

02-447-CD
JAMES STEVENSON -vs- PENNSYLVANIA DEPARTMENT OF CORRECTIONS

5/8/02
ORIGIN TO Checked w/CA
C/A + Cindy - said
they do not
3-28-02 have

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON
Petitioner / Plaintiff

V.

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

COMMONWEALTH OF PENNSYLVANIA
COUNTY'S OF CLEARFIELD AND
DAUPHIN

DOCKET NO. 02-447-CO

81 MD 2002

MOTION TO PROCEED IN FORMA PAUPERES

I James Stevenson, hereby states the information concerning my inability to pay the cost of this proceeding pursuant to Rule 561 of Pa.R.APP. PROC., is true and correct, and made subjected to the penalties set forth in 18, Pa. C.S.A. § 4904 relating to unsworn falsification to authorities,

I state under the penalties provided in 18, Pa.C.S.A. 4904 THAT:

I am the petitioner, in the matter within and because of my financial situations, I am unable to pay the fees and costs of this proceeding or any other proceeding hereafter.

The questions to my unemployment to pay the fees and cost in applying judicial actions are true and correct.

I have not been employed due to my incarceration, and not have any income, pensions, annuity, social security benefits, support payments, or my I state no real-estate, stocks, bonds, notes, automobiles or any other valuable property.

I understand that false statements made in this verified statements are subject to the penalties provided by law

I hereby certify this to be a true and attested copy of the original statement filed in this case.

FILED

MAR 22 2002

MAR 22 2002

Attest.

William A. Shaw
Prothonotary/
Clerk of Courts

William A. Shaw
Prothonotary

Respectfully submitted

(s) James Stevenson

James STEVENSON
P.O. Box 1000

HENTZDALE, PA 16698-1000

James STEVENSON

81 MD 2002

DK 9729

P.O. Box 1000
HOUTZDALE, PA 16698-1000

S

Dated 02-06-02

OFFICE OF THE PROTHONOTARY

COMMONWEALTH COURT OF PENNSYLVANIA

P.O. Box 11730

HARRISBURG, PENNSYLVANIA 17108-11730

Dear Prothonotary

Please find Enclosed 1 original and 9 copies of my
Petition for Review and In Nature of civil Action
or Special Relief / potential medical malpractice case
PRELIMINARY INJUNCTION. And 1 original and 9 Summons
To have The Pennsylvania State Police To Serve All defend-
ant's Named ON The Proof of Service. Plus To Serve
A Summons For A witness out side This State of
Pennsylvania. Please have The State Police serve
All Summons and Complaint's To Each Defendant Listed.
Please find 1 original and Two copies for This Honorable
and 7 more Petition For Each Defendant. Thank you
for your time and help in This matter.
My Best wishes to you Always I Remain

Very Truly Yours

(S) James Stevenson

81 MAR 2002

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

COMMONWEALTH OF PENNSYLVANIA

JAMES STEVENSON
Petitioner/Plaintiff

COUNTY OF CLEARFIELD
AND DAUPHIN

V.

DOCKET NO.

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

PETITION FOR REVIEW IN NATURE OF
CIVIL ACTION OR SPECIAL RELIEF, POTENTIAL
MEDICAL MALPRACTICE CASE/PRELIMINARY INJUNCTION

TO THE HONORABLE JUDGE OF SAID COURT:

Now comes Petitioner James Stevenson, Pro-Se
Respectfully Request This Honorable Court To Issue
A medical ORDER(S) OR OTHER(S) AGAINST THE ABOVE
RESPONDENTS FOR RELIEF SPECIFIED BELOW. THIS COURT
HAS ORIGINAL JURISDICTION IN THIS MATTER AND GRANTED
BY 42 PA. C.S. § 761 IN SUPPORT OF THIS REQUEST,
THE PETITIONER STATES THE FOLLOWING.

1) THE PETITIONER, JAMES STEVENSON, IS AN INMATE
CURRENTLY INCARCERATED AT THE STATE CORRECTIONAL
INSTITUTION AT SCI HOUTZDALE, LOCATED AT 2007
STATE ROUTE, P.O. BOX 1000 HOUTZDALE PENNSYLVANIA
16698-1000 CLEARFIELD COUNTY.

- 2) The Respondent Pennsylvania Department of Corrections, IS A STATE — wide Jurisdiction And has its Principle Office located at 2520 Lisburn Road Camp Hill, Pennsylvania 17001-0598 County of Dauphin.
- 3) The Respondent, Jeffery Beard, Secretary of Pennsylvania Department of Corrections Located at 2520 Lisburn P.O. Box 598 Camp Hill, Pa 17001-0598 county of Dauphin.
- 4) The Respondent, Thomas L. James, CHIEF Grievance Coordinator for The Pennsylvania Department of Corrections Located at 2520 Lisburn P.O. Box 598 Camp Hill, Pa 17001-0598 County of Dauphin.
- 5) The Respondent, John M. McCullough Superintendent of SCI Houtzdale, Located at 2007 State Route P.O. Box 1000 Houtzdale, Pa 16698-1000. County of Clearfield.
- 6) The Respondent, Kathy Emel, Grievance Coordinator For SCI Houtzdale Located at 2007 State Route P.O. Box 1000 Houtzdale, Pa. 16698-1000 County of Clearfield.

12) All Respondents, herein Named Are Adult Individual Citizens of The United States and Acted under The Color of State Law.

13) All Respondents herein Named Are Sued in Their Individual and Personal Private, Public official Capacity at all Times, mentioned in This Complaint. As Each Respondent Acted under Color of State Law, While denying The Plaintiff of his Constitutional Rights.

Petitioner Request That A Jury Trial be Demanded.

14) This is A civil Action Filed for damages of Relief Alleging The denial of Eight Amendment Guarantess The Prison's medical "SETTING", Failure To provide "Adequate" "medical care" (constitute Cruel and unusual Punishment). As A Inmate I have The Right To be free from Punishment under The due Process clause. To Preclude "DELIBERATE INDIFFERENCE", To my serious medical needs. By Doctor Pomerantz and Ms Norine Greenleaf and Nurse Randy Schnarrs. Plus Not Receiving my Pain

7) The Respondent, Ms. Norine P. Greenleaf, CHCA, The Head Person of SCI HOUTZDALE medical Department Located AT 2007 State Route P.O. Box 1000 HOUTZDALE Pa 16698-1000 county of Clearfield.

8) The Respondent, Jeffery Pomerantz, The Doctor For SCI HOUTZDALE, Located at 2007 State Route, P.O. Box 1000 HOUTZDALE, Pa 16698-1000 county of Clearfield.

