upper cervical lymph nodes, suspicious for lymphomatous/tumor involvement

-no e/o metastatic dz/malignancy w/i chest, abdomen, or pelvis

-no e/o intracranial metastatic disease

-results were NOT reviewed w the patient as they were obtained after his visit, will review w pt at visit next week

-call placed to Dr. Ali's (oncology) office and message left with his MA to determine if lymph node bx should be pursued prior to onc follow up

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

-as of this note's signing, had not received a call back
-will f/u with pt in 1 week

SQUAMOUS CELL CARCINOMA OF THE HEAD, NECK AND BASE OF TONGUE, 2007.

-recent PET/CT with no e/o soft tissue recurrence w/i the throat

HYPERTENSION - Unchanged. -BP at goal today

-c/w current regimen

PAIN IN LEFT SHOULDER.

-imaging w/o acute bony process

-PT scheduled

Risks, benefits, and alternatives to treatment plan discussed.

Follow-up: in 1 weeks.

Problems reviewed today.

Medications reviewed today.

Allergies reviewed today.

Directives reviewed today.

Electronically Signed by Margaret Crenshaw - MD on 06/11/2021 at 3:06 PM

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Page 1
Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

06/16/2021 - Chronic Care Clinic: f/u cutaneous lymphoma, hand fx; result review
Provider: Margaret Crenshaw - MD
Location of Care: Correctional Treatment Facility

Chronic Care

Current Medications: METOPROLOL TARTRATE 25 MG ORAL TABLET (METOPROLOL TARTRATE)
Take 1 tab P.o bid.
ASPIRIN 81 MG TAB (ASPIRIN) Take one tab po Qdaily.
ANALGESIC BALM OINT (LINIMENTS OINT) AAA bid prn.x10 dys First dose now; Route: EXTERNAL
CVS DRY EYE RELIEF 0.2-0.2-1 % OPHTHALMIC SOLUTION (GLYCERIN-HYPROMELLOSE-PEG
400) 1-2 gtt in eyes prn; Route: OPHTHALMIC
IBUPROFEN 600 MG ORAL TABLET (IBUPROFEN) Take one tab po TID as needed for pain. take
medication with food to avoid GI upset; Route: ORAL
LIDOCAINE HCL 2 % EXTERNAL GEL (LIDOCAINE HCL) apply to affected area bid prn for pain; Route:
EXTERNAL

HPI

Current Problems:

DENTAL DISORDER NOS (ICD-525.9) (ICD10-K08.9)
PAIN IN LEFT SHOULDER (ICD-719.41) (ICD10-M25.512)
FRACTURE OF FIFTH METACARPAL BONE, RIGHT HAND (ICD-815.09) (ICD10-S62.306A)
EPIDERMOID CYST (ICD-706.2) (ICD10-L72.0)
URINARY HESITANCY (ICD-788.64) (ICD10-R39.11)
LOWER BACK PAIN (ICD-724.2) (ICD10-M54.5)
PREDIABETES (ICD-790.29) (ICD10-R73.03)
FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE (ICD-204.80) (ICD10-C85.10)
SQUAMOUS CELL CARCINOMA OF THE HEAD, NECK AND BASE OF TONGUE, 2007 (ICD-199.1)
(ICD10-C80.1)
HX OF COVID-19 (ICD10-U07.1)
HYPERTENSION (ICD-401.9) (ICD10-I10)

Current Medications:

METOPROLOL TARTRATE 25 MG ORAL TABLET (METOPROLOL TARTRATE) Take 1 tab P.o bid.
ASPIRIN 81 MG TAB (ASPIRIN) Take one tab po Qdaily.
ANALGESIC BALM OINT (LINIMENTS OINT) AAA bid prn.x10 dys First dose now; Route: EXTERNAL
CVS DRY EYE RELIEF 0.2-0.2-1 % OPHTHALMIC SOLUTION (GLYCERIN-HYPROMELLOSE-PEG
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medication with food to avoid GI upset; Route: ORAL
LIDOCAINE HCL 2 % EXTERNAL GEL (LIDOCAINE HCL) apply to affected area bid prn for pain; Route:
EXTERNAL

