

HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use SEROQUEL XR safely and effectively. See full prescribing information for SEROQUEL XR.

SEROQUEL XR (quetiapine fumarate) Extended-Release Tablets
Initial U.S. Approval: 1997

WARNING: INCREASED MORTALITY IN ELDERLY PATIENTS WITH DEMENTIA See full prescribing information for complete boxed warning.

- Atypical antipsychotic drugs are associated with an increased risk of death (5.1)
- Quetiapine is not approved for elderly patients with Dementia-Related Psychoses (5.1)

WARNING: SUICIDALITY AND ANTIDEPRESSANT DRUGS See full prescribing information for complete boxed warning.

- Increased risk of suicidal thinking and behavior in children, adolescents and young adults taking antidepressants for major depressive disorder and other psychiatric disorders (5.2)
- SEROQUEL XR is not approved for the treatment of depression, however, an immediate release form of quetiapine (Seroquel) is approved for the treatment of bipolar depression. (5.2)

-----RECENT MAJOR CHANGES-----

WARNING: Suicidality and Antidepressant Drugs (see Boxed Warning) 06/2007

Warnings and Precautions, Suicidality and Antidepressant Drugs (5.2) 06/2007

Warning: Hyperglycemia and Diabetes Mellitus (5.3), 06/2007

Warnings and Precautions, Leukopenia, Neutropenia, and Agranulocytosis (5.6) 11/2007

-----INDICATIONS AND USAGE-----

SEROQUEL XR is an atypical antipsychotic agent indicated for:

- The acute and maintenance treatment of schizophrenia (1)

-----DOSAGE AND ADMINISTRATION-----

Schizophrenia: SEROQUEL XR should be administered once daily, preferably in the evening. The recommended initial dose is 300 mg. The effective dose range for SEROQUEL XR is 400 – 800 mg per day depending on the response and tolerance of the individual patient. Dose increases can be made at intervals as short as 1 day and in increments of up to 300 mg/day. Individual dosage adjustments may be necessary. SEROQUEL XR Tablets should be swallowed whole and not split, chewed or crushed. SEROQUEL XR should be taken without food or with a light meal. (2)

-----DOSAGE FORMS AND STRENGTHS-----

Extended-Release Tablets: 150 mg, 200 mg, 300 mg, and 400 mg

-----CONTRAINDICATIONS-----

None

-----WARNINGS AND PRECAUTIONS-----

- Increased Mortality in Elderly Patients with Dementia-Related Psychoses:** Atypical antipsychotic drugs, including quetiapine, are associated with an increased risk of death; causes of death are variable. (5.1)
- Suicidality and Antidepressant Drugs:** SEROQUEL XR is not approved for the treatment of depression, however, an immediate release form of quetiapine (Seroquel) is approved for the treatment of bipolar depression. (5.2)
- Hyperglycemia and Diabetes Mellitus (DM):** Ketoacidosis, hyperosmolar coma and death have been reported in patients treated with atypical antipsychotics, including quetiapine. Any patient treated with atypical antipsychotics should be monitored for symptoms of hyperglycemia including polydipsia, polyuria, polyphagia, and

weakness. When starting treatment, patients with DM risk factors should undergo blood glucose testing before and during treatment. (5. 3)

- Neuroleptic Malignant Syndrome (NMS):** Potentially fatal symptom complex has been reported with antipsychotic drugs, including quetiapine. (5. 4)
- Orthostatic Hypotension:** Associated dizziness, tachycardia and syncope especially during the initial dose titration period. (5. 5)
- Leukopenia, Neutropenia and Agranulocytosis:** have been reported with atypical antipsychotics including SEROQUEL XR. Patients with a pre-existing low white cell count (WBC) or a history of leukopenia/neutropenia should have complete blood count (CBC) monitored frequently during the first few months of treatment and should discontinue SEROQUEL XR at the first sign of a decline in WBC in absence of other causative factors. (5. 6)
- Tardive Dyskinesia** may develop acutely or chronically. (5. 7)
- Cataracts:** Lens changes have been observed in patients during long-term quetiapine treatment. Lens examination should be done when starting treatment and at 6-month intervals during chronic treatment. (5. 8)
- Hyperlipidemia** (5. 11)
- The possibility of a suicide attempt is inherent in schizophrenia, and close supervision of high risk patients should accompany drug therapy. (5.18)
- See Full Prescribing Information for additional **WARNINGS and PRECAUTIONS.**

-----ADVERSE REACTIONS-----

Most common adverse reactions (incidence ≥5% and greater than placebo) are dry mouth, constipation, dyspepsia, sedation, somnolence, dizziness, and orthostatic hypotension. (6.1) **To report SUSPECTED ADVERSE REACTIONS, contact AstraZeneca at 1-800-236-9933 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.**

-----DRUG INTERACTIONS-----

- P450 3A Inhibitors:** May decrease the clearance of quetiapine. Lower doses of quetiapine may be required. (7.1)
- Hepatic Enzyme Inducers:** May increase the clearance of quetiapine. Higher doses of quetiapine may be required with phenytoin or other inducers. (7.1)
- Centrally Acting Drugs:** Caution should be used when quetiapine is used in combination with other CNS acting drugs. (7)
- Antihypertensive Agents:** Quetiapine may add to the hypotensive effects of these agents. (7)
- Levodopa and Dopamine Agents:** Quetiapine may antagonize the effect of these drugs. (7)
- USE IN SPECIFIC POPULATIONS-----
- Geriatric Use:** For the initial dosing in the elderly use the immediate release formulation of SEROQUEL instead of SEROQUEL XR. Consider a lower starting dose (25 mg/day immediate release formulation), slower titration, and careful monitoring during the initial dosing period in the elderly. (2.2, 8.5)
- Hepatic Impairment:** For the initial dosing in patients with hepatic impairment, use the immediate release formulation of SEROQUEL instead of SEROQUEL XR. Lower starting doses (25 mg/day immediate release formulation) and slower titration may be needed. (2.2, 8.7, 12.3)
- Pregnancy and Nursing Mothers:** Quetiapine should be used only if the potential benefit justifies the potential risk. (8.1) Breast feeding is not recommended. (8.3)
- Pediatric Use:** Safety and effectiveness have not been established. (8.4)

---SEE 17 FOR PATIENT COUNSELING INFORMATION---

Revised 04/2008

FULL PRESCRIBING INFORMATION: CONTENTS*

WARNING: INCREASED MORTALITY IN ELDERLY PATIENTS WITH DEMENTIA-RELATED PSYCHOSIS; SUICIDALITY AND ANTIDEPRESSANT DRUGS

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- 2.3 Maintenance Treatment
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- 2.5 Switching patients from SEROQUEL Tablets to SEROQUEL XR Tablets
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3 DOSAGE FORMS AND STRENGTHS

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HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use ZYPREXA safely and effectively. See full prescribing information for ZYPREXA.