9) The Respondent, Randy Schnarrs, Male Nurse AT SCI HOUTZDALE, Located at 2007 State Route P.O. Box 1000 HOUTZDALE, Pa 16698-1000 county of Clearfield.

10) This Court has Original Jurisdiction To entertain This Civil Action Pursuant To 42 Pa.C.S. § 701.

11) The Petitioner, / Plaintiff / Avers That he is in Severe Pain, and is ~~suffering~~ suffering from The Pain in his Neck To his Lower Back, wears A Neck Brass, That is old has No more Support To his Neck, The medical Department failed To Exercise The degree of Care and Skill, That a Physician, or Surgeon of The same medical specialty would use under Similar Circumstances, often shortened To mid. mal

7) The Respondent, Ms. Norrene P. Greenleaf, CHCA. The Head Person of SCI Houtzdale medical Department Located AT 2007 State Route P.O. Box 1000 Houtzdale Pa 16698-1000 county of Clearfield.

8) The Respondent, Jeffrey Pomerantz, The Doctor For SCI Houtzdale, Located at 2007 State Route, P.O. Box 1000 Houtzdale, Pa 16698-1000 county of Clearfield.

9) The Respondent, Randy Schnarrs, Male Nurse AT SCI Houtzdale, Located at 2007 State Route P.O. Box 1000 Houtzdale, Pa 16698-1000 county of Clearfield.

10) This Court has Original Jurisdiction To entertain This Civil Action Pursuant To 42 Pa. C.S. § 761.

11) The Petitioner, / Plaintiff / Avers That he is in severe Pain, and is ~~suffering~~ suffering from The Pain in his Neck To his Lower Back, wears A Neck Brass, That is old has No more Support To his Neck, The medical Department failed To Exercise The degree of care and skill, That a Physician, or Surgeon of The same medical specialty would use under similar circumstances, often shortened To mid. mal

12) All Respondents, herein Named Are Adult Individual Citizens of The United States and Acted under The Color of State Law.

13) All Respondents herein Named Are Sued in Their Individual and Personal Private, Public official Capacity at all Times, mentioned in This Complaint. As Each Respondent Acted under Color of State Law, while denying The Plaintiff of his Constitutional Rights.

Petitioner Request That A Jury Trial be Demanded.

14) This is A civil Action Filed for damages of Relief Alleging The denial of Eight Amendment Guarantess The Prison's medical "SETTING", failure To provide "Adequate" "Medical care" (Constitute Cruel and unusual Punishment), As A Inmate I have The Right To be free from Punishment under The due Process clause. To Preclude "DELIBERATE INDIFFERENCE", To my serious medical needs. By Doctor Pomirantz and Ms Norma Greenleaf and Nurse Randy Schnarrs. Plus Not Receiving my Pain medication for 4 1/2 days for I want on ATA To Philadelphia County for Court. Had To get my "83 year old mom" To call up To Houtzdale medical Department To get in touch with Ms Greenleaf To send and order Down So The County Jail would Give me my medication SEE Houtzdale medical

Department was Negligence for Failure to send my medication. By Not given it to The officer's in SCE HOUTZDALE'S Receiving Room, to give The Phila. Sheriff's with The Rest of my Property That went down with me. They Are to give The Sheriff's our medication for The days We Are Away on ATA. This Action will show That The medical Department AT SCE HOUTZ Dale having NO particular Interest in or ~~concerns~~ ^{CONCERNS} for: Neither good Nor Bad medical ^{medicine} Indifferent Not matting one way or The other.

STATEMENT OF CLAIM

1) Petitioner Asserts That He filed a Grievance on July 31, 01, on Ms Greenleaf. Is Allowing medical staff under her Authority to perform using unprofessional conduct That leads to unproper medical care. She Allowed Doctor Pomirant2 order me all kinds of medications That don't work or help with my Severe Pain, I have in my Neck. He is using me for A Lab Rat and Refused to send me out for A MRI. For my Neck and Back, I wrote to Ms Greenleaf on A Request on 7/12/01 For all The Pain I am in. For The medication is NOT working. She wrote to say Remember you had A Em G. Reading The Pain is still The same. All I Requested was to have and "MRI. All The medications That Doctor Pomirant2 is ordering is Not working.

I Replied To MS GreenLeaf Answer on 7/13/01 I Stated Saw Dr Pomirant2 After having To sign up for sick Call so many Times The Answer is Not Receiving Proper medical care. Grievance NO. 593 Sent To be Filed on 7/31/01 Exhibit A.

2) Petitioner Asserts on 8/1/01 MS. Kathy Emel Filed The Grievance No. 593 marked As Exhibit A, MS Emel as The Grievance Coordinator did not Answer The Grievance. She Allowed MS. GreenLeaf To Answer her own Grievance That was Filed Against her, MS GreenLeaf Answer Dated 8/2/01 Previous Tests Haven't Clarified What The Problem is. So Additional Test Are Needed See Exhibit B.

3) ~~But~~ Petitioner Asserts on 8/8/01 He Filed his Appeal on Grievance 593, I Stated When I First got hurt was In camp Hill, I was Treated for Pinch Nerves in my Neck when I came To SCI Hunt2dale Doctor Pomirant2 Started To Treatment me for my Pinch Nerves and he Said I had Pinch Nerves Problem, MS GreenLeaf States Dr Pomirant2 states IF I had a Pinch Nerve Problem it would of shown on The EMG. My Complaints I am being Refused And MRI. and Dr Pomirant2 has ordered me all kind of medications That Don't work MS GreenLeaf Also Answered her own Grievance and About her staff using unprofessional

(*) 6

Conduct Appraisal is marked Exhibited C on Grievance 593
4) Petitioner Asserts on 8/15/2001 MR McCullough sent his Answer To Grievance Appraisal No 593. He States: Stevenson is Disappointed That The Test did Not show any Nerve problem. I cannot Alter The Results of a diagnostic test. There was No objective or organic Finding And we can't keep Ordering Tests when Nothing is There. Grievance Appraisal is denied. He does not say Any Thing About The unprofessional conduct All The medications That don't work And he Refused To have medical To Order me A M.R.I. Test and my Pain is more and more As Each day goes on and on I am in A Lot of Pain MR. McCullough Answer is unjust marked Exhibit D.