Current Allergies:

* PERCO CET: HIVES (Critical)

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

Other HPI

- #. Primary cutaneous follicular b cell lymphoma
 - initially diagnosed in 2007 and treated initially with rituximab
 - with subsequent recurrence and treatment again with rituximab with development of an allergic vs infusion reaction
 - recurrence documented again in 2019 which was the last time the pt had imaging but did not undergo the oncology-recommended treatment at that time but instead was following with an alternative medicine provider who prescribed topical rapamycin and naltrexone
 - the patient currently has skin lesions on his face, neck, and upper chest
 - the patient was seen by HUH oncology on 5/19/21 to re-establish oncology care
 - recommendations were for a repeat skin bx, bone marrow bx and PET/CT for interim staging
 - bone marrow biopsy was completed 6/2021 and is WNL
 - PET/CT scans done 6/2021, results reviewed with patient today
 - significant for findings of "mildly active" right submandibular and left upper cervical lymph nodes c/f possible lymphomatous/tumor involvement
 - no e/o metastatic disease or malignancy in the chest, abd, pelvis or intracranially
 - these lymph node findings are apparently new since the pt's last PET scan done in 2019

- #. SCC of head/neck, base of tongue
 - treated with surgery, chemo, and XRT in 2007
 - 6/2021 PET /CT without any c/f recurrence

- #. R 5th metacarpal neck fracture
 - seen by Dr. Wilson (ortho hand) and rec'd for surgical repair
 - awaiting OR

- #. HTN, h/o tachycardia
 - on metoprolol h/o HTN and tachycardia
 - BP and HR WNL today

- #. L shoulder pain
 - not addressed today, awaiting PT

Review of Systems

General: Patient denies chills, fatigue, malaise.

Cardiovascular: Patient denies chest pain.

Respiratory: Patient denies cough.

Vital Signs

Height: 75 in.

Weight: 253 lbs.

BMI: 31.74

Temperature: 97.7 degrees F

Temp Site: Oral

Respirations: 16

Pulse Rate: 70

Rhythm: Regular

Blood Pressure: 103/77 mm Hg

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

(mm Hg)

Pulse Ox: 98%

Physical Exam

General Appearance

Comfortable, NAD

Neck

Neck: no palpably enlarged lymph nodes

Respiratory

Effort: Normal

Musculoskeletal

Gait & Station: Normal

Skin

Inspection: scattered erythematous patches w some induration most noticeable posterior to and below the right earlobe, along the hairline over his left eyebrow, and below his left earlobe

Mental Status and Exam

Mood & Affect: Normal

Assessment and Plan

Hypertension Control: Controlled

Assessment/Plan:

FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE.

- recently re-established care with oncology last month and working on re-staging
- bone marrow biopsy done and WNL
- PET/CT done with new mildly active right submandibular and left upper cervical lymphnodes c/f possible tumor involvement
- after patient visit, case was discussed with Dr. Ali (pt's oncologist at HUH) and he recommended further eval of these lymph nodes by ENT for possible excisional biopsy
- still awaiting skin biopsy with derm
- treatment plan to be determined based on the results of these biopsies
- ENT referral generated, will schedule ASAP; will review plan with pt next visit

SQUAMOUS CELL CARCINOMA OF THE HEAD, NECK AND BASE OF TONGUE, 2007.

-no e/o recurrence in recent scans

FRACTURE OF FIFTH METACARPAL BONE, RIGHT HAND.

-awaiting OR date

HYPERTENSION.

-BP at goal today

-c/w current regimen

Risks, benefits, and alternatives to treatment plan discussed.

Follow-up: 2 days.

Problems reviewed today.

Medications reviewed today.

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

Allergies reviewed today.
Directives reviewed today.