ZYPREXA (olanzapine) Tablet for Oral use
ZYPREXA ZYDIS (olanzapine) Tablet, Orally Disintegrating for Oral use
ZYPREXA IntraMuscular (olanzapine) Injection, Powder, For Solution for Intramuscular use
 Initial U.S. Approval: 1996

WARNING: INCREASED MORTALITY IN ELDERLY PATIENTS WITH DEMENTIA-RELATED PSYCHOSIS

See full prescribing information for complete boxed warning.

- Elderly patients with dementia-related psychosis treated with antipsychotic drugs are at an increased risk of death. ZYPREXA is not approved for the treatment of patients with dementia-related psychosis. (5.1, 8.5, 17)

When using ZYPREXA and fluoxetine in combination, also refer to the Boxed Warning section of the package insert for Symbyax.

RECENT MAJOR CHANGES

Warnings and Precautions, Tardive Dyskinesia (5.6)	10/2019
Warnings and Precautions, Use in Patients with Concomitant Illness (5.14)	Removed 4/2020
Warnings and Precautions, Anticholinergic (antimuscarinic) Effects (5.14)	4/2020

INDICATIONS AND USAGE

ZYPREXA® (olanzapine) is an atypical antipsychotic indicated:

As oral formulation for the:

- Treatment of schizophrenia. (1.1)
 - Adults: Efficacy was established in three clinical trials in patients with schizophrenia: two 6-week trials and one maintenance trial. (14.1)
 - Adolescents (ages 13-17): Efficacy was established in one 6-week trial in patients with schizophrenia (14.1). The increased potential (in adolescents compared with adults) for weight gain and dyslipidemia may lead clinicians to consider prescribing other drugs first in adolescents. (1.1)
- Acute treatment of manic or mixed episodes associated with bipolar I disorder and maintenance treatment of bipolar I disorder. (1.2)
 - Adults: Efficacy was established in three clinical trials in patients with manic or mixed episodes of bipolar I disorder: two 3- to 4-week trials and one maintenance trial. (14.2)
 - Adolescents (ages 13-17): Efficacy was established in one 3-week trial in patients with manic or mixed episodes associated with bipolar I disorder (14.2). The increased potential (in adolescents compared with adults) for weight gain and dyslipidemia may lead clinicians to consider prescribing other drugs first in adolescents. (1.2)
- Medication therapy for pediatric patients with schizophrenia or bipolar I disorder should be undertaken only after a thorough diagnostic evaluation and with careful consideration of the potential risks. (1.3)
- Adjunct to valproate or lithium in the treatment of manic or mixed episodes associated with bipolar I disorder. (1.2)
 - Efficacy was established in two 6-week clinical trials in adults (14.2). Maintenance efficacy has not been systematically evaluated.

As ZYPREXA IntraMuscular for the:

- Treatment of acute agitation associated with schizophrenia and bipolar I mania. (1.4)
 - Efficacy was established in three 1-day trials in adults. (14.3)

As ZYPREXA and Fluoxetine in Combination for the:

- Treatment of depressive episodes associated with bipolar I disorder. (1.5)

- Efficacy was established with Symbyax (olanzapine and fluoxetine in combination); refer to the product label for Symbyax.
- Treatment of treatment resistant depression. (1.6)
 - Efficacy was established with Symbyax (olanzapine and fluoxetine in combination) in adults; refer to the product label for Symbyax.

DOSAGE AND ADMINISTRATION

Schizophrenia in adults (2.1)	Oral: Start at 5-10 mg once daily; Target: 10 mg/day within several days
Schizophrenia in adolescents (2.1)	Oral: Start at 2.5-5 mg once daily; Target: 10 mg/day
Bipolar I Disorder (manic or mixed episodes) in adults (2.2)	Oral: Start at 10 or 15 mg once daily
Bipolar I Disorder (manic or mixed episodes) in adolescents (2.2)	Oral: Start at 2.5-5 mg once daily; Target: 10 mg/day
Bipolar I Disorder (manic or mixed episodes) with lithium or valproate in adults (2.2)	Oral: Start at 10 mg once daily
Agitation associated with Schizophrenia and Bipolar I Mania in adults (2.4)	IM: 10 mg (5 mg or 7.5 mg when clinically warranted) Assess for orthostatic hypotension prior to subsequent dosing (max. 3 doses 2-4 hrs apart)
Depressive Episodes associated with Bipolar I Disorder in adults (2.5)	Oral in combination with fluoxetine: Start at 5 mg of oral olanzapine and 20 mg of fluoxetine once daily
Depressive Episodes associated with Bipolar I Disorder in children and adolescents (2.5)	Oral in combination with fluoxetine: Start at 2.5 mg of oral olanzapine and 20 mg of fluoxetine once daily
Treatment Resistant Depression in adults (2.6)	Oral in combination with fluoxetine: Start at 5 mg of oral olanzapine and 20 mg of fluoxetine once daily

- Lower starting dose recommended in debilitated or pharmacodynamically sensitive patients or patients with predisposition to hypotensive reactions, or with potential for slowed metabolism. (2.1)
- Olanzapine may be given without regard to meals. (2.1)

ZYPREXA and Fluoxetine in Combination:

- Dosage adjustments, if indicated, should be made with the individual components according to efficacy and tolerability. (2.5, 2.6)
- Olanzapine monotherapy is not indicated for the treatment of depressive episodes associated with bipolar I disorder or treatment resistant depression. (2.5, 2.6)
- Safety of co-administration of doses above 18 mg olanzapine with 75 mg fluoxetine has not been evaluated in adults. (2.5, 2.6)
- Safety of co-administration of doses above 12 mg olanzapine with 50 mg fluoxetine has not been evaluated in children and adolescents ages 10 to 17. (2.5)