5) Petitioner Asserts That he Appraised John M McCullough Judgment to The Chief Grievance Coordinator MR Thomas L. James at Central Office Review Committee in Campbell. ON his Answer To my Appraisal. He shows Prejudice. I Showed him That MS Greenleaf Refused To have Another Test done for A MRI done for my Pinch Nerves in my Neck and All The Pain and suffering with pain in my Lower Back. I Told him I could Not Take all The pain I am in. I'm loosing a Lot of Sleep at Night and That I am in Great Need of proper medical-care.

and How Doctor Pomerantz and Ms Greenleaf is Just Abusing Their Power. MR Thomas L. James A Greed with John m. McCullough and MS Greenleaf Judgment and Denied my Appeal, I can not go see / or To A Doctor on my own free will To see what is wrong with my Neck. I need A M.R.I. done. All The Respondents Are Allowing SCI HOUTZDALE medical Department and Staff under John m. McCullough's Authority To use unprofessional conduct for The Prison Doctor Pomerantz To Give unproper medical care. We had a Lot of Inmates die in SCI HOUTZDALE. For They do not Like spending money on Inmates who have Hepatitis C. for They Tell The Inmates The medication costs A Lot of money. So Instead I faces Repeated Instance of denial or delay's in Treatment, systemic And chronic Problems. I am very concerned of my medical Need(s) in SCI HOUTZDALE, I had Filed A Lot of Grievances and They all get Denied from The Above Respondents. Whereas All my Request(s) and Grievance(s) Are marked as Exhibits. To Support Petitioner(s) Claim.

6) Petitioner Asserts that he claims Deliberate Indifference Standard Applied To Action(s) Against Prison official(s) Doctor Pomerantz Failed To Give Petitioner Proper Treatment and Refused To send

him out To Receive A MRI I am in Great Pain have difficulty walking. I am complaining about my Neck, and my Lower Back pain over to my ~~hip~~ hip That Pain is from my Neck, To Lower Back and Across my Lower Back. Prison official Including Ms Greenleaf, Doctor Pomirant 2, on Almost seventy occasions medical malpractice on Part of Prison medical Department, Precluded Finding of deliberate Indifference To Petitioner's Neck and Low Back Pain cause by Doctor's Pomirant 2(s) Neglect. I have Serious medical Need(s) based on The Fact That between Nov of 1997 when I got hurt down SCI Camp Hill To Now and The Petitioner's Experienced Great Pain in my Neck and Back.

7) Petitioner Asserts That he sent Complaint To Mr. Jeffrey A. Beard, Phd Secretary of Department of Correction(s) To direct The Operation(s). He is Allowing The above Named Respondent(s) who are under is Authority to Violate Plaintiff Stevensons US Constitution 5th, 8th and 14th Amendment Rights. By Allowing Ms Greenleaf and Doctor Pomirant 2 To Denied Adequate medical care and use unprofessional conduct And Allows The Chief Grievance coordinator Mr Thomas L James To Answer Grievance in A unlawful matter knowing The Grievance(s) have merit he denied(s) Them

(9)

All Grievances were Filed with merit and in Good faith
For Relief, MR James is Violating The due Process of Law
and The Equal Protection of The Law and he is obstru-
ctions of Justice, He is not Honest wh. with his
Answer(s) To The Grievance(s). He does not Answer
Them he Just Agrees with John M McCullough(s)
Appeal Judgment and Ms Kathy Emel(s) Judgment
on her Review of The Grievances. This is not what
The Grievance System is made for. When you have
A ^{Serious} ~~Serious~~ Complaint or a Violation of your U.S.
Constitutional Rights, Whereas Petitioner has A
Serious medical complaint. And my complaint should
be Granted ~~stating~~ MR Jeffery Beard, Petitioner sent
him A complaint stating my medical needs, He is
Allowing his medical Administrator(s) and Physician
To Denied prompt medical care and Prompt medical
Treatment, And he Allows MR. James To Denied
Grievances with merit and That whereas filed in
Good faith For Relief for They Are Filed To provide
Adequate medical care. Nurse Randy Schnarrs
many Complaints Are Filed Against him. He is
unFit and unprofessional To be Even Working in
A medical Department. Talk(s) To The Inmates
Like They Are Less Than Human(s) Very Rude
with his mouth And ways. call you up for sick
call he has you sign A cash slip too have you
keep paying Two Dollars for The same Treatment

That you Never Received from The First day I seen
MR Schnarrs. I Told him in A Nice way on going Treat-
ment for The same medical problems you do not have To
Pay Two Dollars for Sick call Fees. MR Schnarrs, Then
would Get Real Rude with his mouth and state. IF you
don't sign The Two Dollar medical Cash slip you
can get out Now go Back To your Block and I will
mark you down AS Refusing Sick Call. So you must
sign The Cash Slip Before you are seen for medical
Treatment. IF you don't, He Tells you "To get out
Now". Then you must Take his Rudeness on top of
Not Receiving Adequate medical care. MR Schnarrs
has called me up To Sick call To Reorder my medicat-
ion. Ever 6 months our medication orders Run out.
It may Take 6 to 10 days To be called. When I
put my medication order is going To Run out in
4 days can you please call me up To Reorder my
medication ~~for 8 days~~ ^{The order} Run out and I was without
my medication for 8 days. Then I was called To Sick
call saw MR Schnarrs. Saw him in and very up
set way. What can I do for you Today. I need
To have my medication Reordered sign The Cash
Slip. I only Need my medication Reordered only.
sign The Cash Slip or Leave get out Now I signed
The Cash Slip He said he Reordered my medication.
Pick it up Tomorrow when your Block get(s) called

(11)(11)

For Pill Line, I went up to pill line Told The Nurse I am here to pick up my medication. She Looks for it could not Find it. Then she Looked in The Book and Told me That Schnarrs Never ordered my medication. So Again I had To sign up for Sick call To have my medication ordered, and I'm without my medication for Two weeks. Then when you File A Grievance on The matter IT gets Denied. Like I said MR. Beard is Responsible for The Respondents and The Officials of The medical Administrators and The Doctors under his Authority in his personal private, and official capacity. Is Allowing The medical Department To denied Are Rights To Adequate medical care, And Allowing The Grievance Coordinator To Denied Grievances Filed with merit and in Good faith without using Honest Judgment. He Always makes The Inmate Look Like The Bad Guy's and he Allows The Official (S) To Never Admitt They Are wrong. All They do is Violate Inmates constitutional Rights To medicare. I Receive unnecessary Suffering by The medical Department and Administrators for Failure To provide prompt medical care and prompt medical Treatment and have The Right To be Pain free of Punishment.