Electronically Signed by Margaret Crenshaw - MD on 06/16/2021 at 2:28 PM

Correctional Treatment Facility

1901 E Street, SE Washington, DC 20003

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Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

10/06/2021 - Chronic Care Clinic: f/u cutaneous lymphoma, L shoulder pain, etc

Provider: Margaret Crenshaw - MD

Location of Care: Correctional Treatment Facility

Chronic Care

Current Medications: ACETAMINOPHEN 500 MG ORAL TABLET (ACETAMINOPHEN) Take 2 tabs po BID as needed for pain; Route: ORAL

HPI

Current Problems:

BACK PAIN (ICD-724.5) (ICD10-M54.9)

RIGHT 5TH METACARPAL NECK FRACTURE (ICD-V54.12) (ICD10-S62.336D)

EPIDERMOID CYST (ICD-706.2) (ICD10-L72.0)

PREDIABETES (ICD-790.29) (ICD10-R73.03)

FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE (ICD-204.80) (ICD10-C85.10)

SQUAMOUS CELL CARCINOMA OF THE HEAD, NECK AND BASE OF TONGUE, 2007 (ICD-199.1) (ICD10-C80.1)

HX OF COVID-19 (ICD10-U07.1)

HYPERTENSION (ICD-401.9) (ICD10-I10)

Current Medications:

ACETAMINOPHEN 500 MG ORAL TABLET (ACETAMINOPHEN) Take 2 tabs po BID as needed for pain; Route: ORAL

Current Allergies:

* PERCOCET: HIVES (Critical)

Other HPI

#. Left shoulder pain

-with a fall in 5/2021

-imaging at the time without any e/o bony pathology

-pain had been stable and pt was referred to PT for management

-he completed three sessions but then at his fourth session c/o increased pain and stated he was not able to tolerate additional PT or modalities

-today he states that the pain is persistent

-it fluctuates and is worse with certain movements

-feels like APAP helps somewhat but pain returns

#. R leg pain

-pt reports that his "sciatica is acting up"

-reports left lower back pain with radiation into the left buttocks and left leg

-pt reports a h/o similar smpyomts but that it hasn't flared up in "years"

-in the past, he was seeing pain management and was on gabpentin for a short time

#. Left lower tooth pain

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Chronic Care Clinic

CHRISTOPHER WORRELL

Home: 377183

Male DOB: [REDACTED] 377183

-reports the tooth is broken and has been increasingly painful
-was prev seen by dental and recommended for an extraction but refused at the time
-now states he would like to return for a re-eval

#. Primary cutaneous follicular b cell lymphoma

-recurrent, with lesions now on face, neck, and upper chest
-only sympom is persistent itching which did not improve with prior trial of antihistamine
-following with HUH oncology with recommednation for: repeat skin bx, bone marrow bx and PET/CT for interim staging --these have all been completed
---skin bx completed, path shows superficial and deep atypical lymphoid infiltrate consistent with B cell lymphoma, c/w recurrence of B cell lymphoma, follicular center cellt ype
---bone marrow biopsy was completed 6/2021 and is WNL
---PET/CT scans done 6/2021 and significant for new "mildly active" submandibular and cervical lymphnodes c/f possible lymphamatous/tumor involvement
---US-guided FNA done of active lyhphnodes, pathology reviewed with no evidence of metastatic cancer
-since our last visit, **pt had a follow up with oncology:**
-recommended for treatment given refractory pruitis with plan for gazyva/bendamustine
-per oncology, would have preferred excisional biopsy of the lymphnodes given h/o lymphoma, pt has been referred back to ENT
-also recommended for eval with rad onc to determine if XRT is indicated in management, referral written

#. HTN, h/o tachycardia

-prev on metoprolol reported h/o HTN and tachycardia
-BP and HR are again WNL off of metoprolol
-pt continues to be asymptomatic

ROS: Denies fever, chills, CP, SOB, DOE, nausea, vomiting, and diarrhea

Vital Signs

Height: **75** in.
Weight: **262** lbs.
BMI: **32.87**
Temperature: **97.2** degrees F
Temp Site: **Oral**
Respirations: **16**
Pulse Rate: **86**
Rhythm: **Regular**
Blood Pressure: **126/87** mm Hg
(mm Hg)
Pulse Ox: 98%