DOSAGE FORMS AND STRENGTHS

- Tablets (not scored): 2.5, 5, 7.5, 10, 15, 20 mg. (3)
- Orally Disintegrating Tablets (not scored): 5, 10, 15, 20 mg. (3)
- Intramuscular Injection: 10 mg vial. (3)

CONTRAINDICATIONS

- None with ZYPREXA monotherapy. (4)
- When using ZYPREXA and fluoxetine in combination, also refer to the Contraindications section of the package insert for Symbyax®. (4)
- When using ZYPREXA in combination with lithium or valproate, refer to the Contraindications section of the package inserts for those products. (4)

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* ADMITTED VA
* ADMITTED D.C.

July 12, 2023

Via Electronic and US Mail to:
stine@stinelaw.com

Stephen J. Stine
THE STINE LAW FIRM, PLLC
3900 Jermantown Road., Suite 300
Fairfax, VA 22030-4900

Re: Elaine Mae Kapusta

Dear Mr. Stine,

In response to your communications, Lynn Kay is not permitted to contact care provider Juliet of Paragon. Monthly updates can be provided by the guardian and/or care manager unless there is a significant change in condition in which case notification would be provided in a timely manner.

Per your requests, I have enclosed Elaine Kapusta's current medications list provided by Cobbdale Assisted Living Facility. Regarding anxiety medication, Ms. Kapusta is taking Seroquel (.25 mg) twice daily as scheduled as well as Alprazolam (0.5 mg) up to three times per day as needed. Both of these medications are included on the enclosed medications list.

FDA UNAPPROVED-"AT RISK OF DEATH DRUGS"
Care manager Jeanne Blue has scheduled a visit for Friday, July 14, 2023, and she plans to examine Ms. Kapusta's lower left leg to address the bruising/rash concern.

As you are aware, the protocol for Ms. Kay to visit Ms. Kapusta is to go through the care managers of ElderTree. To date, it is my understanding that Philip Kapusta and his wife have visited Ms. Kapusta at Cobbdale, but Ms. Kay has yet to visit.

Sincerely,



Mark D. Cummings

LYNN HAS NEVER EVER
RECEIVED ANY MONTHLY
UPDATES EVER REGARDING HER
MOM'S GROSSLY MEDICALLY
ABUSED AND MEDICALLY
NEGLECTED HEALTH EVER.

MDC/teb

Physician's Orders

CURRENT ORDERS AS OF 11-Jul-2023 3:59 PM

ELAINE KAPUSTA [Room: 7, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 85]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA, ANXIETY, AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIPHERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
ROUTINE MEDICATIONS		
ACETAMINOPHEN 500 MG TABLET 500 MG TAB		
TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR PAIN [Equiv To: TYLENOL EX-STR 500 MG CAPLE] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17886707 Date Written: 6-Jun-2023
AMLODIPINE 5 MG TAB (D) 5 MG TAB		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPERTENSION [Equiv To: NORVASC 5 MG TAB] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17902812 Date Written: 23-Jun-2023
MOM WAS NOT ON THIS AT HOME BECAUSE SHE HAD NO LYMPHEDEMA! AT HOME!		
ELIQUIS 2.5 MG TABLET 2.5 MG TAB		
TAKE ONE TABLET BY MOUTH -- OWN MEDS -- 2 TIMES A DAY FOR AFIB [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17886706 Date Written: 6-Jun-2023
FUROSEMIDE 20 MG TABLET (D) 20 MG TAB		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR EDEMA [Equiv To: LASIX 20 MG TABLET] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17902815 Date Written: 23-Jun-2023
QUETIAPINE FUMARATE 25 MG(D) 25 MG TAB		
TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR MOOD -- MAX 100MG/24HR [Equiv To: SEROQUEL 25 MG TABLET] [Prescriber: GALLAGHER, ELIZABETH] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 24-Jun-2023 RX: 17903130 Date Written: 24-Jun-2023
FDA UNAPPROVED FOR ELDERLY DEMENTIA PATIENTS		
SENNAPLUS TABLET (D) 8.6MG-50MG TAB		
TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CONSTIPATION [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17886714 Date Written: 6-Jun-2023
VITAMIN B-12 1,000 MCG TAB 1000 MCG TAB		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17886713 Date Written: 6-Jun-2023
MOM HAS HIGH B12 & STILL IS BEING FORCED TO TAKE B12! 🙄		
VITAMIN D3 1,000 UNIT TABLET(D) 25 MCG TAB		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17886710 Date Written: 6-Jun-2023
PRN MEDICATIONS		
ALPRAZOLAM 0.5 MG TABLET 0.5 MG TAB		
TAKE ONE TABLET BY MOUTH 3 TIMES A DAY AS NEEDED FOR ANXIETY / AGITATION -- MAY BE CRUSHED [Equiv To: XANAX 0.5 MG TABLET] [Prescriber: GALLAGHER, ELIZABETH]		Orig Date: 23-Jun-2023 RX: 14091589 Date Written: 23-Jun-2023
BISACODYL 10 MG SUPPOSITORY 10MG SUP		
INSERT 1 UNWRAPPED SUPPOSITORY INTO RECTUM EVERY OTHER DAY AS NEEDED FOR CONSTIPATION [Prescriber: BEN-AIDA, ANISSA]		Orig Date: 9-Jun-2023 RX: 17890844 Date Written: 9-Jun-2023

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____
 Printed Name: _____
 Office Address: _____

Physician's Orders

CURRENT ORDERS AS OF 11-Jul-2023 3:59 PM

ELAINE KAPUSTA [Room: 7, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 85]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIFERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
PRN MEDICATIONS		
QUETIAPINE FUMARATE 25 MG(D)	25 MG TAB	Orig Date: 24-Jun-2023
MAY REPEAT DOSE FOR ONE TIME AFTER 1 HOUR AS NEEDED IF DESIRED EFFECT NOT ACHEIVED. -- MAX 100MG/24HR [Equiv To: SEROQUEL 25 MG TABLET] [Prescriber: GALLAGHER, ELIZABETH]		RX: 17903130
		Date Written: 24-Jun-2023
VITALS		
--		
TREATMENTS		
MOM IS BEING MEDICALLY FORCIBLY DETAINED ENTIRELY AGAINST HER WILL AND AGAINST HER BEST INTERESTS!		
INFORMATIONAL ORDERS		
--		