Petitioner asserts that he also claims that Prison Administrators are under a constitutional obligation to provide him with psychiatric treatment no matter what the petitioner was convicted of. and that their failure to do so constitutes cruel and unusual punishment. It is of course true, having incarcerated a prisoner and thereby having prevented him from obtaining treatment on his own. The state may be found to have inflicted cruel and unusual punishment by failing to provide needed medical treatment. Stevenson's allegations, however ~~viewed~~ viewed in the light most favorable to him do not present a factual dispute. In Estelle v. Gamble, 429 U.S. 97, 54 L. Ed. 285, 50 L. Ed. 251 (1976) The Supreme Court held that deliberate indifference to serious medical needs of prisoners constitutes the unnecessary and wanton infliction of pain proscribed by the Eighth Amendment. 429 U.S. at 104 97 S.Ct. 291 (citation omitted). The limits that Stevenson's claimed right to psychiatric treatment exceeds that the Prison Administrators failure to provide medical care.

Criminal Law 12 3. 10 (3)

Medical and health care diet

C.A. 3 (Pa) 1992 2 hereby asserts that a minimum correctional institution satisfies obligations.

Under Eighth Amendment when it furnishes prisoners with adequate food, clothing, shelter, sanitation medical care and person of safety U.S.C.A. Const. Amend. 8. SEE: YOUNG V Quinian, 960 F 2d 351, CA 3 (Pa) 1991 Two components of concept of serious medical need of prisoners, as to which deliberate indifference by prison officials violates Eighth Amendment's prescription of cruel and unusual punishment, are that the detainee's condition must be such that failure to treat can be expected to lead to substantial and unnecessary suffering. Injury is Estelle V Gamble, 429 U.S. 97 Sct 285, 50 L ed 2d 251 (1976).

Petitioner / Plaintiff asserts that he is suffering irreparable harm the procedures and behaviors by the respondents and Petitioner reserve the rights to add other Defendants.

PRELIMINARY STATEMENT

This civil action filed by James Stevenson a state prisoner, for damages and injunctive relief under 42 Pa C.S. § 761 alleging violations of his constitutional rights. When the above named defendants acted with deliberate indifference in administering an over excessive amount.

OF Prescribed [MEDICATION] That Lead To serious medical complications As up-to-date and That The Petitioner / Plaintiff Also maintains That This is A Policy And Procedure of which The Commissioner of The State Prison, The Plaintiff further Alleges That As A Right of his Reputedly ^{Requested} ~~discern~~ Statements That The Said medication To be discontinued for This medication has Taken A Toll on The Petitioner, which harshly limited him in Performing his Every day bodily functions And his Everyday Daily Activities So much As To Place him at The Risks of serious Injury of further health Problems.

WHEREFORE The Petitioner's Constitutional Rights Are being Violated. If The medical Department would Not Play Games with my medication I would not be Asking to discontinuing medications That Take a To Toll on me and I would Not be Telling Them To maintain The Policy and Procedure from The Commissioner. Plus from my Researches of This medication it states IT has [SIDE AFFECTS] Such As high Enzymes levels in The Liver and weight gain and Infection in The Body and some Passing of Blood if Taken over A Long Period of Time. Also I was Informed by The medical Staff here at SCT HANTZDALE That These Systems would be A Result of Excessive Usage I was Refused To (15)

RECEIVE A MRI AND THEY KEEP ON CHANGING MY MEDICATION LIKE I AM A LAB TEST ANIMAL. BY TELLING ME TRY THIS PILL IF THAT DON'T WORK WILL TRY SOMETHING ELSE. WHEN I FIRST GOT HURT CAMPBELL HAD ME ON MEDICATION THAT WORKED. CAME UP HERE TO SCE HOUTZDALE THE MEDICAL DEPARTMENT CHANGED MY MEDICATION. DOCTOR POMIRANTZ ^{STARTED} TREATMENT FOR MY PINCH ^{NERVES} ~~NERVES~~ AND MY LOWER BACK PAIN. THEN HE SAID I DON'T HAVE ANY PINCH NERVES IN MY NECK. AFTER HE TREATED ME FOR THE PINCH NERVES GAVE ME THE MEDICATIONS TO TREAT ME FOR PINCH NERVES DOWN CAMP HILL FOUND THE PINCH NERVES AND TREATED THE PROBLEMS AS SAME.

PETITIONER STATES I TOLD MEDICAL DEPARTMENTS GREENLEAF SO MANY TIMES THAT THE MEDICATION IS NOT HELPING ME AT ALL IN THE LIGHT THEY JUST DON'T CARE. I TRULY BELIEVE ALL OF MY MEDICAL PROBLEMS CAME AS THE RESULT OF THE FORCE BY THE MEDICAL DEPARTMENT IN SCE HOUTZDALE WHO HAD ME TAKE THIS SAID MEDICATION THAT WAS NOT NEEDED BECAUSE THEY SAID TAKE THE PILLS AND THEY STARTED THE PROBLEMS [I AM SUFFERING DO TO ALL THIS SIDE AFFECTS.] I AM GAINING MORE PAIN AND I AM STILL HAVING MEDICAL PROBLEMS BECAUSE OF SAID MEDICATION.

CLAIMS FOR RELIEF

The Actions of The Respondents constitutes Cruel And unusual Punishment in Violation of The United States Constitution Amendments Eighth and 14, Fourteen, As To The deliberate Indifference To Serious medical Needs.

RELIEF REQUESTED

WHEREFORE, The Plaintiff Requests That This Honorable Court Grant him The Following Relief
A Issue A declaratory Judgment stating That:

1) The Acts and omissions of The defendants Secretary Jeffrey A Beard, P.h.d. Superintendent John M. McCullough, MS Kathy Emil, MR Thomas L James, Doctor Pomerantz Nurse Randy Schnarrs MR. Greenleaf The head Person of SCI Houtzdale Violated The Petitioners Eighth Amend and fourteenth. Amendment Rights.

under The United States Constitution (B)

Award The Plaintiff compensatory damages in The Amount of Seven Hundred Fifty Thousand Dollars (\$750,000.00) Against Each defendant in Their Individual, Personal Private, Public Official Capacity

C) Award The Plaintiff Punitive damages in The Amount of seven Hundred Fifty Thousand Dollars (\$750,000.00) Against Each defendant in Their Individual, Personal Private, Public Official Capacity.

D) Award The Plaintiff The cost incurred As A Result of Litigating This Action, Including but Not Limited to Attorney Fees and cost As may be Provided by Law.