Physical Exam

General Appearance

Comfortable, NAD

Ears/Nose/Throat

Lips/Teeth/Gums: #19 with decay, no palpable fluid collection or abscess, no drainage

Respiratory

Effort: Normal

Musculoskeletal

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Chronic Care Clinic

CHRISTOPHER WORRELL

Home: 377183

Male DOB: [REDACTED] 377183

Gait & Station: Normal

Spine, Ribs, & Pelvis: No spinal TTP. Mild TTP along low back paraspinal muscles on the right

Extremities

LUE: Left shoulder: no deformity or step-offs, no bony TTP. TTP along trap. and supraspinatus with some TTP at lateral and anterior humeral head. Normal strength testing throughout. ROM is limited with vertical active abduction and flexion 2/2 pain. Adduction intact. No pain or issue with internal/external rotation or horizontal abduction/adduction

Skin

Inspection: Normal

Mental Status and Exam

Mood & Affect: Normal

Assessment and Plan

Assessment/Plan:

FOLLICULAR B CELL LYMPHOMA WITH RECURRENCE.

- recommended for treatment with gazyva and bendamustine given symptoms of refractory puritis
- per onc, would also like excisional lymph node biopsy and rad onc consultation (referred)
- will clarify if onc would like these done prior to starting first cycle of chemo

PAIN IN LEFT SHOULDER.

- likely 2/2 rotator cuff tendinopathy without c/f tear on exam and prev xray without e/o bony abnormalities
- was prev referred to PT and completed 3 sessions but was not able to continue due to pain
- may benefit from subacromial glucocorticoid injection and return to PT if pain improves such that he can tolerate
- scheduled for eval for this

BACK PAIN.

- mild back pain with radiation into right leg c/w pt's report of prev diagnosed sciatica
- will start naproxen, precautions reviewed
- encouraged stretching, strengthening as able
- f/u in 2 weeks for re-eval or sooner as needed

HYPERTENSION.

- BP and HR continue to be well controlled off of medication
- will continue to monitor

RIGHT 5TH METACARPAL NECK FRACTURE.

- awaiting OR date

OTHER SPECIFIED DISORDERS OF TEETH AND SUPPORTING STRUCTURES - Unchanged.

- no e/o abscess
 - pt prev rec'd for extraction but refused
 - today states he would like to be re-evaluated by dental, referral provided
- Orders: DENTAL

Risks, benefits, and alternatives to treatment plan discussed.

Follow-up: in 2 weeks.
Problems reviewed today.
Medications reviewed today.

Correctional Treatment Facility
1901 E Street, SE Washington, DC 20003
Fax:

October 12, 2021
Page 4
Chronic Care Clinic

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

Home: 377183

Allergies reviewed today.
Directives reviewed today.
New Orders: DENTAL [DEN]

Electronically Signed by Margaret Crenshaw - MD on 10/08/2021 at 8:53 AM
Electronically Signed by Margaret Crenshaw - MD on 10/08/2021 at 12:19 PM

October 12, 2021

Correctional Treatment Facility
1901 E Street, SE Washington, DC 20003
Fax:

Page 1
TextNote

Home: 377183

CHRISTOPHER WORRELL

Male DOB: [REDACTED]

377183

10/07/2021 - TextNote: Communication with HUH Ortho
Provider: Eleni O'Donovan - MD
Location of Care: Central Detention Facility

I spoke with Dr. Wilson who saw the patient this summer. Per Dr. Wilson, Mr. Worrell's injury is often treated conservatively and he had not thought patient needed surgery when he evaluated him in June. When I explained that the documentation sent by HUH indicated that we should be setting up surgery, he scheduled the patient for a follow-up visit next week to re-evaluate and determine the next step. Per referral coordinator appt currently is 10/14/21.