INSTRUCTIONS: 3503 Burrows Ave Fairfax, VA 22030

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

CC: _____

Physician's Orders

CURRENT ORDERS AS OF 5-Sep-2023 12:28 PM

ELAINE KAPUSTA [Room: 7, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 85]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIPHERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
ROUTINE MEDICATIONS		
ACETAMINOPHEN 500 MG TABLET 500 MG TAB		
TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR PAIN [Equiv To: TYLENOL EX-STR 500 MG CAPLE]		Orig Date: 6-Jun-2023
[Prescriber: DAPPEN, ALAN]		RX: 17886707
Schedule: DAILY AT 09:00, DAILY AT 19:00	FORCIBLY GIVEN TYLENOL 3 TIMES/DAY FOR PAIN	Date Written: 6-Jun-2023
AMLODIPINE 5 MG TAB (D) 5 MG TAB		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPERTENSION [Equiv To: NORVASC 5 MG TAB]		Orig Date: 6-Jun-2023
[Prescriber: DAPPEN, ALAN]		RX: 17931918
Schedule: DAILY AT 09:00		Date Written: 26-Jul-2023
ELIQUIS 2.5 MG TABLET 2.5 MG TAB		
TAKE ONE TABLET BY MOUTH --OWN MEDS USE UP-- 2 TIMES A DAY FOR AFIB [Prescriber: DAPPEN, ALAN]		Orig Date: 6-Jun-2023
Schedule: DAILY AT 09:00, DAILY AT 19:00		RX: 17886706
		Date Written: 6-Jun-2023
FUROSEMIDE 20 MG TABLET (D) 20 MG TAB		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR EDEMA [Equiv To: LASIX 20 MG TABLET] [Prescriber: DAPPEN, ALAN]		Orig Date: 6-Jun-2023
Schedule: DAILY AT 09:00	FUROSEMIDE CAUSES DANGEROUS SKY-HIGH GLUCOSE LEVELS!-VA. HOSPITAL DISCONT'D AFTER 1 DAY ON 7/1/22!	RX: 17931919
		Date Written: 26-Jul-2023
OLANZAPINE 5 MG TABLET (D) 5 MG TAB		
TAKE ONE TABLET BY MOUTH AT BEDTIME FOR MOOD [Equiv To: ZYPREXA 5 MG TABLET] [Prescriber: DALY, FARRAH]		Orig Date: 24-Aug-2023
Schedule: DAILY AT 19:00	FDA UNAPPROVED & AT RISK OF DEATH	RX: 17957912
		Date Written: 24-Aug-2023
QUETIAPINE FUMARATE 50 MG TAB 50 MG TAB		
TAKE 1/2 TABLET = (25MG) BY MOUTH EVERY DAY FOR AGITATION [Equiv To: SEROQUEL 50 MG TABLET]		Orig Date: 25-Jul-2023
[Prescriber: DALY, FARRAH]	FDA UNAPPROVED & AT RISK OF DEATH	RX: 17929883
Schedule: DAILY AT 09:00		Date Written: 25-Jul-2023
SENNAPLUS TABLET (D) 8.6MG-50MG TAB		
TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CONSTIPATION [Prescriber: DAPPEN, ALAN]		Orig Date: 6-Jun-2023
Schedule: DAILY AT 19:00	FORCED DAILY LAXATIVES IS DANGEROUS TO THE COLON AND NOT APPROVED FOR CONTINUAL DAILY USAGE	RX: 17886714
	<small>AMLODIPINE (NORVASC) & ANTIPSYCHOTICS BOTH CAUSED MOM TO SUFFER "DRUG-INDUCED PAINFUL MILD LAXATIVES MEDICAL UNIT TAKEN AT COBDDALE OCCURRED WITHIN 10 MINUTES OF CONTINUAL MOM'S USE"</small>	Date Written: 6-Jun-2023
VITAMIN B12 1,000 MCG TAB(D) 1000 MCG EAC		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Equiv To: VITAMIN B-12 1,000 MCG TAB]		Orig Date: 6-Jun-2023
[Prescriber: DAPPEN, ALAN]	MOM HAS 21 MONTHS OF CONTINUALLY HIGH B12 & THEY REFUSE TO REMOVE MOM FROM B12-CAUSING GREAT DANGER IN MASKING ANOTHER BLOOD DISORDER, POSSIBLY LEUKEMIA".	RX: 17931915
Schedule: DAILY AT 09:00		Date Written: 26-Jul-2023
VITAMIN D3 1,000 UNIT TABLET(D) 25 MCG TAB		
TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN]		Orig Date: 6-Jun-2023
Schedule: DAILY AT 09:00		RX: 17886710
		Date Written: 6-Jun-2023
PRN MEDICATIONS		
BISACODYL 10 MG SUPPOSITORY 10MG SUP		
INSERT 1 UNWRAPPED SUPPOSITORY INTO RECTUM EVERY OTHER DAY AS NEEDED FOR CONSTIPATION [Prescriber: BEN-AIDA, ANISSA]		Orig Date: 9-Jun-2023
		RX: 17890844
		Date Written: 9-Jun-2023

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. S. 11

Physician's Orders

CURRENT ORDERS AS OF 5-Sep-2023 12:28 PM

ELAINE KAPUSTA [Room: 7, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 85]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIPHERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
PRN MEDICATIONS		
QUETIAPINE FUMARATE 25 MG(D)	25 MG TAB	Orig Date: 18-Jul-2023
MAY REPEAT DOSE 1 TABLET FOR ONE TIME AFTER 1 HOUR OF SCHEDULED QUETIAPINE AS NEEDED IF DESIRED EFFECT NOT ACHIEVED - DNE 100MG/24H- [Equiv To: SEROQUEL 25 MG TABLET] [Prescriber: DALY, FARRAH]		RX: 17922302 Date Written: 18-Jul-2023
FDA UNAPPROVED & AT RISK OF DEATH		
VITALS		
-- MOM IS BEING MEDICALLY FORCIBLY DETAINED ENTIRELY AGAINST HER WILL AND AGAINST HER BEST INTERESTS!		
TREATMENTS		
--		
INFORMATIONAL ORDERS		
--		

INSTRUCTIONS: 3503 Burrows Ave Fairfax, VA 22030

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Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. S. "

3800 FAIRFAX DRIVE, SUITE 7
ARLINGTON, VIRGINIA 22203

TEL: (703) 525-1200
FAX: (703) 525-0067

www.shercummingsandellis.com



DAVID E. SHER **
MARK D. CUMMINGS **
JOHN P. ELLIS (RET.)
ADAM M. COLLINS*

* ADMITTED VA
+ ADMITTED D.C.