E) Issue An Injunction Prohibiting The defendants and Their Subordinates Taking Any Retaliatory Acts Against The Plaintiff.

F) Grant any other such Relief as This Honorable Court may deem Appropriate.

Dated. 02-06-02

Respectfully submitted
(S) James Stevenson
James Stevenson
DK 9729
P.O. Box 1000
HENTZDALE, Pa 16698-1000

VERIFICATION

I James Stevenson Pro-Se hereby verify under
The Penalty of Perjury That this Information
Contained in The foregoing Annexed Plaintiffs
Complaint is True and Correct To The Best of my
Information, knowledge and belief so states
The Plaintiff I understand That any false statements
made subject to The Penalties of 18 Pa C.S. § 4904
Dated 02-06 day of 2007

Respectfully Submitted

(S) James Stevenson

James Stevenson Pro-Se

PROOF OF SERVICE

CERTIFICATE OF SERVICE

I do hereby certify That I am This day serving The
foregoing Civil Complaint A True and correct
Copy upon The following List of Persons In A
manner That satisfying Requirement of Rule
Pa R.A.P. 121(b) and 1514 (C)
US FIRST CLASS MAIL CERTIFIED RETURN RECEIPT
Daniel R Schuckers Prothonotary (one original and two copies
OFFICE OF THE Prothonotary / commonwealth court of PENNA.
P.O. Box 11730 / Harrisburg, Pennsylvania 17108-11730

Jiffery
Jiffery A Beard, P.H.D. For The Pinna Department of
corrections, one copy 2520 Lisburn Road, P.O. Box 598^{RD.}
Camp Hill Pinna. 17001-0598

John m McCullough Superintendent SCI Hout2DALE
2007 State Route / Hout2DALE, PA 16698-1000 P.O. Box 1000
one copy.

Ms Kathy Emil SCI Hout2DALE, 2007 State Route one copy
P.O. Box 1000 Hout2DALE, Pa 16698-1000 one copy

Ms. Greenleaf Norma P. CHCA Head of SCI Hout2DALE
Medical Department 2007 State Route one copy.
P.O. Box 1000 Hout2DALE, PA 16698-1000

Doctor Jiffery Pomirantz Doctor SCI Hout2DALE one copy
State Route P.O. Box 1000 Hout2DALE, PA 16698-1000 one copy

Nurse Randy Schnarrs SCI Hout2DALE Pa 2007
State Route P.O. Box 1000 one copy
Hout2DALE, PA 16698-1000

James L. Thomas Chief Grievance Coordinator
Pinna Department of corrections one copy.

2520 Lisburn Road Camp Hill, Pa 17001-0598.

Dated: 02-06-02

Respectfully submitted
(5) James Stevenson
P.O. Box 1000
Hout2DALE PA 166981000

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
VS
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS ET AL

, DOCKET NO

SUBPOENA ISSUANCE
SERVICE COMPLIANCE
FEE PRISONERS

I James STEVENSON hereby respectfully request of
a party, The Prothonotary shall issue a subpoena signed
and under the seal of the court upon the person named
below. To a person out-side this Commonwealth.

John Doe owner of Institutional
Supply INC. Located AT SToughton
MA, 02072. By any form of mail

SEE 42 Pa C.S.A. § 5903 For the compensation and
Expenses of witnesses see also Evans v. Otis Elevator
Co Pa., 13 168 A2d 573 (1967).

Thank you for your time and help in this matter
Sincerely

John Doe owner of the

Institutional Supply Co.

49 ROSE STREET

MA, 02072, court seal.

Very Truly yours
James Stevenson

Dated. 02-06-02

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON
Petitioner / Plaintiff

V.

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

COMMONWEALTH OF PENNSYLVANIA
COUNTIES OF CLEARFIELD AND
DAUPHIN

DOCKET NO.

MOTION TO PROCEED IN FORMA PAUPERIS

I JAMES STEVENSON hereby STATES the Information concerning my inability to pay the cost of this proceeding pursuant to Rule 561 of The P.A. R. APP. PROC., is True and correct, and made subjected to the penalties set forth in 18, Pa. C.S.A. 4904 relating to unsworn falsification to Authorities. I state under the penalties provided in 18, Pa. C.S.A. 4904. THAT;

1) I am the petitioner in the matter within and because of my financial situations, I am unable to pay the fees and costs of this proceeding or any other proceeding hereafter.

2) The questions to my unemployment to pay the fees and cost in applying judicial actions are True and correct.

3) I have Not Been Employed due to my Incarceration and Not have any Income, Pensions, Annuity, Social Security Benefits, Support payments, or my I state NO Real estate, Stocks, Bonds, Notes, Automobiles or any other Valuable Property.

I understand that False statements made in this verified statement are subject to the penalties provided by law in the second Degree.

Dated: 02-06-02

Respectfully Submitted
(5) James, Stevenson
James STEVENSON
P.O. Box 1000
HOUTZDALE, PA 16658-1000

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

VS.

DOCKET NO

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS, ET AL

COMMONWEALTH OF PENNSYLVANIA
COUNTY

SUBPOENA TO ATTEND AND TESTIFY
TO John Doe Head Person of Philadelphia
County Prison C.F.C.F. Located at 7901 STATE RD
PHILADELPHIA, PA 19136.

1) You are hereby ordered by the court to come to
COMMONWEALTH COURT OF PENNSYLVANIA IN
Harrisburg PENNSYLVANIA 17108 DAUPHIN
PENNSYLVANIA ON AT
O'CLOCK — M — TO TESTIFY on behalf of James
STEVENSON in the Above Case, and to Remain until
Excused

2) AND Bring with you the Following: On Nov 2, 01 I
LEFT SCI HUNTZDALE on AT A To Philadelphia
County for Court. I was housed AT C.F.C.F. County
Prison. I was without my medication for 4 1/2 days.
medical staff in Philadelphia county Jail stated
SCI HUNTZDALE did not send your medication with

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON

VS

, DOCKET NO

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS ET AL

SUBPOENA ISSUANCE
SERVICE COMPLIANCE
FEEES PAISOWERS

I James Stevenson hereby Respectfully Request of
a party, The Prothonotary Shall Issue a subpoena signed
and under the seal of the court upon the person named
Below. To A Person out-side This Commonwealth.

John Doe owner of Institutional
Supply INC. Located AT SToughton
MA, 02072. BY any form of mail

SEE 42 Pa C.S.A. § 5903 For The compensation and
Expenses of witnesses see Also Evans v. Otis Elevator
Co Pa., 13 168 A2d 573 (1960).

Thank you for your time and help in this matter
Sincerely

John Doe owner of the
Institutional Supply Co.
49 ROSE STREET
MA, 02072

Court Seal.

Very Truly yours
James Stevenson

Dated. 02-06-02

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

593
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR <i>Kathy M. Emel</i>	FACILITY <i>Medical & Warden, Greentree</i>	DATE: <i>07-31-01</i>
FROM: (INMATE NAME & NUMBER) <i>JAMES B STEVENSON D19729</i>	SIGNATURE of INMATE: <i>James B Stevenson</i>	
WORK ASSIGNMENT: <i>Blockwork</i>	HOUSING ASSIGNMENT: <i>2A-1</i>	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B the specific actions you have taken to resolve this matter informally. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages.

I am here by filing this grievance on Ms. Greenleaf in her Official capacity of Medical Administrator of SCI Houtzdale Medical Department. Is allowing medical staff under her Authority to perform using unprofessional conduct which leads to Abuse of Power.

Dr. Pomerantz has order me all kinds of Medications that don't work he has my title a Lab-Rat. He is Refusing to send me out for a M.R.I. I hereby state the Medication he ordered isn't working. I am in a lot of pain.

Ms. Greenleaf said on 07-12-01 of my request slip remember you had a EKG reading. And with the EKG reading the pain is still the same. All I am requesting is to have a MRI for all the Medication that Doctor Pomerantz has ordered is not working

B. List actions taken and staff you have contacted, before submitting this grievance. Attach the copy of the DC-135A with the staff member's response of your informal resolution attempt.

Me, I would a MRI. I reply to Ms. Greenleaf answer on 07-13-01. Saw Doctor Pomerantz after having to sign up for sick call so many times. The Answer is not receiving proper medical care, which is a Violation of my 8th U.S. Const. Amend. rights

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Kathy Emel
Signature of Facility Grievance Coordinator

8/1/01
Date

DC-804
Part 2COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001OFFICIAL INMATE GRIEVANCE
INITIAL REVIEW RESPONSE

GRIEVANCE NO.

HOU -593

TO: (Inmate Name & DC No.) Stevenson, James B DK9729	FACILITY Houtzdale	EA1	08-01-01
---	-----------------------	-----	----------

The following is a summary of my findings regarding your grievance:

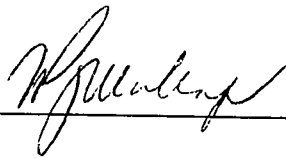
Your grievance stated I am allowing unprofessional conduct in this department and abuse of power. You stated Dr. Pomerantz has tried many medications on you. You state the medication is not working and you are still in pain. You claim you need an MRI.

After receiving your grievance I spoke again to Dr. Pomernantz. He stated if you had a nerve problem it would have shown on the EMG. It is good news that you don't have a significant problem. It isn't unusual for the Dr. to attempt to provide some relief of pain. It is normal to try drugs until you have success. No one doubts your pain but with no objective data found when Dr. assesses you he can't order additional tests. Remember you don't exhibit any atrophy of muscles etc. All your symptoms are subjective only.

Now you would have a complaint if Dr. refused to work with you but reviewing your chart shows much patience on the part of Dr. Pomerantz.

Your grievance has no merit.

Cc: Inmate Grievant
Superintendent
Deputies (2)
Majors (2)
Superintendent's Assistant
DC-15
Grievance Officer

Print Name and Title of Grievance Officer	SIGNATURE OF GRIEVANCE OFFICER	DATE
Norene P. Greenleaf, CHCA		8/2/01
	GAP	

COMMONWEALTH OF PENNSYLVANIA
Department of Corrections
State Correctional Institution at Houtzdale
Office of the Superintendent
August 15, 2001

SUBJECT: Appeal of Grievance #593

TO: James Stevenson, DK9729

EA-01

FROM: John M. McCullough
Superintendent

Stevenson is disappointed that the test did not show any nerve problem. I cannot alter the results of a diagnostic test. There was no objective or organic finding, and we can't keep ordering tests when nothing is there.

Grievance appeal is denied.

JMM:dkc

c: Deputy Tatum
Deputy Patrick
Major Kyler
Acting Major Barone
Ms. Emel
Ms. Greenleaf
Case Record
file

Form DC-135A		Commonwealth of Pennsylvania Department of Corrections	
INMATE'S REQUEST TO STAFF MEMBER		INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.	
1. To: (Name and Title of Officer) Criminal Justice Review Committee		2. Date: 08/17/01	
3. By: (Print Inmate Name and Number) JAMES B. STEVENSON 0149739		4. Counselor's Name MS GURIC	
James B. Stevenson Inmate Signature		5. Unit Manager's Name Jay White	
6. Work Assignment Blockwork		7. Housing Assignment 7A-1	
8. Subject: State your request completely but briefly. Give details. John M. McCullough is his personal capacity as an inmate of S.C.I. Hospital is allowing the Medical Staff under his Authority to use his professional conduct and to give Unapproved and off Medicine Care. Do you know how many inmates Died at S.C.I. Hospital for use of prison doctors refused to treat a prisoner for medication for hepatitis C for they said the medication costs a lot of money they don't like spending money to give proper medication. Inmates reported symptoms of a disease or delay in treatment systemic and chronic problems involving concern of my Medical needs in S.C.I. Hospital is about shall be being denied my Medical needs which is called inadequate medical needs or care which is a violation of my 8th Amendment rights. Each time I sign up for sick call or see a nurse for the average of only 10 to 20 seconds when medical care was needed I was considered grossly negligent and my needs were deliberately indifferent to show that the medical authorities were deliberately indifferent to the need of Medical care. Eighth Amendment Violation when medication was prescribed and discussed by me reviewed and not given personally.			
9. Response: (This Section for Staff Response Only)			
of only 10 to 20 seconds when medical care was needed I was considered grossly negligent and my needs were deliberately indifferent to show that the medical authorities were deliberately indifferent to the need of Medical care. Eighth Amendment Violation when medication was prescribed and discussed by me reviewed and not given personally.			
To DC-14 CAR only ☐		To DC-14 CAR and DC-15 IRS ☐	

Staff Member Name _____ / _____ Date _____
Print Sign

OCT 17 2001

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

5715

GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR <i>Kathy M. Emel</i>	FACILITY: <i>Smy Whitesel</i>	DATE: <i>10/14/01</i>
FROM: (INMATE NAME & NUMBER) <i>JAMES B. STEVENSON DK9729</i>	SIGNATURE of INMATE: <i>James B. Stevenson</i>	
WORK ASSIGNMENT: <i>Blockworker</i>	HOUSING ASSIGNMENT: <i>JA-2</i>	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages.

