

22 Sep 2010 0950

Facility: Weed ACH Fort Irwin, CA

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

60 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care.

Signed By TAYLOR, JACQUELINE (Licensed Clinical Social Worker) @ 22 Sep 2010 0956

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE
THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS
TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW. VIOLATORS WILL BE PROSECUTED.

STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRMR (41 CFR) 201-45.505

Patient: CHAJI, HOUDA
Treatment Facility: WEED ACH
Patient Status: Outpatient

Date: 21 Sep 2010 0930 PDT
Clinic: PSYCHIATRY WACH

Appt Type: EST
Provider: JOHNSON, DAVID E

Reason for Appointment: f/u
Appointment Comments:
9sept aet

LMP: 25 Jan 2010. Date Basis: unknown.

A/P Written by JOHNSON, DAVID E @ 21 Sep 2010 0959 PDT

I. POST-TRAUMATIC STRESS DISORDER

Procedure(s): -Psychiat Therapy Indiv Appr 20-30 Min W/ Med Eval Managemt x 1
-Dangerousness Assessment Suicide Risk x 1

Disposition Written by JOHNSON, DAVID E @ 21 Sep 2010 0959 PDT

Released w/o Limitations

Note Written by JOHNSON, DAVID E @ 21 Sep 2010 0958 PDT

Weed MEDDAC Behavioral Health Department Followup

The patient's identity was verified via full name and date of birth.

ID

30 yo married female DEP with PTSD due to assault.

Subjective

The pt reported mild improvement when her neighbor moved to Fort Polk, but then the neighbor sent "friends" to their house to convince them to drop the charges. They called their lawyer for assistance. The pt reports ongoing problems with being scared to leave the house, and feeling so scared at bedtime that her nose bleeds. The Seroquel caused her to feel drunk and "laughing" and she still could not sleep most of the night. The Zoloft helps her to feel calmer, she says. She still says that her husband's unit is punishing him for her going to the CG. She feels like she has lost purpose in her life. She wants to be at home with her mother, but cannot leave her husband here. Her children are a source of strength as far as a reason to keep living. She denies SI or HI.

MEDS

Zoloft 100 mg daily

Seroquel

Medication history was reviewed.

PAIN

No pain issues noted. Pain is 0 out of 10 today.

MSE

Appearance: appropriately dressed and groomed.

Movement: no psychomotor retardation or agitation

Eye Contact: fair; she cried often and then would avoid eye contact

Speech Rate/Volume: normal tone; normal rate.

Interaction with Examiner: interactive, smiling at times, tearful and tremulous at other times.

Mood: anxious and depressed

Affect: constricted

Judgment: good

Insight: fair

Thought Processes: Linear, logical, goal-directed

Thought Content:

No AH/VH/delusions.

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
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SI: no thoughts, plan, or intent

HI: none

ASSESSMENT

Stop Seroquel and start Restoril for sleep. Consider raise in Zoloft dosage next visit. Continue supportive therapy.

Suicide risk was assessed as low.

Protective factors included no SI, no hopelessness, no h/o suicide attempts, husband's presence

Risk factors included anxiety and fear

DIAGNOSIS

Axis I Posttraumatic stress disorder

Axis II deferred

Axis III none

Axis IV sexual assault

Axis V GAF 60

PLAN:

Maintain Zoloft 100 mg daily.

Stop Seroquel 25-50 mg at bedtime PRN insomnia.

Start Restoril 15-30 mg at bedtime PRN insomnia.

Verbal Medication consent was obtained and patient verbalized understanding of diagnosis and target symptoms, possible benefits/intended outcome of treatment, possible risks and side effects, possible alternatives, possible results of not taking medication, possibility that medication may need to be adjusted over time, right to participate in treatment and right to withdraw voluntary consent for medications at any time.

Continue seeing Ms Taylor.

Patient was seen for 25 minutes.

Follow up in 1.5 weeks.

Master problem list was updated.

Med reconciliation completed. Psychiatric meds reviewed with patient (or parents as applicable); patient instructed to obtain updated med list from pharmacy and to destroy any old lists.

Signed By **JOHNSON, DAVID E** (Psychiatrist, Schweinfurt Behavioral Health Clinic) @ 21 Sep 2010 0959

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALIC
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
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MC Status:	Status:	PCM: ROBERTS,MICAH J
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STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRMR (41 CFR) 201-45.505

Patient: CHAJI, HOUDA
 Treatment Facility: COMMUNITY
 MENTAL HEALTH SERVICE FT. IRWIN
 Patient Status: Outpatient

Date: 16 Sep 2010 1126 PDT
 Clinic: MENTAL HEALTH WACH

Appt Type: EST
 Provider: TAYLOR,JACQUELINE

Reason for Appointment:

AutoCites Refreshed by TAYLOR,JACQUELINE @ 16 Sep 2010 1126 PDT

Problems

Chronic:

- Post-traumatic stress disorder
- Visit for: administrative purposes
- Recent weight gain
- General counseling on contraception
- Cervical Pap smear
- Insomnia
- Gastroenteritis
- Xerosis cutis

Acute:

- Acute stress disorder
- Raped
- Hyperventilation syndrome
- Superficial injury
- Transient alteration of awareness
- Atypical chest pain

Family History

- No Family History of marital history (General FHx)
- No Family History of mental illness (not retardation) (General FHx)
- No Family History of alcoholism (General FHx)
- Family medical history (General FHx)
- No Family History of heart disease (General FHx)
- No Family History of cancer (General FHx)

Allergies

- No Known Allergies

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
SERTRALINE HCL, 100 MG, TABLET, ORAL	Active	T1 TAB PO DAILY #14 RF0	NR	13 Sep 2010
QUETIAPINE FUMARATE, 25 MG, TABLET, ORAL	Active	TAKE 1-2 TAB PO AT BEDTIME #30 RF0	NR	13 Sep 2010
SALICYLIC ACID, 17%, LIQUID, TOPICAL	Active	APPLY TO WART AT THE RIGHT HAND BID FOR UP TO 12 WEEKS #1 RF0	2 of 2	01 Sep 2010
Salicylic Acid 40%, Pad, Topical	Active	APPLY PATCH BID FOR UP 12 WEEKS	NR	01 Sep 2010
Tri-Cyclen/Tri-Nessa/Tri-Sprintec Tablet Oral	Active	TAKE ONE TAB BY MOUTH ONCE DAILY, START ON 1ST SUNDAY AFTER ONSET OF MENSES #3 RF3	3 of 3	08 Apr 2010
NECON (NORETHINDRONE-ETHINYL ESTRAD), 1 MG-35MCG, TABLET, ORAL, WATSON LABS, 28 ea. BLIST PACK	Active		12 of 12	30 Aug 2009
ISOMETH-D-CHLORALPHENAZ-APAP (ISOMETHEPT/ACETAMINOP/DICHLPHN), 65-325-100, CAPSULE, ORAL, AMNEAL PHARMACE, 100 ea. BOTTLE	Active		5 of 5	30 Aug 2009
CEPHALEXIN (CEPHALEXIN MONOHYDRATE), 500 MG, CAPSULE, ORAL, TEVA USA, 500 ea. BOTTLE	Active	history of cancer (General)	NR	03 May 2009
FEXOFENADINE HCL (FEXOFENADINE HCL), 180 MG, TABLET, ORAL, DR.REDDY'S LAB, 500 ea. BOTTLE	Active		1 of 1	03 May 2009
FLUTICASONE PROPIONATE (FLUTICASONE PROPIONATE), 50 MCG, SPRAY SUSP, NASAL, APOTEX CORP, 16 g AER W/ADAP	Active		1 of 1	03 May 2009
BUSPIRONE HCL (BUSPIRONE HCL), 10 MG, TABLET, ORAL, MYLAN, 100 ea. BOTTLE	Active		1 of 1	05 Jan 2009

LMP: 25 Jan 2010. Date Basis: unknown.

SO Note Written by TAYLOR,JACQUELINE @ 16 Sep 2010 1127 PDT

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID.
FMP/SSN: .	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS,MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
 Prescribed by GSA and ICMR
 FIRMR (41 CFR) 201-45.505

16 Sep 2010 1126

Facility: Weed ACH Fort Irwin, CA

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

Chief complaint

The Chief Complaint is: Patient was seen on 15 sept. 2010. PTSD and depression due to rape.

Reason for Visit

Follow-up.

Referred here

By Command [], Self [X], Emergency Department [], Medical [], Legal [], Other [].

History of present illness

The Patient is a 30 year old female.

She reported: No military service branch and status was not specified.

Patient reported she is unable to function at her normal level still. she reported she is still unable to sleep well, however, she did follow-up with her psychiatrist and her meds were changed. she reports some improvement on her new meds. Patient reported still having nightmares at times, is fearful, can't go outside and conduct household duties or cook. she reports memory loss (particularly with short term memory) and inability to concentrate. Patient is expressing a lot of sadness and frustration feeling that all their friends left them. patient's feelings regarding her rape was explored, and boundary setting was discussed to help patient protect herself in the future.

Visit related to Deployment No [X], Yes [], Details [].

Subjective

Limits of Confidentiality Reviewed with patient, patient verbally acknowledged understanding and signature obtained..

Physical findings

Judgment: Good [], Fair [], Poor [] ~TREATMENT PLAN (JCAHO Std. PC.4.10) ~

Patient Strengths: Educated; Motivated for Treatment ~

Barriers to treatment: ~

Problem(s)~1.

PTSD due to rape

2. lack of sleep~Objective(s) (by problem number)~1.

reduce PTSD symptoms

2.

increase sleep~Interventions (by problem number) ~1.

exploring traumatic event

2.

taught coping skills and boundary setting.

General appearance:

° Normal.

Neurological:

° No hallucinations.

Speech: ° Normal. ° Sufficient nonverbal communication skills were demonstrated.

Psychiatric Exam:

Appearance: ° Tired.

Demonstrated Behavior: ° Behavior demonstrated no abnormalities.

Attitude: ° Not abnormal.

Mood: ° Depressed. ° Fearful. ° Anxious.

Affect: ° Full-ranging. ° Sad. ° Tearful.

Thought Processes: ° Not impaired.

Thought Content: ° Revealed no impairment. ° Insight was intact. ° No suicidal ideation. ° No suicidal plans. ° No suicidal intent. ° No homicidal ideations. ° No homicidal plans. ° No homicidal intent.

Spiritual assessment:

° Faith provides strength and comfort.

A/P Written by TAYLOR, JACQUELINE @ 16 Sep 2010 1132 PDT**1. POST-TRAUMATIC STRESS DISORDER**

Procedure(s): -Social Work Individual Outpatient Counseling 45-50 Minutes x 1

Disposition Written by TAYLOR, JACQUELINE @ 16 Sep 2010 1132 PDT

Released w/o Limitations

Follow up: as needed. - Comments: in one week

Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding. 60 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care.

Signed By TAYLOR, JACQUELINE (Licensed Clinical Social Worker) @ 16 Sep 2010 1132

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
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STANDARD FORM 600 (REV. 5)
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16 Sep 2010 1126

Facility: Weed ACH Fort Irwin, CA

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

Facility: Weed ACH

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

Name/SSN: HAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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FIRMR (41 CFR) 201-45.505

Patient: **CHAJI, HOUDA**
Treatment Facility: **WEED ACH**
Patient Status: **Outpatient**

Date: **09 Sep 2010 1000 PDT**
Clinic: **PSYCHIATRY WACH**

Appt Type: **EST**
Provider: **JOHNSON,DAVID E**

Reason for Appointment: **f/u**
Appointment Comments:
27aug aet

LMP: 25 Jan 2010. Date Basis: unknown.

A/P Written by JOHNSON,DAVID E @ 09 Sep 2010 1040 PDT

I. POST-TRAUMATIC STRESS DISORDER

Procedure(s):
-Psychiat Therapy Indiv Appr 20-30 Min W/ Med Eval Managemt x 1
-Psychiatric Evaluation Review of Records and Reports x 1
-Dangerousness Assessment Suicide Risk x 1

Disposition Written by JOHNSON,DAVID E @ 09 Sep 2010 1040 PDT

Released w/o Limitations

Note Written by JOHNSON,DAVID E @ 09 Sep 2010 1029 PDT

Medication List

DISCONTINUE MEDICATION ORDER # 100827-00240: SERTRALINE HCL, 50 MG, TABLET, ORAL

Note Written by JOHNSON,DAVID E @ 09 Sep 2010 1029 PDT

Medication List

DISCONTINUE MEDICATION ORDER # 100827-00241: TRAZODONE HCL, 50 MG, TABLET, ORAL

Note Written by JOHNSON,DAVID E @ 09 Sep 2010 1039 PDT

Weed MEDDAC Behavioral Health Department Followup

The patient's identity was verified via full name and date of birth.

ID

30 yo married female DEP with PTSD due to assault.

Subjective

The pt reports little improvement. The trazodone 150 mg did not really put her to sleep, and she continued to have distressing dreams. The Zoloft 50 mg has shown no effect yet. CID has told them "nothing" of the investigation status. She feels that all of their friends have left them. She feels her husband's unit is "punishing" him, especially because she went around the unit to ask the CG for help (through his XO or someone similar). She says the unit told her she is always needing things whenever her husband is away. She says she desperately wants to leave here and be near family, but also refuses to leave her husband here. The accused will PCS to Fort Polk, which is also the only other option for her husband to be moved to, so she will not go there. He would need to get training in another language or change MOS to go elsewhere, but his command won't let him go to the school or change MOS. She reports fear of knives in her kitchen, her bedroom, and the dark. She still isolates. She feels trapped and scared her. She reports memory problems now. She thinks the accused may have followed her, and his wife said they called her, which she denies. She reports lots of arguments with her husband. He does not want to leave the military. She continues to see Ms Taylor for therapy. She had questions about the permanence of her symptoms and if she will need medications forever. I comforted her that these should be temporary conditions that should resolve with time. She denies SI or HI.

MEDS

Zoloft

Trazodone

Medication history was reviewed.

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID/
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS,MICAH J
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PAIN

No pain issues noted. Pain is 0 out of 10 today.

MSE

Appearance: appropriately dressed and groomed.

Movement: no psychomotor retardation or agitation

Eye Contact: fair; she cried often and then would avoid eye contact

Speech Rate/Volume: normal tone; normal rate.

Interaction with Examiner: interactive, smiling at times, tearful and tremulous at other times.

Mood: anxious and depressed

Affect: constricted

Judgment: good

Insight: fair

Thought Processes: Linear, logical, goal-directed

Thought Content:

No AH/VH/delusions.

SI: no thoughts, plan, or intent

HI: none

ASSESSMENT

Will adjust medications to target her symptoms and she will continue in therapy. I told her that I can help out with her unit if she and her husband would like me to. She will talk to him about it.

Suicide risk was assessed as low.

Protective factors included no SI, no hopelessness, no h/o suicide attempts, husband's presence

Risk factors included anxiety and fear,

DIAGNOSIS

Axis I Posttraumatic stress disorder

Axis II deferred

Axis III none

Axis IV sexual assault

Axis V GAF 60

PLAN:

Increase to Zoloft 100 mg daily.

Stop trazodone 50-150 mg at bedtime PRN insomnia.

Start Seroquel 25-50 mg at bedtime PRN insomnia.

Verbal Medication consent was obtained and patient verbalized understanding of diagnosis and target symptoms, possible benefits/intended outcome of treatment, possible risks and side effects, possible alternatives, possible results of not taking medication, possibility that medication may need to be adjusted over time, right to participate in treatment and right to withdraw voluntary consent for medications at any time.

Continue seeing Ms Taylor.

Patient was seen for 25 minutes.

Follow up in 2 weeks.

Master problem list was updated.

Name/SSN: HAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
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FIRMR (41 CFR) 201-45.505

Med reconciliation completed. Psychiatric meds reviewed with patient (or parents as applicable); patient instructed to obtain updated med list from pharmacy and to destroy any old lists.

Signed By JOHNSON, DAVID E (Psychiatrist, Schweinfurt Behavioral Health Clinic) @ 09 Sep 2010 1040

Name/SSN: HAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
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FIRMR (41 CFR) 201-45.505

Patient: CHAJI, HOUDA
 Treatment Facility: COMMUNITY
 MENTAL HEALTH SERVICE FT. IRWIN
 Patient Status: Outpatient

Date: 08 Sep 2010 1117 PDT
 Clinic: MENTAL HEALTH WACH

Appt Type: EST
 Provider: TAYLOR,JACQUELINE

Reason for Appointment:

AutoCites Refreshed by TAYLOR,JACQUELINE @ 08 Sep 2010 1127 PDT

Problems

Chronic:

- Post-traumatic stress disorder
- Visit for: administrative purposes
- Recent weight gain
- General counseling on contraception
- Cervical Pap smear
- Insomnia
- Gastroenteritis
- Xerosis cutis

Acute:

- Acute stress disorder
- Raped
- Hyperventilation syndrome
- Superficial injury
- Transient alteration of awareness
- Atypical chest pain

Family History

- No Family History of marital history (General FHx)
- No Family History of mental illness (not retardation) (General FHx)
- No Family History of alcoholism (General FHx)
- Family medical history (General FHx)
- No Family History of heart disease (General FHx)
- No Family History of cancer (General FHx)

Allergies

- No Known Allergies

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
SALICYLIC ACID, 17%, LIQUID, TOPICAL	Active	APPLY TO WART AT THE RIGHT HAND BID FOR UP TO 12 WEEKS #1 RF0	2 of 2	01 Sep 2010
Salicylic Acid 40%, Pad, Topical	Active	APPLY PATCH BID FOR UP NR 12 WEEKS		01 Sep 2010
SERTRALINE HCL, 50 MG, TABLET, ORAL	Active	TAKE 1 TAB PO DAILY #14	NR	27 Aug 2010
TRAZODONE HCL, 50 MG, TABLET, ORAL	Active	TAKE 1-3 TAB PO AT BEDTIME PRN FOR INSOMNIA	NR	27 Aug 2010
Tri-Cyclen/Tri-Nessa/Tri-Sprintec Tablet Oral	Active	TAKE ONE TAB BY MOUTH ONCE DAILY, START ON 1ST SUNDAY AFTER ONSET OF MENSES #3 RF3	3 of 3	08 Apr 2010
ISOMETH-D-CHLORALPHENAZ-APAP (ISOMETHEPT/ACETAMINOP/DICHLPHN), 65-325-100, CAPSULE, ORAL, AMNEAL PHARMACE, 100 ea. BOTTLE	Active		5 of 5	30 Aug 2009
NECON (NORETHINDRONE-ETHINYL ESTRAD) 1 MG-35MCG, TABLET, ORAL, WATSON LABS, 28 ea. BLIST PACK	Active		12 of 12	30 Aug 2009
FLUTICASONE PROPIONATE (FLUTICASONE PROPIONATE), 50 MCG, SPRAY SUSP, NASAL, APOTEX CORP, 16 g AER W/ADAP	Active		1 of 1	03 May 2009
FEXOFENADINE HCL (FEXOFENADINE HCL), 180 MG, TABLET, ORAL, DR.REDDY'S LAB, 500 ea. BOTTLE	Active		1 of 1	03 May 2009
CEPHALEXIN (CEPHALEXIN MONOHYDRATE), 500 MG, CAPSULE, ORAL, TEVA USA, 500 ea. BOTTLE	Active		NR	03 May 2009
BUSPIRONE HCL (BUSPIRONE HCL), 10 MG, TABLET, ORAL, MYLAN, 100 ea. BOTTLE	Active	Sig	1 of 1	05 Jan 2009

LMP: 25 Jan 2010. Date Basis: unknown.

Injury/Accident Written by TAYLOR,JACQUELINE @ 08 Sep 2010 1127 PDT

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID,
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS,MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
 Prescribed by GSA and ICMR
 FIRMR (41 CFR) 201-45.505

08 Sep 2010 1117

Facility: Weed ACH Fort Irwin, CA

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

Date of Accident/Injury: 19 Aug 2010
 Place of Accident/Injury: place of residence
 Related Cause Code(s): OA-Other Accident

SO Note Written by TAYLOR,JACQUELINE @ 08 Sep 2010 1118 PDT

Chief complaint

The Chief Complaint is: PTSD and depression due to rape.

Reason for Visit

Follow-up.

Referred here

By Command [], Self [X], Emergency Department [], Medical [], Legal [], Other [].

History of present illness

The Patient is a 30 year old female.

She reported: No military service branch and status was not specified.

Patient reported she is unable to function at her normal level. she reported she is still unable to sleep often but has a follow up appointment with psychiatrist. Patient reported having nightmares at times, is fearful, can't go outside and conduct household duties or cook. she reports memory loss (particularly with short term memory) and inability to concentrate. Patient is expressing a lot of sadness and frustration feeling that all their friends left them and i stalking about the family as a result of the rape due to cultural issues. Patient also is frustrated about the "system and unfairness" in her husband's company and lack of support to the victim. patient's feelings regarding her rape was explored and talking to the victim advocate was suggested.

Visit related to Deployment No [X], Yes [], Details [].

Subjective

Limits of Confidentiality Reviewed with patient, patient verbally acknowledged understanding and signature obtained..

Physical findings

Judgment: Good [], Fair [], Poor [] --TREATMENT PLAN (JCAHO Std. PC.4.10) ~

Patient Strengths: Educated; Motivated for Treatment ~

Barriers to treatment: ~

Problem(s)~1.

PTSD due to rape

2. lack of sleep~Objective(s) (by problem number)~1.

reduce PTSD symptoms

2.

increase sleep~Interventions (by problem number) ~1.

exploring traumatic event

2.

homeowrk to follow up with psychiatrist appointment.

General appearance:

° Normal.

Neurological:

° No hallucinations. ° Mental status was normal.

Speech: ° Normal. ° Sufficient nonverbal communication skills were demonstrated.

Psychiatric Exam:

Appearance: ° Tired.

Demonstrated Behavior: ° Behavior demonstrated no abnormalities.

Attitude: ° Not abnormal.

Mood: ° Depressed. ° Fearful. ° Anxious.

Affect: ° Full-ranging. ° Sad. ° Tearful.

Thought Processes: ° Not impaired.

Thought Content: ° Revealed no impairment. ° Insight was intact. ° No suicidal ideation. ° No suicidal plans. ° No suicidal intent. ° No homicidal ideations. ° No homicidal plans. ° No homicidal intent.

Spiritual assessment:

° Faith provides strength and comfort.

A/P Written by TAYLOR,JACQUELINE @ 08 Sep 2010 1127 PDT

1. POST-TRAUMATIC STRESS DISORDER2. raped

Procedure(s): -Social Work Individual Outpatient Counseling 45-50 Minutes x 1

Disposition Written by TAYLOR,JACQUELINE @ 08 Sep 2010 1127 PDT

Released w/o Limitations

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID/
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status: normal	PCM: ROBERTS,MICAH J
Insurance: No		Tel. PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE

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STANDARD FORM 600 (REV. 5)
 Prescribed by GSA and ICMR
 FIRMR (41 CFR) 201-45.505

08 Sep 2010 1117

Facility: Weed ACH Fort Irwin, CA

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

Follow up: as needed . - Comments: in one week

Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding.
60 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care.

Signed By TAYLOR, JACQUELINE (Licensed Clinical Social Worker) @ 08 Sep 2010 1127

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRMR (41 CFR) 201-45.505

Patient: CHAJI, HOUDA
 Treatment Facility: COMMUNITY
 MENTAL HEALTH SERVICE FT. IRWIN
 Patient Status: Outpatient

Date: 01 Sep 2010 1319 PDT
 Clinic: MENTAL HEALTH WACH

Appt Type: EST
 Provider: TAYLOR,JACQUELINE

Reason for Appointment:

AutoCites Refreshed by TAYLOR,JACQUELINE @ 01 Sep 2010 1328 PDT

Problems

Chronic:

- Post-traumatic stress disorder
- Visit for: administrative purposes
- Recent weight gain
- General counseling on contraception
- Cervical Pap smear
- Insomnia
- Gastroenteritis
- Xerosis cutis

Acute:

- Acute stress disorder
- Raped
- Hyperventilation syndrome
- Superficial injury
- Transient alteration of awareness
- Atypical chest pain

Family History

- No Family History of marital history (General FHx)
- No Family History of mental illness (not retardation) (General FHx)
- No Family History of alcoholism (General FHx)
- Family medical history (General FHx)
- No Family History of heart disease (General FHx)
- No Family History of cancer (General FHx)

Allergies

- No Known Allergies

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
SALICYLIC ACID, 17%, LIQUID, TOPICAL	Active	APPLY TO WART AT THE RIGHT HAND BID FOR UP TO 12 WEEKS #1 RF0	2 of 2	01 Sep 2010
Salicylic Acid 40%, Pad, Topical	Active	APPLY PATCH BID FOR UP NR 12 WEEKS		01 Sep 2010
SERTRALINE HCL, 50 MG, TABLET, ORAL	Active	TAKE 1 TAB PO DAILY #14	NR	27 Aug 2010
TRAZODONE HCL, 50 MG, TABLET, ORAL	Active	TAKE 1-3 TAB PO AT BEDTIME PRN FOR INSOMNIA	NR	27 Aug 2010
Tri-Cyclen/Tri-Nessa/Tri-Sprintec Tablet Oral	Active	TAKE ONE TAB BY MOUTH ONCE DAILY, START ON 1ST SUNDAY AFTER ONSET OF MENSES #3 RF3	3 of 3	08 Apr 2010
ISOMETH-D-CHLORALPHENAZ-APAP (ISOMETHEPT/ACETAMINOP/DICHLPHN), 65-325-100, CAPSULE, ORAL, AMNEAL PHARMACE, 100 ea. BOTTLE	Active		5 of 5	30 Aug 2009
NECON (NORETHINDRONE-ETHINYL ESTRAD), 1 MG-35MCG, TABLET, ORAL, WATSON LABS, 28 ea. BLIST PACK	Active		12 of 12	30 Aug 2009
FLUTICASONE PROPIONATE (FLUTICASONE PROPIONATE), 50 MCG, SPRAY SUSP, NASAL, APOTEX CORP, 16 g AER W/ADAP	Active		1 of 1	03 May 2009
FEXOFENADINE HCL (FEXOFENADINE HCL), 180 MG, TABLET, ORAL, DR.REDDY'S LAB, 500 ea. BOTTLE	Active		1 of 1	03 May 2009
CEPHALEXIN (CEPHALEXIN MONOHYDRATE), 500 MG, CAPSULE, ORAL, TEVA USA, 500 ea. BOTTLE	Active		NR	03 May 2009
BUSPIRONE HCL (BUSPIRONE HCL), 10 MG, TABLET, ORAL, MYLAN, 100 ea. BOTTLE	Active	Sig	1 of 1	05 Jan 2009

LMP: 25 Jan 2010. Date Basis: unknown.

Injury/Accident Written by TAYLOR,JACQUELINE @ 01 Sep 2010 1328 PDT

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID/
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS,MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
 Prescribed by GSA and ICMR
 FIRMR (41 CFR) 201-45.505

01 Sep 2010 1319

Facility: Weed ACH Fort Irwin, CA

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

Date of Accident/Injury: 19 Aug 2010

Place of Accident/Injury: patient's residence

Related Cause Code(s): OA-Other Accident

SO Note Written by TAYLOR,JACQUELINE @ 01 Sep 2010 1319 PDTChief complaint

The Chief Complaint is: Depression and anxiety due to rape.

Reason for Visit

Follow-up.

Referred here

By Command [], Self [X], Emergency Department [], Medical [], Legal [], Other [].

History of present illness

The Patient is a 30 year old female.

She reported: No military service branch and status was not specified.

Patient reported she is unable to function at her normal level. she reported she followed up with psychiatrist and was prescribed meds, but reports she is still unable to sleep often. Patient reported having nightmares at times, is fearful, can't go outside and conduct household duties or cook. she reports memory loss and inability to concentrate. Patient is expressing a lot of sadness. patient's feelings regarding her rape was explored and homework of journaling was assigned.

Visit related to Deployment No [X], Yes [], Details [].

Subjective

Limits of Confidentiality Reviewed with patient, patient verbally acknowledged understanding and signature obtained..

Physical findings

Judgment: Good [], Fair [], Poor [] ~TREATMENT PLAN (JCAHO Std. PC.4.10) ~

Patient Strengths: Educated; Motivated for Treatment ~

Barriers to treatment: ~

Problem(s)~1.

PTSD due to rape

2. lack of sleep~Objective(s) (by problem number)~1.

reduce PTSD symptoms

2.

increase sleep~Interventions (by problem number) ~1.

exploring traumatic event

2.

journaling.

General appearance:

° Normal.

Neurological:

° No hallucinations. ° Mental status was normal.

Speech: ° Normal. ° Sufficient nonverbal communication skills were demonstrated.

Psychiatric Exam:

Appearance: ° Tired.

Demonstrated Behavior: ° Behavior demonstrated no abnormalities.

Attitude: ° Not abnormal.

Mood: ° Depressed. ° Fearful. ° Anxious.

Affect: ° Full-ranging. ° Sad. ° Tearful. - from: Patient reported having nightmares at times.

Thought Processes: ° Not impaired.

Thought Content: ° Revealed no impairment. ° Insight was intact. ° No suicidal ideation. ° No suicidal plans. ° No suicidal intent. ° No homicidal ideations. ° No homicidal plans. ° No homicidal intent.

Spiritual assessment:

° Faith provides strength and comfort.

A/P Written by TAYLOR,JACQUELINE @ 01 Sep 2010 1328 PDT

1. Post-traumatic stress disorder

2. Raped

Disposition Written by TAYLOR,JACQUELINE @ 01 Sep 2010 1328 PDT

Released w/o Limitations

Follow up: as needed. - Comments: in one week

Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding.

60 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care.

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID/
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS,MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRMR (41 CFR) 201-45.505

01 Sep 2010 1319

Facility: Weed ACH Fort Irwin, CA

Clinic: Mental Health Weed ACH

Provider: TAYLOR, JACQUELINE

Signed By TAYLOR, JACQUELINE (Licensed Clinical Social Worker) @ 01 Sep 2010 1328

Name/SSN: **HAJI, HOUDA**
FMP/SSN:
DOB: **08 Apr 1980**
PCat: **A41 USA FAM MBR AD**
MC Status:
Insurance: **No**

Sex: **F**
Tel H:
Tel W:
CS:
Status:

Sponsor/SSN: **BELKHATIR, KHALIE**
Rank: **SPECIALIST**
Unit: **WJTEAA (0051 SC CO 51ST INT TRANS)**
Outpt Rec. Rm:
PCM: **ROBERTS, MICAH J**
Tel. PCM:

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STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRMR (41 CFR) 201-45.505

Patient: CHAJI, HOUDA
Treatment Facility: WEED ACH
Patient Status: Outpatient

Date: 27 Aug 2010 1009 PDT
Clinic: PSYCHIATRY WACH

Appt Type: WELL
Provider: JOHNSON, DAVID E

Reason for Appointment:

LMP: 25 Jan 2010. Date Basis: unknown.

A/P Written by JOHNSON, DAVID E @ 27 Aug 2010 1101 PDT

1. ACUTE STRESS DISORDER

Procedure(s): -Psychiatric Evaluation Comprehensive Examination x 1

Disposition Written by JOHNSON, DAVID E @ 27 Aug 2010 1101 PDT

Released w/o Limitations

Note Written by JOHNSON, DAVID E @ 27 Aug 2010 1101 PDT

Weed MEDDAC Behavioral Health Department Psychiatric H+P

The patient's identity was verified via full name and date of birth.

The patient signed and verbalized with this provider understanding of the Weed MEDDAC Privacy Act Statement, Limits of Confidentiality and Informed Consent to Treatment.

ID

30 yo married female DEP referred from SW for acute stress.

HPI

The pt was recently assaulted by her neighbor, who is husband with a good friend of hers, and then threatened to stay quiet or be killed. The pt's husband returned from a school and is with her everyday now. She feels that her life has been taken away from her, her husband's career damaged, and nothing will ever be normal again. She reports severe insomnia with frequent nightmares about being killed. She cannot leave the house and sometimes secludes herself in the bathroom. She does not want her husband to leave the house. The neighbor is back in his house, which causes constant anxiety. She reports significant amnesia for the assault and threat, and worries that she could not remember things for CID either. She feels irritable at home and "nervous" all the time. She has recently starting hearing a strange buzzing outside her ear, like an insect, and asks if this is normal.
+derealization/depersonalization. She denies SI or HI.

PMH/PSH

none

MEDS

none

Medication history was reviewed.

ALLERGIES

NKDA

SUBST HX

Alcohol use: rare use at social events, 1 drink

Drug abuse: none

PSYCH HX

none

FAMILY HX

None

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
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FIRMR (41 CFR) 201-45.505

27 Aug 2010 1010

Facility: Weed ACH Fort Irwin, CA

Clinic: Psychiatry Weed ACH Provider: JOHNSON, DAVID E

LEGAL HISTORY

None

PAIN

No pain issues noted. Pain is 0 out of 10 today.

NUTRITION

No nutritional needs identified.

EDUCATION

No educational needs identified.

RELIGION AND SPIRITUALITY

Religion and spiritual orientation were assessed.

SOCIAL AND DEVELOPMENTAL HX

No history of abuse or trauma.

MSE

Appearance: appropriately dressed and groomed.

Movement: no psychomotor retardation or agitation

Eye Contact: fair; she cried often and then would avoid eye contact

Speech Rate/Volume: normal tone; normal rate.

Interaction with Examiner: interactive, smiling at times, tearful and tremulous at other times.

Mood: anxious and depressed

Affect: constricted

Judgment: good

Insight: fair

Thought Processes: Linear, logical, goal-directed

Thought Content:

No AH/VH/delusions.

SI: no thoughts, plan, or intent

HI: none

RELEVANT LABS AND STUDIES

None.

ASSESSMENT

Pt with recent assault, going through the expected response. She presently meets criteria for acute stress disorder due to the dissociative sx's with avoidance, flashbacks, and hypervigilance. I will initiate an SSRI and sleep med for her. She will continue in therapy. Pt was reassured that symptoms will dissipate with time and that she can regain normal function again, with or without our assistance.

Suicide risk was assessed as low.

Protective factors included no SI, no hopelessness, no h/o suicide attempts, husband's presence

Risk factors included anxiety and fear,

DIAGNOSIS

Axis I Acute stress disorder

Axis II deferred

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRMR (41 CFR) 201-45.505

27 Aug 2010 1010

Facility: Weed ACH Fort Irwin, CA Clinic: Psychiatry Weed ACH Provider: JOHNSON, DAVID E

Axis III none
 Axis IV sexual assault
 Axis V GAF 60

PLAN:

Start Zoloft 50 mg daily.
 Start trazodone 50-150 mg at bedtime PRN insomnia.

Verbal Medication consent was obtained and patient verbalized understanding of diagnosis and target symptoms, possible benefits/intended outcome of treatment, possible risks and side effects, possible alternatives, possible results of not taking medication, possibility that medication may need to be adjusted over time, right to participate in treatment and right to withdraw voluntary consent for medications at any time.

Continue seeing Ms Taylor.

Patient was seen for 35 minutes.

Education was provided in the form of medication mechanism of action
 The patient demonstrated understanding of the education received.

Follow up in 2 weeks or sooner for side effects.

Master problem list was updated.

Med reconciliation completed. Psychiatric meds reviewed with patient (or parents as applicable); patient instructed to obtain updated med list from pharmacy and to destroy any old lists.

Signed By JOHNSON, DAVID E (Psychiatrist, Schweinfurt Behavioral Health Clinic) @ 27 Aug 2010 1101

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
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Patient: CHAJI, HOUDA
Treatment Facility: WEED ACH
Patient Status: Outpatient

Date: 25 Aug 2010 0915 PDT
Clinic: MENTAL HEALTH WACH

Appt Type: WELL
Provider: TAYLOR,JACQUELINE

Reason for Appointment: Intake

LMP: 25 Jan 2010. Date Basis: unknown.

Injury/Accident Written by TAYLOR,JACQUELINE @ 25 Aug 2010 1227 PDT

Date of Accident/Injury: 18 Aug 2010

Place of Accident/Injury: patient's residence

Related Cause Code(s): OA-Other Accident

SO Note Written by TAYLOR,JACQUELINE @ 25 Aug 2010 1200 PDT

Chief complaint

The Chief Complaint is: Depression with anxiety and not sleeping due to recent sexual assault.

Reason for Visit

Intake.

Referred here

By Command [], Self [X], Emergency Department [], Medical [], Legal [], Other [].

History of present illness

The Patient is a 30 year old female.

She reported: Feeling tired (fatigue).

Decreased appetite.

Decreased concentrating ability.

Anxiety, depression, sleep disturbances, loss of interest in activities, anhedonia, low self-esteem, feeling guilty, being upset by problems at home or work, overly passive in a relationship, and inability to express anger.

No military service branch and status was not specified.

Patient reports she was sexually assaulted by her neighbor a week ago. she reports not sleeping, not eating, reports fear/anxiety, depression, headaches, nightmares, intimacy/shame issues and memory and concentration problems. she reports she is married with 2 young children, and has been married for almost 10 years. she reports she was raised by both her parents in Moroco and is one of 12 siblings, which she is close to them. Patient reports having "God and husband" as her support system. she denied past physical/emotional abuse. Intake was conducted and patient discussed emtoinal/mental/physical pain from assault. Patient indicated that this issue is currently being investigated by CID and she was referred by sexual assault coordinator to undersigned due to cultural/language concerns.

Visit related to Deployment No [X], Yes [], Details [].

Past medical/surgical history

Reported History:

Medical: Past medical history was reported by the patient Medical Problems: Yes [], No [X], Details []

Past Surgeries: Yes [], No [X], Details [].

Reported medications: Not taking OTC medications.

no past medical/surgical history [use for free text].

Previous therapy

No history of psychiatric therapy; No history of herbal medicines

Personal history

Personal history: No recent legal problems.

Behavioral history: No caffeine use.

Alcohol: A social drinker.

Drug use: Not using drugs.

Home environment: No difficulty understanding spoken English. Native language Arabic. The cultural background is Arab.

Abuse / neglect: No abuse/neglect. Sexual contact or exposure without consent.

Education: Currently in school.

Military: No military history reported.

Work: No work history reported and no job problems or incidents.

Financial status: Financial status was unknown.

Activities: No recreational activities and no leisure activities.

Sexual: Sexual history My sex life is Good [], Fair [], Poor [X], Abstinent []

Any sexual concerns? No [], Yes [X], Details [X]

patient reports that do to assault, she is unable to have sex with husband, and can not have him see her naked.

Have you ever been sexually abusive to others? No [], Yes [X], Details [X]

patient reports she was raped by her neighbor last week.

