Case 2:17-cv-00167-PLM-TPG ECF No. 1-5 filed 10/05/17 PageID.43 Page 1 of 810 3 17 Extloit 2-11-B TO: STEP III BPPECIJ DUREDDE'S OFFICE (GRIEVANCE AND P.O. BJX LANSING MICHISGIP 48909 BPPECIS SECTION TO: WHOM +HIS LEATER MAY CONCERN BRE KERAbley MR. RICHARD ZUSSELL DECK MK. RUSSELL ON 719.17 I SENT A SHEP 1-3 GAILLANCE ON HECTH COKE KOX WHENHOME (DE 16ERUTE MEDIKKELENCE to DE SECIOIS MEDICAL NED AND Have NOT RESERED MY STEP 3 ZESPORSE GOCK, GRIZUARCE I DEN HIKIEC NUMBER 15 ANIF-17-06-1437-1284 Three BRISSNE OFFICIAL MAINLY the OFFICER WHO Passess out Mail well throw A PRISONERS Step 3 & Esporese Away methe thask can I Have no very of knowling IF Your Hails SENT H OIL MOST IMITALEING & Caulsvit Bred NEED my StEP 3 PEDRORE Steas 5 50 I can sent this to the UNITEd states Distillet Court to VERIKISY EXHAUSTER OF MY Administrative Silisvanee mulles with the court. AND IF You Huve SENT IT I NEVER ZECENTED MY BID Step RESPORESE ON HELTH CONE HMIK 17-08-1457. GNENAMEL - REM (Please Reproved thank you

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	HEALTH CARE REQUEST FXHIGHT K- 1 INJULIES ONE HUL
- 4*	PRISONER: COMPLETE SECTIONS A THROUGH D
1	A NAME: Mays FACILITY ANIX
N	NUMBER: 218 [0] LOCK: 3:244 DATE: 5-25-17
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2	appeal you may make regarding the Department's decision to charge for the care. The set Difference of the review any
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	I have read Section D above, or it has been read to me and I understand that I will be charged \$5.00 for my health care visit unless it is for one of the reasons listed below in Section F. If I am charged for this visit, I agree that the \$5.00 may be taken from my account.
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4835-7549 VICHIGAN DEPAR 71 ALT MODE OR REM TORS BECE NOTE 15 Here 10/05/17 Page D.45 Page 3 Opt 349 11/05
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A NAME: Mays FACILITY: AME FACILITY: AME
NUMBER: 218101 LOCK: 3 214 DATE: 5-25-17 M
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and required follow-up care) for injuries that are work-related as documented by the prisoner's work supervisor Woz to the Result
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	Case 2:17-cv-00167-PLM-TPG ECF No. 1-5 filed 10/05/17 PageID.46 Page 4 of 8 4835-7549 MICHIGAN DEPARTMENT OF CORRECTIONS-Bureau of Health Care	;
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1	MICHIGA OF ARTMEN 926 COLOR FOR SEE No 11 A 10/05/17 Page D.48 Page 6 of & 11/05
	HEALTH CARE REQUEST
	PRISONER: COMPLETE SECTIONS A THROUGH D
	A NAME: Mays EXHIGITK-S FACILITY: HIT
	NUMBER: 21910 (LOCK: 3-214 DATE: 5-28-17
	B. This Health Care Request is for the following (check one or more): Health Record Copies
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	C. I have the following problems/symptoms: ON 3-28-17 DUKING MOKATING WILD POUNDS
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2.1	 for injuries that are work-related as documented by the prisoner's work supervisor requested for testing for HIV, STD's, infestations, or reportable communicable diseases
	requested for evaluation, consultation, or treatment of a mental health need
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	Signature: Date: Date:
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	MICHIGAN DEPART KENPERCORRECTIONS EEF No of 15 filed 10/05/17 PageID.49 Page 7 of 8 4835-7549
	HEALTH CARE REQUEST
	PRISONER: COMPLETE SECTIONS A THROUGH D
1121	A NAME: Mays RXHIGITK-6 FACILITY: Hujp
the second	NUMBER: 21811 LOCK: 3-214 DATE: 5-29-17 61
	B. This Health Care Request is for the following (check one or more): Health Record Copies
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4.17	C. I have the following problems/symptoms: ON-5-29-17. I. autas called out
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	to A doctor about INTINES SUSTAINED ON 5-25-17
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2	for one of the reasons listed below in Section F. If I am charged for this visit, I agree that the \$5.00 may be taken from my account.
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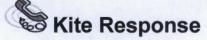
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Case 2:17-cv-00167-PLM-TPG ECF No. 1-5 filed 10/05/17 PageID.50 Page 8 of 8

MICHIGAN DEPAR MENT OF CORRECTIONS



EXA1610 X-7

Patient Name Date Received Time Received Taken By Date Initiated MARCUS MAYS 05/24/2017 00:00 Trudy A. Duquette, RN 05/24/2017 Age 53 Years

Action & Resolution

DateTimeUser05/24/201711:31 PMTrudy A. Duquette, RN

Detail Schedule Nurse Sick Call approx 05/26/2017 with RN by Trudy A. Duquette, RN. Reason: Finger swell and numb, shoulder pain, and "ongoing problems". Comments: Nurse Sick Call, Lock 3-214.

EXH1617K-7

<u>Other</u>

Reason: Finger swell and numb, shoulder pain, and "ongoing problems".

SUPPORTURES

Comment: Nurse Sick Call, Lock 3-214.

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