Electronically Signed by Eleni O'Donovan - MD on 10/08/2021 at 3:37 PM

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U.S. Department of Justice
United States Marshals Service

Medical Submission

NON-EMERGENCIES: Prior to seeking outside medical attention for a prisoner, complete this form and email or fax it to the USMS district office. USMS will notify you of approval or denial of the request. **EMERGENCIES:** Obtain treatment and notify USMS by emailing or faxing this form to the USMS district office within 24 hours.

PRISONER DETAILS

Last Name WORRELL	First Name CHRISTOPHER	Date of Birth [REDACTED]	USMS # 34356-509
Facility Name CORRECTIONAL TREATMENT FACILITY			

MEDICAL POINT OF CONTACT

Title LEAD LEGAL INSTRUMENT EXAMINER	Last Name [REDACTED]	First Name [REDACTED]	
Type of Contact FEDERAL BILLING	Phone Number [REDACTED]	Extension [REDACTED]	Email Address [REDACTED]@dc.gov

SUBMISSION INFORMATION**MEDICAL** [View Medical Submission Addendum](#)**Specialty**

Orthopedics

Service

Other (explain in remarks)

Other Service Requested - Required if Service is 'Other'

Follow-up evaluation of Right 5th Metacarpal

Comments

Follicular Cutaneous Lymphoma

MEDICATION**Is the facility enrolled in the National Managed Care Contract (NMCC) Discount Pharmacy Program?** Yes No

If enrolled in the USMS NMCC Pharmacy Program, all medication requests for USMS prisoners should be made through the USMS NMCC Pharmacy Program. If you need assistance, please contact the Heritage Health Solutions Customer Care Team at 1-866-265-0124.

Medication	Dosage	Frequency	End Date
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

Comments[REDACTED]**NOTIFICATIONS** [View Notification Type Definitions](#)**Notification Type**[REDACTED]

The United States Marshals Service collects the information on this form to assist in providing medical care for individuals in USMS custody. The authority for collecting the information on the USM 551 Prisoner Medical Request is found at 28 C.F.R. § 0.111 (j), (k) and 18 U.S.C. § 4086, which provides for the care and custody of USMS prisoners. The USMS authority to manage standards for prisoner health care derives from 18 U.S.C. §§ 4006, 4013, 4241- 4247, and S.142 - Hyde Amendment Codification Act. Providing the information on this form is voluntary. However, failure to do so may affect the ability of USMS personnel to assist in obtaining relevant medical care. Pursuant to the Privacy Act of 1974, the information provided on this form may be disclosed to the court or other adjudicative body when relevant to a proceeding; and to other federal, state, or local law enforcement agencies, to the extent that disclosure is relevant to their law enforcement responsibilities or necessary to assist in prisoner medical care. Depending on the circumstances, this information may be disclosed without the consent of the person to whom the information pertains. Routine uses permitting the disclosure of this information can be found in USM-005, U.S. Marshals Service, Capture Prisoner Management-System of Records Notice.

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Form USM-551
Rev. 11/20

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Comments

*Every submission should include supporting medical documentation.
* Note: USMS pays no more than Medicare rates.*

The United States Marshals Service collects the information on this form to assist in providing medical care for individuals in USMS custody. The authority for collecting the information on the USM 551 Prisoner Medical Request is found at 28 C.F.R. § 0.111 (j), (k) and 18 U.S.C. § 4086, which provides for the care and custody of USMS prisoners. The USMS authority to manage standards for prisoner health care derives from 18 U.S.C. §§ 4006, 4013, 4241-4247, and S.142 - Hyde Amendment Codification Act. Providing the information on this form is voluntary. However, failure to do so may affect the ability of USMS personnel to assist in obtaining relevant medical care. Pursuant to the Privacy Act of 1974, the information provided on this form may be disclosed to the court or other adjudicative body when relevant to a proceeding; and to other federal, state, or local law enforcement agencies, to the extent that disclosure is relevant to their law enforcement responsibilities or necessary to assist in prisoner medical care. Depending on the circumstances, this information may be disclosed without the consent of the person to whom the information pertains. Routine uses permitting the disclosure of this information can be found in USM-005, U.S. Marshals Service, Capture Prisoner Management-System of Records Notice.

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