October 17, 2023

Via Electronic and US Mail to:
tweeter7@yahoo.com

Lynn Kay
4136 North River Street
McLean, Virginia 22101

Re: Meeting Proposal and Medications Updates

Dear Ms. Kay:

I would like to propose an in-person meeting with you which would include myself and George Dodge. We propose a care manager be available by phone conference or in person depending on availability. Depending on when the conference is to occur, then perhaps Mrs. Kapusta's doctor could be present as well. This meeting would be an opportunity for you to discuss your concerns with Mrs. Kapusta's care team members.

Mr. Dodge has requested the updated medications list from Cobbdale Assisted Living but has not received anything back. He will ask again and once he receives the medications list you will be provided with it.

We have listened to your concerns regarding Mrs. Kapusta's medications and blood tests. Following a blood test conducted on October 12, 2023, and a conversation with Dr. Dappen, George Dodge requested Mrs. Kapusta be taken off Seroquel and Lasix. As of October 14, 2023, Mrs. Kapusta has been taken off both medications. Mr. Dodge has requested the INOVA hospital records from Mrs. Kapusta's stay on September 29, 2023. We will forward upon receipt.

Mark D. Cummings

LYNN RECEIVED NO MEDICATION LISTS UNTIL JANUARY 2024. NOVEMBER, DECEMBER 2023 & JANUARY 2024 MEDICATIONS RECEIVED IN JANUARY 2024!!! AND "THE MEDICATION LISTS WERE DOCTORED AFTER THE STATED DATE SHOWING MEDICATION LISTS ARE NOT ACCURATE!"

MDC/teb
cc: George W. Dodge

Physician's Orders

CURRENT ORDERS AS OF 30-Oct-2023 10:29 AM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 85]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA, ANXIETY, AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIPHERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
ROUTINE MEDICATIONS		
ACETAMINOPHEN 500 MG TABLET 500 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR PAIN [Equiv To: TYLENOL EX-STR 500 MG CAPLE] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17886707 Date Written: 6-Jun-2023
AMLODIPINE 5 MG TAB (D) 5 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPERTENSION [Equiv To: NORVASC 5 MG TAB] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17931918 Date Written: 26-Jul-2023
ELIQUIS 2.5 MG TABLET 2.5 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR AFIB [Prescriber: GALLAGHER, ELIZABETH] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17986879 Date Written: 28-Sep-2023
OLANZAPINE 5 MG TABLET (D) 5 MG TAB TAKE ONE TABLET BY MOUTH AT BEDTIME FOR MOOD [Equiv To: ZYPREXA 5 MG TABLET] [Prescriber: DALY, FARRAH] Schedule: DAILY AT 19:00		Orig Date: 24-Aug-2023 RX: 17986039 Date Written: 27-Sep-2023
SENNAPLUS TABLET (D) 8.6MG-50MG TAB TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CONSTIPATION [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17886714 Date Written: 6-Jun-2023
VITAMIN B12 1,000 MCG TAB(D) 1000 MCG EAC TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Equiv To: VITAMIN B12 1,000 MCG TAB] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17931915 Date Written: 26-Jul-2023
VITAMIN D3 1,000 UNIT TABLET(D) 25 MCG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17886710 Date Written: 6-Jun-2023
PRN MEDICATIONS		
BISACODYL 10 MG SUPPOSITORY 10MG SUP INSERT 1 UNWRAPPED SUPPOSITORY INTO RECTUM EVERY OTHER DAY AS NEEDED FOR CONSTIPATION [Prescriber: BEN-AIDA, ANISSA]		Orig Date: 9-Jun-2023 RX: 17890844 Date Written: 9-Jun-2023
VITALS		
--		

NOT FDA APPROVE & "AT RISK OF DEATH"

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. Use

Physician's Orders

CURRENT ORDERS AS OF 30-Oct-2023 10:29 AM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 85]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIFERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
TREATMENTS		
--		
INFORMATIONAL ORDERS		
--		

INSTRUCTIONS: 3503 Burrows Ave Fairfax, VA 22030

**MOM IS BEING MEDICALLY
FORCIBLY DETAINED ENTIRELY
AGAINST HER WILL AND AGAINST
HER BEST INTERESTS!**

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. Sign.

Physician's Orders

CURRENT ORDERS AS OF 1-Nov-2023 7:29 PM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 86]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIFERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:

ROUTINE MEDICATIONS

ACETAMINOPHEN 500 MG TABLET 500 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR PAIN [Equiv To: TYLENOL EX-STR500 MG CAPLE] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00, DAILY AT19:00		Orig Date: 6-Jun-2023 RX: 17886707 Date Written: 6-Jun-2023
AMLODIPINE 5 MG TAB (D) 5 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPERTENSION [Equiv To: NORVASC5 MG TAB] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00 NORVASC CAUSES LYMPHEDEMA-MOM WAS NOT ON NORVASC SINCE 2022 & MOM HAD NO LYMPHEDEMA SINCE THEN AT HOME		Orig Date: 6-Jun-2023 RX: 17931918 Date Written: 26-Jul-2023
ELIQUIS 2.5 MG TABLET 2.5 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR AFIB [Prescriber: GALLAGHER, ELIZABETH] Schedule: DAILY AT09:00, DAILY AT19:00		Orig Date: 6-Jun-2023 RX: 17986879 Date Written: 28-Sep-2023
ENSURE LIQUID ML DRINK 1 CAN BY MOUTH 2 TIMES A DAY FOR DECREASE IN APPETITE [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00, DAILY AT19:00		Orig Date: 3-Jan-2024 RX: 19075815 Date Written: 3-Jan-2024
FUROSEMIDE 40 MG TABLET (D) 40 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR EDEMA [Equiv To: LASIX40 MG TABLET] [Prescriber: BEN-AIDA, ANISSA] Schedule: DAILY AT09:00		Orig Date: 9-Nov-2023 RX: 19045149 Date Written: 1-Dec-2023
FUROSEMIDE 40 MG TABLET (D) 40 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR EDEMA--NEED NEW RX-- [Equiv To: LASIX40 MG TABLET] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00		Orig Date: 9-Nov-2023 RX: _19028232 Date Written: 9-Nov-2023
OLANZAPINE 5 MG TABLET (D) 5 MG TAB TAKE ONE TABLET BY MOUTH AT BEDTIME FOR MOOD [Equiv To: ZYPREXA5 MG TABLET] [Prescriber: DALY FARRAH] Schedule: DAILY AT19:00		Orig Date: 24-Aug-2023 RX: 17986039 Date Written: 27-Sep-2023
POTASSIUM CL ER 10 MEQ TABLET 10 MEQ TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPOKALEMIA --NEED NEW RX-- [Equiv To: KLOR-CON10 MEQ TABLET] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00		Orig Date: 9-Nov-2023 RX: _19028233 Date Written: 9-Nov-2023
POTASSIUM CL ER 10 MEQ TABLET 10 MEQ TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPOKALEMIA [Equiv To: KLOR-CON10 MEQ TABLET] [Prescriber: BEN-AIDA, ANISSA] Schedule: DAILY AT09:00		Orig Date: 9-Nov-2023 RX: 19045150 Date Written: 1-Dec-2023
SENNAPLUS TABLET (D) 8.6MG-50MG TAB TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CONSTIPATION [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT19:00		Orig Date: 6-Jun-2023 RX: 17886714 Date Written: 6-Jun-2023

FDA UNAPPROVED-"AT RISK OF DEATH"

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Physician's Orders

CURRENT ORDERS AS OF 1-Nov-2023 7:29 PM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 86]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIFERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:

ROUTINE MEDICATIONS

VITAMIN B12 1,000 MCG TAB(D) TAKE ONE TABLET BY MOUTH EVERY OTHER DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: EVERY 2 DAYS STARTING 04 Nov 2023	1000 MCG EAC	Orig Date: 4-Nov-2023 RX: 19021770 Date Written: 9-Nov-2023
VITAMIN B12 1,000 MCG TAB(D) TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Equiv To: VITAMIN B12 1,000 MCG TAB] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00	1000 MCG EAC	Orig Date: 6-Jun-2023 RX: 17931915 Date Written: 26-Jul-2023
VITAMIN D3 1,000 UNIT TABLET(D) TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00	25 MCG TAB	Orig Date: 6-Jun-2023 RX: 17886710 Date Written: 6-Jun-2023

PRN MEDICATIONS

ALBUTEROL SUL 2.5 MG/3 ML (25) INHALE 1 VIAL VIA NEBULIZER EVERY 6 HOURS AS NEEDED FOR COUGH [Equiv To: PROVENTIL 0.83 MG/ML SOLUTN] [Prescriber: DAPPEN, ALAN]	2.5 MG/3ML ML	Orig Date: 21-Dec-2023 RX: 19062054 Date Written: 21-Dec-2023
BISACODYL 10 MG SUPPOSITORY INSERT 1 UNWRAPPED SUPPOSITORY INTO RECTUM EVERY OTHER DAY AS NEEDED FOR CONSTIPATION [Prescriber: BEN-AIDA, ANISSA]	10MG SUP	Orig Date: 9-Jun-2023 RX: 17890844 Date Written: 9-Jun-2023
LORAZEPAM 1 MG TABLET TAKE ONE TABLET BY MOUTH EVERY DAY AS NEEDED FOR ANXIETY [Equiv To: ATIVAN 1 MG TAB*] [Prescriber: DAPPEN, ALAN]	1 MG TAB	Orig Date: 23-Dec-2023 RX: 14101752 Date Written: 23-Dec-2023
NEBULIZER - LDR USE AS DIRECTED [Prescriber: DAPPEN, ALAN]	1 EAC	Orig Date: 20-Dec-2023 RX: 19062052 Date Written: 20-Dec-2023
NEBULIZER TUBING/FACE MASK USE AS DIRECTED [Prescriber: DAPPEN, ALAN]	1	Orig Date: 20-Dec-2023 RX: 19062051 Date Written: 20-Dec-2023

VITALS

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TREATMENTS

MOM IS BEING "MEDICALLY FORCIBLY DETAINED" AGAINST HER WILL AND AGAINST HER "BEST INTERESTS"

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. S. N.

Physician's Orders

CURRENT ORDERS AS OF 1-Nov-2023 7:29 PM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 86]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIFERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
INFORMATIONAL ORDERS		
--		

INSTRUCTIONS: 3503 Burrows Ave Fairfax, VA 22030

MOM IS BEING "MEDICALLY FORCIBLY DETAINED" AGAINST HER WILL AND AGAINST HER "BEST INTERESTS"

ZYPREXA IS FDA UNAPPROVED FOR ELDERLY DEMENTIA-BLACK-BOXED WARNING "AT RISK OF DEATH"-

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. Sign.

Physician's Orders

CURRENT ORDERS AS OF 1-Dec-2023 7:29 PM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 86]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA, ANXIETY, AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIPHERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
PRN MEDICATIONS		
BISACODYL 10 MG SUPPOSITORY 10MG SUP INSERT 1 UNWRAPPED SUPPOSITORY INTO RECTUM EVERY OTHER DAY AS NEEDED FOR CONSTIPATION [Prescriber: BEN-AIDA, ANISSA]		Orig Date: 9-Jun-2023 RX: 17890844 Date Written: 9-Jun-2023
LORAZEPAM 1 MG TABLET 1 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY AS NEEDED FOR ANXIETY [Equiv To: ATIVAN 1 MG TAB*] [Prescriber: DAPPEN, ALAN]		Orig Date: 23-Dec-2023 RX: 14101752 Date Written: 23-Dec-2023
NEBULIZER - LDR 1 EAC USE AS DIRECTED [Prescriber: DAPPEN, ALAN]		Orig Date: 20-Dec-2023 RX: 19062052 Date Written: 20-Dec-2023
NEBULIZER TUBING/FACE MASK 1 USE AS DIRECTED [Prescriber: DAPPEN, ALAN]		Orig Date: 20-Dec-2023 RX: 19062051 Date Written: 20-Dec-2023
VITALS		
--		
TREATMENTS		
--		
INFORMATIONAL ORDERS		
--		

INSTRUCTIONS: 3503 Burrows Ave Fairfax, VA 22030

MOM IS BEING "MEDICALLY FORCIBLY DETAINED" AGAINST HER WILL AND AGAINST HER "BEST INTERESTS"

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. No. _____

MOM IS BEING "MEDICALLY FORCIBLY DETAINED"

Physician's Orders

CURRENT ORDERS AS OF 1-Dec-2023 7:29 PM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Code Status: DO NOT RESUSCITATE

Date Of Birth: 30-Dec-1937 [Age: 86]	Arrival Date: 6-Jun-2023	
Diagnosis: DEMENTIA.ANXIETY,AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIFERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
ROUTINE MEDICATIONS		
ACETAMINOPHEN 500 MG TABLET 500 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR PAIN [Equiv To: TYLENOL EX-STR500 MG CAPLE] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00, DAILY AT19:00		Orig Date: 6-Jun-2023 RX: 17886707 Date Written: 6-Jun-2023
AMLODIPINE 5 MG TAB (D) 5 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPERTENSION [Equiv To: NORVASC 5 MG TAB] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00		Orig Date: 6-Jun-2023 RX: 17931918 Date Written: 26-Jul-2023
ELIQUIS 2.5 MG TABLET 2.5 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR AFIB [Prescriber: GALLAGHER, ELIZABETH] Schedule: DAILY AT09:00, DAILY AT19:00		Orig Date: 6-Jun-2023 RX: 17986879 Date Written: 28-Sep-2023
ENSURE LIQUID ML DRINK 1 CAN BY MOUTH 2 TIMES A DAY FOR DECREASE IN APPETITE [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00, DAILY AT19:00		Orig Date: 3-Jan-2024 RX: 19075815 Date Written: 3-Jan-2024
FUROSEMIDE 40 MG TABLET (D) 40 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR EDEMA [Equiv To: LASIX40 MG TABLET] [Prescriber: BEN-AIDA, ANISSA] Schedule: DAILY AT09:00		Orig Date: 9-Nov-2023 RX: 19045149 Date Written: 1-Dec-2023
POTASSIUM CL ER 10 MEQ TABLET 10 MEQ TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPOKALEMIA [Equiv To: KLOR-CON 10 MEQ TABLET] [Prescriber: BEN-AIDA, ANISSA] Schedule: DAILY AT09:00		Orig Date: 9-Nov-2023 RX: 19045150 Date Written: 1-Dec-2023
SENNAPLETS PLUS TABLET (D) 8.6MG-50MG TAB TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CONSTIPATION [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT19:00		Orig Date: 6-Jun-2023 RX: 17886714 Date Written: 6-Jun-2023
VITAMIN B12 1,000 MCG TAB(D) 1000 MCG EAC TAKE ONE TABLET BY MOUTH EVERY OTHER DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: EVERY 2 DAYS STARTING 04 Nov 2023		Orig Date: 4-Nov-2023 RX: 19021770 Date Written: 9-Nov-2023
VITAMIN D3 1,000 UNIT TABLET(D) 25 MCG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT09:00		Orig Date: 6-Jun-2023 RX: 17886710 Date Written: 6-Jun-2023
PRN MEDICATIONS		
ALBUTEROL SUL 2.5 MG/3 ML (25) 2.5 MG/3ML ML INHALE 1 VIAL VIA NEBULIZER EVERY 6 HOURS AS NEEDED FOR COUGH [Equiv To: PROVENTIL 0.83 MG/ML SOLUTN] [Prescriber: DAPPEN, ALAN]		Orig Date: 21-Dec-2023 RX: 19062054 Date Written: 21-Dec-2023

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

OFFICE

Physician's Orders

CURRENT ORDERS AS OF 1-Jan-2024 7:29 PM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 86]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA, ANXIETY, AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIPHERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
ROUTINE MEDICATIONS		
ACETAMINOPHEN 500 MG TABLET 500 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR PAIN [Equiv To: TYLENOL EX-STR 500 MG CAPLE] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17886707 Date Written: 6-Jun-2023
AMLODIPINE 5 MG TAB (D) 5 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPERTENSION [Equiv To: NORVASCO 5 MG TAB] [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17931918 Date Written: 26-Jul-2023
ELIQUIS 2.5 MG TABLET 2.5 MG TAB TAKE ONE TABLET BY MOUTH 2 TIMES A DAY FOR AFIB [Prescriber: GALLAGHER, ELIZABETH] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17986879 Date Written: 28-Sep-2023
ENSURE LIQUID ML DRINK 1 CAN BY MOUTH 2 TIMES A DAY FOR DECREASE IN APPETITE [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00, DAILY AT 19:00		Orig Date: 3-Jan-2024 RX: 19075815 Date Written: 3-Jan-2024
FUROSEMIDE 40 MG TABLET (D) 40 MG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR EDEMA [Equiv To: LASIX 40 MG TABLET] [Prescriber: BEN-AIDA, ANISSA] Schedule: DAILY AT 09:00		Orig Date: 9-Nov-2023 RX: 19045149 Date Written: 1-Dec-2023
POTASSIUM CLER 10 MEQ TABLET 10 MEQ TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR HYPOKALEMIA [Equiv To: KLOR-CON 10 MEQ TABLET] [Prescriber: BEN-AIDA, ANISSA] Schedule: DAILY AT 09:00		Orig Date: 9-Nov-2023 RX: 19045150 Date Written: 1-Dec-2023
SENNAPLUS TABLET (D) 8.6MG-50MG TAB TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CONSTIPATION [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 19:00		Orig Date: 6-Jun-2023 RX: 17886714 Date Written: 6-Jun-2023
VITAMIN B12 1,000 MCG TAB(D) 1000 MCG EAC TAKE ONE TABLET BY MOUTH EVERY OTHER DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: EVERY 2 DAYS STARTING 04 Nov 2023		Orig Date: 4-Nov-2023 RX: 19021770 Date Written: 9-Nov-2023
VITAMIN D3 1,000 UNIT TABLET(D) 25 MCG TAB TAKE ONE TABLET BY MOUTH EVERY DAY FOR SUPPLEMENT [Prescriber: DAPPEN, ALAN] Schedule: DAILY AT 09:00		Orig Date: 6-Jun-2023 RX: 17886710 Date Written: 6-Jun-2023
PRN MEDICATIONS		
ALBUTEROL SUL 2.5 MG/3 ML (25) 2.5 MG/3ML ML INHALE 1 VIAL VIA NEBULIZER EVERY 6 HOURS AS NEEDED FOR COUGH [Equiv To: PROVENTIL 0.83 MG/ML SOLUTN] [Prescriber: DAPPEN, ALAN]		Orig Date: 21-Dec-2023 RX: 19062054 Date Written: 21-Dec-2023

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. Use

MOM IS BEING "MEDICALLY FORCIBLY DETAINED"

Physician's Orders

CURRENT ORDERS AS OF 1-Jan-2024 7:29 PM

ELAINE KAPUSTA [Room: 1, Cobbdale Assisted Living]

Date Of Birth: 30-Dec-1937 [Age: 86]	Arrival Date: 6-Jun-2023	Code Status: DO NOT RESUSCITATE
Diagnosis: DEMENTIA, ANXIETY, AGITATION, AFIB, UMBILICAL POST SURGICAL HERNIA, Mild thrombocytopenia, HTN, PERIPHERAL EDEMA	Diet: REGULAR DIET	Allergies: SULFA ANTIBIOTICS, ASPIRIN
PCP: DAPPEN, ALAN	Address: 370 MAPLE AVE VIENNA, VA 22180	Phone: 703-938-4604 DEA:
PRN MEDICATIONS		
BISACODYL 10 MG SUPPOSITORY INSERT 1 UNWRAPPED SUPPOSITORY INTO RECTUM EVERY OTHER DAY AS NEEDED FOR CONSTIPATION [Prescriber: BEN-AIDA, ANISSA]	10MG SUP	Orig Date: 9-Jun-2023 RX: 17890844 Date Written: 9-Jun-2023
LORAZEPAM 1 MG TABLET TAKE ONE TABLET BY MOUTH EVERY DAY AS NEEDED FOR ANXIETY [Equiv To: ATIVAN 1 MG TAB*] [Prescriber: DAPPEN, ALAN]	1 MG TAB	Orig Date: 23-Dec-2023 RX: 14101752 Date Written: 23-Dec-2023
NEBULIZER - LDR USE AS DIRECTED [Prescriber: DAPPEN, ALAN]	1 EAC	Orig Date: 20-Dec-2023 RX: 19062052 Date Written: 20-Dec-2023
NEBULIZER TUBING/FACE MASK USE AS DIRECTED [Prescriber: DAPPEN, ALAN]	1	Orig Date: 20-Dec-2023 RX: 19062051 Date Written: 20-Dec-2023
VITALS		
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TREATMENTS		
--		
INFORMATIONAL ORDERS		
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INSTRUCTIONS: 3503 Burrows Ave Fairfax, VA 22030

MOM IS BEING "MEDICALLY FORCIBLY DETAINED" AGAINST HER WILL AND AGAINST HER "BEST INTERESTS"

*** My signature below authorizes these medications to be filled for a 31 day supply with 11 refills unless otherwise noted on the medication orders. This authorization does NOT apply to controlled substances as they must be ordered per DEA regulation.***

Prescriber's Signature/Date: _____

Printed Name: _____

Office Address: _____

Off. Phone: _____

DENIAL OF
DENTAL
CARE AND
DENIAL OF
LABS

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January 23, 2024

J.S. Burton, P.L.C.
1750 Tysons Blvd, Suite 1500
McLean, VA 22102

Re: Elaine Kapusta

Dear Mr. Burton:

Please find enclosed a copy of Elaine Kapusta's medication lists for November 1, 2023, December 1, 2023, and January 1, 2024, as requested by your client. A dental appointment has been set for Elaine Kapusta for Tuesday, January 30, 2024.

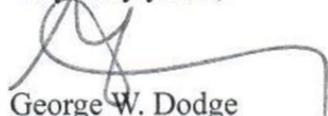
Regarding the email you sent me dated January 18, 2024, please tell your client that Ms. Kapusta has not had Covid since her admittance at Cobbdale Assisted Living Facility. In December 2023 Mrs. Kapusta had a cold including a cough from which she has since recovered from. If at any time Ms. Kapusta is diagnosed with Covid, I would consider it a change of condition and Lynn Kay and Philip Kapusta would be notified of such.

Pursuant to your client's questions in her email dated January 19, 2024, Ms. Kapusta has not been given any antibiotics upon her admission to Cobbdale Assisted Living, as she has not had any bacterial infections. Ms. Kapusta was administered the updated Covid and flu vaccinations on November 7, 2023.

Ms. Kay has indicated that she has set up weekly appointments for Ms. Kapusta. I did not authorize Lynn Kay to set up appointments. Accordingly, Ms. Kapusta will not be attending these unauthorized appointments. Please make it clear to Ms. Kay that she does not have authority or permission to set up appointments for Ms. Kapusta.

Ms. Kay has been requesting a phone call between you, her, and myself. Please let me know what times you both are available. I suggest February 6, 2024, following the monthly phone call between Ms. Kay and Ms. Kapusta. In closing, I have received direct emails from Ms. Kay on January 10, 2024, January 18, 2024, and January 19, 2024. Please advise your client once more to stop emailing me directly.

Very truly yours,



George W. Dodge
Guardian of Elaine M. Kapusta.