Do you feel gulty about any past sexual experiences? No [X], Yes [], Details []

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID/
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS,MICAH J
Insurance: No		Tel. PCM:

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Do you engage in any risky behaviors? No [X], Yes [], Details []

- Not sexually active and not high-risk.

Functional status: Psychosocial support is sufficient.

Family history

No alcoholism

No mental illness (not retardation) No [], Yes [], Details []

No remarkable marital history.

Subjective

Limits of Confidentiality Reviewed with patient, patient verbally acknowledged understanding and signature obtained..

Review of systems

Psychological symptoms: A desire to continue living and no previous suicide attempt. No violent behavior and no disturbing or unusual thoughts, feelings, or sensations.

Physical findings

Judgment: Good [], Fair [], Poor [] --TREATMENT PLAN (JCAHO Std. PC.4.10) ~

Patient Strengths: Educated; Motivated for Treatment ~

Barriers to treatment: ~

Problem(s)~1.

Anxiety and depression

2.

rape

3.

not sleeping~Objective(s) (by problem number)~1.

decrease level of depression and anxiety

2.

allow patient to talk about rape

3.

increase sleep~Interventions (by problem number) ~1.

intake

2.

intake

3.

intake.

General appearance:

• Patient appeared uncomfortable.

Neurological:

• No hallucinations. • Mental status was normal.

Speech: • Normal. • Sufficient nonverbal communication skills were demonstrated.

Psychiatric Exam:

Appearance: • Tired.

Demonstrated Behavior: • Behavior demonstrated no abnormalities.

Attitude: • Not abnormal.

Mood: • Unhappy. • Depressed. • Showed guilt. • Fearful. • Anxious. • Concerned.

Affect: • Somber. • Sad. • Tearful.

Thought Processes: • Not impaired.

Thought Content: • Revealed no impairment. • Insight was intact. • No suicidal ideation. • No suicidal plans. • No suicidal intent. • No homicidal ideations. • No homicidal plans. • No homicidal intent.

Spiritual assessment:

• Faith provides strength and comfort.

A/P Last Updated by TAYLOR,JACQUELINE @ 25 Aug 2010 1227 PDT

1. POST-TRAUMATIC STRESS DISORDER

2. raped

Disposition Last Updated by TAYLOR,JACQUELINE @ 25 Aug 2010 1229 PDT

Released w/o Limitations

Follow up: as needed. - Comments: in one week with therapist and referred to Psychiatriis for meds evaluation this week.

Discussed: Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding. 100 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care.

Note Written by TAYLOR,JACQUELINE @ 25 Aug 2010 1153 PDT

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS,MICAH J
Insurance: No		Tel. PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE

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risk assessment
risk assessment

Patient is a 29 year old female, Moroccan ethnicity, married. Patient denied any homicide/suicide ideations. Patient reports no previous suicide attempts. reports having a good support system with husband and family. No legal or financial stressors, but has relational stressors. patient reported she was sexually assaulted by neighbor a week ago. patient denied chronic alcohol/drug use. Patient appears to be committed to treatment and agrees to engage in therapy. risk is minimal at this time.

Signed By TAYLOR, JACQUELINE (Licensed Clinical Social Worker) @ 25 Aug 2010 1229

Note Written by THURSTON,ASHLEY E @ 25 Aug 2010 1534 PDT
(Added after encounter was signed.)

Name/SSN: HAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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FIRMR (41 CFR) 201-45.505

WEED ARMY COMMUNITY HOSPITAL
DEPARTMENT OF MENTAL HEALTH, FORT IRWIN, CA 92540
PATIENT INFORMATION, PSYCHOSOCIAL HISTORY IN CASE

1. NAME (LAST, FIRST, MIDDLE INITIAL) CHAJI, HOUDA
2. SSN: 2-30-1980
3. DATE OF BIRTH: 08 APR 1980
4. GRADE: A41 USA FAM MBR AD
5. STATUS: MC Status: No
6. SEX: F
7. RACE: [unclear]
8. RELIGION: [unclear]
9. MARITAL STATUS: [unclear]
10. DEPARTMENT: [unclear]
11. UNIT: [unclear]
12. ROOM: [unclear]
13. PHONE: [unclear]
14. ADDRESS: [unclear]
15. CITY: [unclear]
16. STATE: [unclear]
17. ZIP: [unclear]
18. EMPLOYER: [unclear]
19. OCCUPATION: [unclear]
20. EDUCATION: [unclear]
21. HIGHEST GRADE: [unclear]
22. SERVICE NUMBER: [unclear]
23. GRADE: [unclear]
24. STATUS: [unclear]
25. DATE OF ENTRY: [unclear]
26. DATE OF DEPARTURE: [unclear]
27. REASON FOR DEPARTURE: [unclear]
28. CURRENT ASSIGNMENT: [unclear]
29. DUTY STATION: [unclear]
30. REPORTING SUPERVISOR: [unclear]
31. TYPE OF SERVICE: [unclear]
32. TYPE OF ASSIGNMENT: [unclear]
33. TYPE OF DEPLOYMENT: [unclear]
34. TYPE OF DEPLOYMENT: [unclear]
35. TYPE OF DEPLOYMENT: [unclear]
36. TYPE OF DEPLOYMENT: [unclear]
37. TYPE OF DEPLOYMENT: [unclear]
38. TYPE OF DEPLOYMENT: [unclear]
39. TYPE OF DEPLOYMENT: [unclear]
40. TYPE OF DEPLOYMENT: [unclear]
41. TYPE OF DEPLOYMENT: [unclear]
42. TYPE OF DEPLOYMENT: [unclear]
43. TYPE OF DEPLOYMENT: [unclear]
44. TYPE OF DEPLOYMENT: [unclear]
45. TYPE OF DEPLOYMENT: [unclear]
46. TYPE OF DEPLOYMENT: [unclear]
47. TYPE OF DEPLOYMENT: [unclear]
48. TYPE OF DEPLOYMENT: [unclear]
49. TYPE OF DEPLOYMENT: [unclear]
50. TYPE OF DEPLOYMENT: [unclear]

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID/
FMP/SSN: :	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE
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STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRMR (41 CFR) 201-45.505

WHICH OF THE FOLLOWING SYMPTOMS ARE YOU CURRENTLY EXPERIENCING?

SYMPTOM		SYMPTOM	
<input type="checkbox"/> 1. LOSS OF INTEREST IN ACTIVITIES	<input type="checkbox"/> 2. FEELING OF FATIGUE	<input type="checkbox"/> 3. LOSS OF APPETITE	<input type="checkbox"/> 4. WEIGHT LOSS
<input type="checkbox"/> 5. SLEEPING PROBLEMS	<input type="checkbox"/> 6. NIGHTMARE DREAMS	<input type="checkbox"/> 7. EXCESSIVE SWEATING	<input type="checkbox"/> 8. PALPITATIONS
<input type="checkbox"/> 9. HEADACHE	<input type="checkbox"/> 10. DIZZINESS	<input type="checkbox"/> 11. BLURRED VISION	<input type="checkbox"/> 12. HEARING PROBLEMS
<input type="checkbox"/> 13. TINGLING OR NUMBNESS	<input type="checkbox"/> 14. MUSCLE TENSION	<input type="checkbox"/> 15. STOMACH PROBLEMS	<input type="checkbox"/> 16. CONSTIPATION
<input type="checkbox"/> 17. DIARRHEA	<input type="checkbox"/> 18. URINARY PROBLEMS	<input type="checkbox"/> 19. MENSTRUATION PROBLEMS	<input type="checkbox"/> 20. DEPRESSION
<input type="checkbox"/> 21. ANXIETY	<input type="checkbox"/> 22. PHOBIA	<input type="checkbox"/> 23. PERSONALITY CHANGES	<input type="checkbox"/> 24. SUICIDAL THOUGHTS
<input type="checkbox"/> 25. SUICIDE ATTEMPT	<input type="checkbox"/> 26. OTHER	<input type="checkbox"/> 27. OTHER	<input type="checkbox"/> 28. OTHER



Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
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1. The patient is a 31-year-old female with a history of bipolar disorder, currently on lithium carbonate 900 mg daily. She reports a recent episode of mania characterized by decreased need for sleep, increased energy, and racing thoughts. She has been hospitalized for 10 days and is currently on a medical ward. Her current symptoms include irritability, decreased need for sleep, and increased energy. She has a history of two previous hospitalizations for bipolar disorder. Her last psychiatric evaluation was 12 months ago. She is currently on a medical ward and is being treated with lithium carbonate 900 mg daily. Her current symptoms include irritability, decreased need for sleep, and increased energy. She has a history of two previous hospitalizations for bipolar disorder. Her last psychiatric evaluation was 12 months ago. She is currently on a medical ward and is being treated with lithium carbonate 900 mg daily.



1.12

Name/SSN: HAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
PCat: A41 USA FAM MBR AD	CS:	Outpt Rec. Rm:
MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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STANDARD FORM 600 (REV. 5)
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FIRMR (41 CFR) 201-45.505

MEDICAL RECORD SUPPLEMENTAL MEDICAL DATA

DATE: 08/25/10

NAME: HOUDA, CHAJI

SSN: [REDACTED]

DOB: 08 APR 1980

PCAT: A41 USA FAM MBR AD

MC STATUS: [REDACTED]

INSURANCE: No

SEX: F

TEL H: [REDACTED]

TEL W: [REDACTED]

CS: [REDACTED]

STATUS: [REDACTED]

SPONSOR/SSN: BELKHATIR, KHALID/

RANK: SPECIALIST

UNIT: WJTEAA (0051 SC CO 51ST INT TRANS)

OUTPT REC. RM: [REDACTED]

PCM: ROBERTS, MICAH J

TEL. PCM: [REDACTED]

DA FORM 4700, 1 FEB 2003

REPLACES DA FORM 4700, 1 FEB 2003

Name/SSN: CHAJI, HOUDA

Sex: F

Sponsor/SSN: BELKHATIR, KHALID/

FMP/SSN:

Tel H:

Rank: SPECIALIST

DOB: 08 Apr 1980

Tel W:

Unit: WJTEAA (0051 SC CO 51ST INT TRANS)

PCat: A41 USA FAM MBR AD

CS:

Outpt Rec. Rm:

MC Status:

Status:

PCM: ROBERTS, MICAH J

Insurance: No

Tel. PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE

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FIRMR (41 CFR) 201-45.505

MEDICAL RECORD SUPPLEMENTAL MEDICAL DATA

DA FORM 4700, FEB 1983

1. NAME (Last, First, Middle Initial): CHAJI, HOUDA

2. SSN: [REDACTED]

3. GRADE: [REDACTED]

4. TITLE: [REDACTED]

5. ORGANIZATION: [REDACTED]

6. ADDRESS: [REDACTED]

7. CITY: [REDACTED]

8. STATE: [REDACTED]

9. ZIP: [REDACTED]

10. TELEPHONE: [REDACTED]

11. DATE OF BIRTH: 08 Apr 1980

12. SEX: F

13. RACE: [REDACTED]

14. ETHNICITY: [REDACTED]

15. RELIGION: [REDACTED]

16. MARITAL STATUS: [REDACTED]

17. NUMBER OF DEPENDENTS: [REDACTED]

18. DEPENDENT NAMES: [REDACTED]

19. DEPENDENT DATES OF BIRTH: [REDACTED]

20. DEPENDENT SEXES: [REDACTED]

21. DEPENDENT ETHNICITIES: [REDACTED]

22. DEPENDENT RELIGIONS: [REDACTED]

23. DEPENDENT MARITAL STATUSES: [REDACTED]

24. DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

25. DEPENDENT DEPENDENT NAMES: [REDACTED]

26. DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

27. DEPENDENT DEPENDENT SEXES: [REDACTED]

28. DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

29. DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

30. DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

31. DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

32. DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

33. DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

34. DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

35. DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

36. DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

37. DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

38. DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

39. DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

40. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

41. DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

42. DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

43. DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

44. DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

45. DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

46. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

47. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

48. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

49. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

50. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

51. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

52. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

53. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

54. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

55. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

56. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

57. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

58. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

59. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

60. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

61. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

62. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

63. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

64. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

65. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

66. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

67. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

68. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

69. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

70. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

71. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

72. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

73. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

74. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

75. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

76. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

77. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

78. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

79. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

80. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

81. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

82. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

83. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

84. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

85. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

86. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

87. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

88. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

89. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

90. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

91. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

92. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

93. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

94. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NUMBER OF DEPENDENTS: [REDACTED]

95. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT NAMES: [REDACTED]

96. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DATES OF BIRTH: [REDACTED]

97. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT SEXES: [REDACTED]

98. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT ETHNICITIES: [REDACTED]

99. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT RELIGIONS: [REDACTED]

100. DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT DEPENDENT MARITAL STATUSES: [REDACTED]

Name/SSN: CHAJI, HOUDA	Sex: F	Sponsor/SSN: BELKHATIR, KHALID
FMP/SSN:	Tel H:	Rank: SPECIALIST
DOB: 08 Apr 1980	Tel W:	Unit: WJTEAA (0051 SC CO 51ST INT TRANS)
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MC Status:	Status:	PCM: ROBERTS, MICAH J
Insurance: No		Tel. PCM:

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