Mr. Whitesel in his personal and Official Capacity allowed his C.O. and Sgt. like CO Kwee forced me to move in with Mr. Wilson DU-3600 Cell on July 13, 2001. Knowing that I didn't like Wilson and I don't get along. But me being a Christian of God I followed C.O. Kwee's orders and he said it was only for a short period of time. 2) With Wilson being a heavy guy didn't like the idea of me having his bottom bunk. Mr. Wilson wanted all the space in the cell as well like nobody else is suppose to have anything in the cell and because he was on the block/laundry worker he thinks he should have a cell by himself. Mr. Whitesel knew that Wilson and I weren't getting along that good. But he kept us in the cell together for almost 2 months. But I don't feel that I should be the one who was punished by leaving EA where I was making 25 cent an hour and working shows a day job. So with them moving me to JA. I'm only working 4 hours a day. After I moved out of Wilson's cell and was in 10 cell, Wilson's the one who started trouble with me and I was moved off the block and I don't think it's fair for Wilson to have 2 jobs Laundry worker and Block Clerk and change people.

B. List actions taken and staff you have contacted, before submitting this grievance.

to do their laundry and also to go to the commissary. Mr. Whitesel is Prejudice and Bias and uses Unprofessional. Plus Mr. Whitesel knows that I didn't like Wilson is doing these things. Before I left EA. I ask Mr. Whitesel was this a DOC laundry on Mr. Wilson's and he didn't answer that.

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date



PENNSYLVANIA DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PENNSYLVANIA 17001-0598
(717) 975-4859

October 17, 2001

James Stevenson, DK-9729
State Correctional Institution Houtzdale

Dear Mr. Stevenson:

The Office of Professional Responsibility recently received your correspondence dated October 14, 2001.

Your correspondence is being referred to Superintendent McCullough for any action he deems appropriate.

Sincerely,

A handwritten signature in black ink, appearing to read "H. Clifford O'Hara".

H. Clifford O'Hara
Director
Office of Professional Responsibility

HCO/yb

cc: Superintendent McCullough (w/attachments)

NOV 1 2001

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

7392
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR Kathy M. Emel	FACILITY: Rad & Medical	DATE: 11/09/01
FROM: (INMATE NAME & NUMBER) JAMES B STEVENSON DK9729	SIGNATURE of INMATE: James B. Stevenson	
WORK ASSIGNMENT: Blockworker	HOUSING ASSIGNMENT: JA-2	
INSTRUCTIONS: 1. Refer to the DC-ADM 804 for procedures on the inmate grievance system. 2. State your grievance in Block A in a brief and understandable manner. 3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.		
A. Provide a brief clear statement of your grievance. Additional paper may be used, maximum two pages. On 11-02-01 I WAS IN THE RAD AT 6:30 P.M. I ASK C.O. KINMAN WAS MY MEDICAL RECORDS IN THE PAPERWORK FOR MY ATA, AND HIS REPLY WAS YES. SO AFTER WE GOT TO C.F.C.F. I WAS PROCESS RIGHT AWAY FOR COURT ON 11-02-01. SO WHEN I GOT BACK FROM COURT THEY STILL HAVE TO FINISH MY PAPERWORK, THEY LOOK UP AND DISCOVER THAT MY MEDICAL RECORDS DIDN'T COME DOWN. SO I WAS PUT INTO QUARANTINE FOR 4 1/2 DAYS AND SINCE MY MEDICAL RECORDS WEREN'T THERE I DIDN'T RECEIVE ANY MEDICINE FOR ALMOST 4 1/2 DAYS. AND I HAD TO GET MY MOTHER WHO'S UP IN AGE TO MAKE AT LEAST 30 MORE PHONE CALLS UP TO THIS PRISON. ME I WAS IN A GREAT AMOUNT OF PAIN FOR THEM 4 1/2 DAYS ON MORE. PLUS WHO'S GOING TO REIMBURSE FOR THE CALLS AND MY PAIN AND SUFFERING		
B. List actions taken and staff you have contacted, before submitting this grievance. MY MOTHER FINALLY TALK TO HEALTH CARE ADMINISTRATOR, WONEWE GREENLEAF. AND THEN THEY HAD TO ORDER THE MEDICINE. WHICH THEY ONLY GOT THE C.T. ALBRAW, AND THAT WAS ALL FOR 1 DAY OR SO.		

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

7495
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR Kathy M. Emel	FACILITY: <u>WORMLEIGH GREENING</u>	DATE: <u>11/13/01</u>
FROM: (INMATE NAME & NUMBER) JAMES B. STEVENSON DK 9729	SIGNATURE OF INMATE: James B. Stevenson	
WORK ASSIGNMENT: Block Worker	HOUSING ASSIGNMENT: JA-3	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages.

My complaint is against S.I. Hartzdale and it's Medical Staff Dr. Pomkinantz, Ms. Worene Greening, Ms. Gburak PA. I had wrote a request to Dr. Pomkinantz and Worene Greening about me getting a complete physical examination. I wrote the request on 11-12-01, And I was call up to Medical and saw MS. Gburak PA Student. So I told her about my ~~stomach~~ ^{bruise} ~~which consist of~~ a bruise pig toe where as I can't wear no shoes on my right foot, and then I told her about these coughing spells that I have from time to time, which Dr. Pomkinantz knows about, and then when I showed her my really weak collar, and she tells me there's nothing wrong with my weak collar and I had it for about 6 mos. But what I ~~don't understand~~ I want Ms. Greening to see this eyesore. Also I paid \$2.00 for a visit.

B. List actions taken and staff you have contacted, before submitting this grievance.

It seems like Ms. Greening is using all the excuses to not see me. Plus Ms. Gburak PA she didn't say anything regarding my coughing spells. So I guess if I don't receive proper medical care, I'll let my family know, so that they can call my Attorney.

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Kathy Emel

Signature of Facility Grievance Coordinator

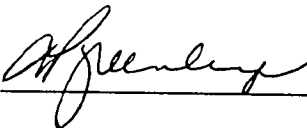
11/14/01

Date

DC-804
Part 2COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001OFFICIAL INMATE GRIEVANCE
INITIAL REVIEW RESPONSE

GRIEVANCE NO.

7495

TO: (Inmate Name & DC No.) Stevenson James DK9729	FACILITY Houtzdale	JA3	11-14-01
The following is a summary of my findings regarding your grievance: On 11-12 -01 you wrote request to Dr. Pomerantz regarding a physical examination. I responded to you and said you needed to go thru the sick call process. Perhaps you needed a further explanation. We, by policy, offer physicals routinely every year when you are over 50 and every 2 years when you are under 50. You are eligible for the exam in 2002 and q year after. In the meantime if you need medical care you must go through our sick call process. The Pa assessed your collar and said no change needed at this time. She is not a student but a licensed physician assistant and she makes the medical decision – not me. She also checked your foot – dry skin was noted. You didn't get a new collar or your tennis shoe approval to wear them to work. Medical decisions made by a licensed prescriber with proper documentation.. I see no issue here to grieve. <i>Cc: Inmate Grievant</i> Superintendent Deputies (2) Majors (2) Superintendent's Assistant DC-15 Grievance Officer			
Print Name and Title of Grievance Officer Norene P. Greenleaf, CHCA	SIGNATURE OF GRIEVANCE OFFICER  GAP		DATE 11/16/01



PENNSYLVANIA DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PENNSYLVANIA 17001-0598
(717) 975-4859

November 14, 2001

James Stevenson, DK-9729
State Correctional Institution Houtzdale

Dear Mr. Stevenson:

The Office of Professional Responsibility recently received your correspondence dated November 9, 2001 regarding your complaint.

Please refer to DC-ADM 804 in your Inmate Handbook. A copy of your correspondence will be sent to the Bureau of Health Care Services. We will be sending a copy of your complaint to Superintendent McCullough for his review.

Sincerely,

A handwritten signature in cursive script, appearing to read "H. Clifford O'Hara".

H. Clifford O'Hara
Director
Office of Professional Responsibility

HCO/yb

cc: Director McVey, BHCS (w/enclosure)
Superintendent McCullough (w/enclosure)

DC-804
Part 2COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001OFFICIAL INMATE GRIEVANCE
INITIAL REVIEW RESPONSE

GRIEVANCE NO.

7392

TO: (Inmate Name & DC No.) . Stephenson, James DK 9729	FACILITY Houtzdale	JA-3	11-20-01
---	-----------------------	------	----------

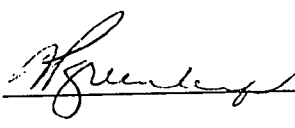
The following is a summary of my findings regarding your grievance:

Your grievance states that you were not offered all your meds while ATA. We sent a 5 day supply with you when you went ATA as per policy.

Your mother phoned me and I contacted medical staff and informed them of the medications you were on. You were gone more than five days. Your issue is with Philadelphia not us. We went out of our way to assist you.

Regarding your cervical collar – it was noted that it was fraying but the Velcro etc. was adequate. You are to be rechecked in one month to see if the collar then needs replaced. That date will be around 12-13.

Cc: Inmate Grievant
Superintendent
Deputies (2)
Majors (2)
Superintendent's Assistant
DC-15
Grievance Officer

Print Name and Title of Grievance Officer	SIGNATURE OF GRIEVANCE OFFICER	DATE
Norene P. Greenleaf, CHCA	 GNP	11/25/01

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
2520 LISBURN ROAD, P.O. BOX 598
CAMP HILL, PA 17001-0598

THE SECRETARY'S OFFICE OF
INMATE GRIEVANCES AND APPEALS

November 27, 2001

James Stevenson, DK-9729
SCI Houtzdale

RE: DC-ADM 804 – Final Review
Grievance No. 7392

Dear Mr. Stevenson:

This is to acknowledge receipt of your letter to this office. Upon review of your letter, it is the decision of this office to file your letter without action. You have failed to comply with the provision(s) of the revised DC-ADM 804 effective January 1, 2001.

In accordance with the provisions of the DC-ADM 804, VI D, 1, a proper appeal to final review must include photocopies of the Initial Grievance, Initial Review, the Appeal to the Facility Manager, and the Facility Manager's decision. The text of your appeal to this office shall be legible, presented in a courteous manner, and the statement of facts shall not exceed two pages.

Review of the record reveals that your appeal is incomplete. You have failed to provide this office with the required documentation that relates to your appeal. An appeal at this level will not be permitted until you have complied with all procedures established in DC-ADM 804. **Any further correspondence from you regarding this grievance, which does not contain the required documents needed to conduct final review, will result in a dismissal of your grievance.**

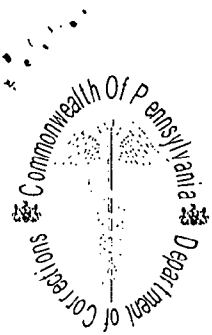
Sincerely,



Tshanna C. Kyler
Grievance Review Officer

TCK/ms

cc: Superintendent McCullough
Grievance Office
Central File



BUREAU OF HEALTH CARE SERVICES PENNSYLVANIA DEPARTMENT OF CORRECTIONS

P.O. Box 598/2520 Lisburn Road Camp Hill, PA 17001-0598

Telephone Number: (717) 731-7031

Fax Number: (717) 731-7000

November 28, 2001

James Stevenson, DK-9729
SCI-Houtzdale

Mr. Stevenson:

This is in response to your recent letter sent to the Office of Professional Responsibility regarding your medical care at SCI-Houtzdale. Your concerns were reviewed by staff at the Bureau of Health Care Services. It has been determined that the care being provided to you by the staff at SCI-Houtzdale is medically appropriate.

The Pennsylvania Department of Corrections provides medical services to inmates that are consistent with community standards. The DOC contracts with vendors who employ credentialed, licensed physicians and physician assistants who are responsible for the assessment, treatment and follow-up of all inmate medical conditions. Access to outside specialists and appropriate medical facilities is also provided through the vendors.

The medical staff at SCI-Graterford will continue to address your health care concerns and assess and appropriately treat every medical condition identified. Please direct your future questions and concerns to Dr. Pomerantz, Medical Director and Noreen Greenleaf, Corrections Health Care Administrator. The grievance process is available to you if you are not satisfied with their responses.

Sincerely,

Catherine C. McVey
Director
Bureau of Health Care Services

CCM/RE/cj

cc: Superintendent McCullough
Deputy Superintendent Speck
CHCA Greenleaf
File:(Stevenson.James.dk-9729.11.28.01)

1

Form DC-135A INMATE'S REQUEST TO STAFF MEMBER	Commonwealth of Pennsylvania Department of Corrections INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.
1. To: (Name and Title of Officer) <u>John M. McCullough</u> <u>Superintendent</u>	2. