

2017 March 31st onwards till November 2018,

- **Sharp Hospital**
 - **Dr. Nicholas Dembitsky**

Dr. Nicholas Dembitsky becomes my internal medical physician in San Diego for the duration that I live in San Diego. Though Dr. Dembitsky is aware that I do have Multiple Sclerosis and states the quality of the brain and spine lesions in his reports he is unable to prescribe the medications for MS since the prescriptions for the medications must come from specifically a neurologist.

The neurologists in the hospital (Dr. Raffer and Dr. Dominick deny treatment and write false reports to restrict medical treatment). Dr. Dembitsky understands that the medications are needed and that I get them from abroad at personal cost. Dr. Dembitsky mentions the features of the condition and the quality of the condition in many of the reports.

He also understands that the neurologists in the hospital are denying treatment for a clear medical findings of MS.

History & Physical.

Name: JANA, NARENDRA NIRMAL
MRN#: 4723442

DOB: 10/27/1984
Gender: M

Note Owner: NICHOLAS PHILLIP LEON DEMBITSKY M.D.
Specialty: Internal Medicine
Date of Encounter: 03/31/2017

Chief Complaint

NARENDRA is a male age 32, presents for New patient physical exam.

History of Present Illness

32-year-old male presents to establish care. Overall doing well. However does have long-standing issue with what sounds like MS. Patient does present today with multiple imaging studies showing enhancing lesions in MRI brain as well as L-spine and T-spine. LP was never done however currently on interferon beta 1 alpha; every 2 days. With significant improvements. Currently moved to San Diego from Massachusetts due to job. Currently doing IT engineering. Does request double drug test for his job. Otherwise no specific complaints aside from patient's MS symptoms which seem to be at bay currently.

Current Meds

Medication Name	Instruction
Rebif 44 MCG/0.5ML Subcutaneous Solution Prefilled Syringe	

Social History

Exercises rarely (Z78.9)
Never a smoker
Single

Review of Systems

constitutional, allergies, neurological, psychiatric, ENT, eye, cardiovascular, respiratory, hemelymph, gastrointestinal, genitourinary, musculoskeletal, skin and endocrine review of systems are normal except as stated in the history of present illness or as noted:

Vitals

Vital Signs

	Recorded: 31Mar2017 10:47AM
Blood Pressure	112 / 68, LUE, Sitting
Blood Pressure Method	Manual
Heart Rate	88
Respiration	16

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Dr. Dembitsky states "patient does present today with multiple imaging studies showing enhanced lesions in MRI brain as well as L-spine and T-spine."

Patient: JANA, NARENDRA NIRMAL
MRN: 4723442

Date of Encounter: 03/31/2017

Height	5 ft 7 in
Weight	115 lb
BMI Calculated	18.01
BSA Calculated	1.6
O2 Saturation	99

Physical Exam

General: Gen.: Alert and oriented. No acute distress.
Skin: No rashes.
HEENT: Atraumatic. Supple.
Cardiovascular: Regular rate and rhythm.
Lungs: Clear to auscultation and percussion.
Back: No CVA tenderness.
Abdomen: Soft. No organomegaly. No masses. Nontender.
Extremities: No cyanosis. No clubbing. No edema.
Neuro: 1+ patellar Lt.

Results/Data

Clinical Quality Assessment

	Goal	31Mar2017
Fall Screening		
Provider Action Taken (Positive Fall Screening)		
PHQ2 Screening Score (0-6)		
PHQ9 Screening Score (0-27)		
Provider Action Taken (Positive PHQ9)		
Provider Comments - PHQ9 (Optional)		
Adult - Provider Action Taken (BMI Outside Normal Parameters)		
Pediatric - Provider Action Taken (BMI)		
Provider Comments - BMI (Optional)		
Glaucoma Screening		
Glaucoma Screening Performed By		
Retinal or Dilated Eye Exam		

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Patient: JANA, NARENDRA NIRMAL
MRN: 4723442

Date of Encounter: 03/31/2017

Eye Exam Performed By	
BMI Calculated	18.01

Assessment

1. Multiple sclerosis (G35)

Multiple sclerosis: As per patient. Imaging available does look significant for active disease. Currently on interferon alpha. We'll send neurology for ongoing care. Patient wishes to hold off on getting records until he sees his neurologist.

Basic fasting labs.

Patient also requests double confirmatory drug screen as per his job request.

Follow-up as needed, or 6-12 months.

Plan

Health Maintenance

- CBC with Differential; Status:Hold For - Manual Activation by Lab; Requested for:31Mar2017;
- CMP Fasting; Status:Hold For - Manual Activation by Lab; Requested for:31Mar2017;
- Hgb A1C; Status:Hold For - Manual Activation by Lab; Requested for:31Mar2017;
- Lipid Profile; Status:Hold For - Manual Activation by Lab; Requested for:31Mar2017;
- Microalb Random Ur; Status:Hold For - Manual Activation by Lab; Requested for:31Mar2017;
- TSH with Free T4 Reflex; Status:Hold For - Manual Activation by Lab; Requested for:31Mar2017;
- Urine Drug Screen Presumptive; [Do Not Release]; Status:Hold For - Manual Activation by Lab; Requested for:31Mar2017;

Multiple sclerosis

- Neurology Consult Evaluation and Treatment. Evaluate and Treat. History of multiple sclerosis currently on interferon beta 1A. With significant improvement in his symptoms. Patient has enhancement in temporal C-spine and L-spine on MRI. Status: Need Information - Required information Requested for: 31Mar2017

End of Encounter Meds

Medication Name	Instruction
Rebif 44 MCG/0.5ML Subcutaneous Solution Prefilled Syringe	

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"Imaging available does look significant for active disease."

Progress Note. FMH

Name: JANA, NARENDRA NIRMAL
MRN#: 4723442

DOB: 10/27/1984

Gender: M

Note Owner: NICHOLAS PHILLIP LEON DEMBITSKY M.D.
Specialty: Internal Medicine
Date of Encounter: 09/06/2018

Chief Complaint

NARENDRA is a male 33 YO, who presents for: Follow-up

Clinical Staff Note

Follow up.

History of Present Illness

33-year-old male here for follow-up of his white matter changes. Patient continues to travel over world. Recently in East Asia in Germany. Injury he picked up a prescription for Ticlidora as well as optic nerve imaging. Presents images today. Which he will try to upload into our medical records. Images seem to be tagged to his name. Does state on new medication feels quite well controlled. Although here today asking for blood work to follow-up on potential side effects of this medication. Which I am happy to place. Discussion on need to follow-up with neurology here in UCSD and redo MRI and possible lumbar puncture to confirm diagnoses.

Would like to upload his CD images to our system. Long discussion on need to follow-up with our neurology department for updated MRIs and lumbar puncture. Patient not wild about the idea.

Allergies

No Known Drug Allergies

Recorded By: GURROLA, DORALICIA; 3/31/2017 10:49:36 AM

Social History

Exercises rarely (Z78.9)

Never a smoker:

Single

Vitals

Vital Signs

	Recorded: 06Sep2018 02:17PM
Blood Pressure	125 / 82, Sitting
Blood Pressure Method	Automatic
Heart Rate	79

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Dr. Dembitsky understood that I had all the medical data and diagnostics to show the need for medications for MS and that I showed the neurologists the data as well (who then subsequently write a false report).

Though the report mentions that I am on "interferon" the medication is limited by the US neurologists so I buy it in Mexico at considerable personal cost. Interferon is typically given in relapse remitting forms of MS and not secondary progressive MS, the drug

was ineffective its infectiveness results in repeated ER appointments due to continued disease progression. The ER appointments in the US result in assault by withholding medications in severe disease states.

SHARP Rees-Stealy Medical Group

Patient: JANA, NARENDRA NIRMAL
MRN#: 4723442

Date of Encounter: 09/06/2018

1. Chronic non-specific white matter lesions on MRI (G03.9)

Currently on Tecfidera. States is helping quite a bit. More than the steroid he was given in the past. Again voiced the need to follow-up with our neurology department and UCSD and undergo proper workup. He Would like to upload images copied from his computer onto our system, which I am apprehensive about, that appears to be from overseas MRIs.

Follow-up after specialist evaluations. Plan

- CBC with Differential; Status:Complete; Done: 06Sep2018 02:51PM
- CMP Non-Fasting; Status:Complete; Done: 06Sep2018 02:51PM
- Hgb A1C; Status:Complete; Done: 06Sep2018 02:51PM
- TSH with Free T4 Reflex; Status:Complete; Done: 06Sep2018 02:51PM

End of Encounter Meds

Medication Name	Instruction
Minocycline HCl - 100 MG Oral Capsule	TAKE 1 CAPSULE DAILY WITH FOOD.
Rebif 44 MCG/0.5ML Subcutaneous Solution Prefilled Syringe	

Signatures

Electronically signed by : MARA VALLE, MA; Sep 6 2018 2:18PM PST (Co-participant)
Electronically signed by : NICHOLAS DEMBITSKY, M.D.; Sep 6 2018 5:44PM PST (Author)

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These medications are helpful but the condition is unpredictable in progressive forms of MS. Its safer to get IV medications to prevent progression.

SHARP Rees-Stealy Medical Group

Progress Note.

Name: JANA, NARENDRA NIRMAL
MRN#: 4723442

DOB: 10/27/1984
Gender: M

Note Owner: NICHOLAS PHILLIP LEON DEMBITSKY M.D.
Specialty: Internal Medicine
Date of Encounter: 10/12/2017

Chief Complaint

NARENDRA is a male age 32, who presents for: Follow up

History of Present Illness

32-year-old male presents with follow-up. Patient has been having long-standing nonspecific white matter changes on MRIs. Has seen neurology historically. Requested LP. Patient aware he needs LP however in the interim he has gone down to Mexico. Most recently went to emergency department Mexico twice. Was given IV loading doses of 1 g methylprednisolone x5 days with improvement in symptoms as per him. Patient was also changed from rebif to gilenya. Patient having great results as per him. Symptoms almost abated completely. Patient currently paying out of pocket. Requests refill through us. Long discussion on need for specialist to prescribe this medication. Patient aware. Patient will think about seeing neurology.

Current Meds

Medication Name	Instruction
Rebif 44 MCG/0.5ML Subcutaneous Solution Prefilled Syringe	

Allergies

No Known Drug Allergies

Recorded By: GURROLA, DORALICIA; 3/31/2017 10:49:36 AM

Social History

Exercises rarely (Z78.9)

Never a smoker

Single

Vitals

Vital Signs

	Recorded: 12Oct2017 01:47PM
Blood Pressure	110 / 60
Blood Pressure Method	Manual
Weight	110 lb
BMI Calculated	17.23

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Dr. Dembitsky often mentions the positive effects of medications in his reports. ER and outpatient medications.

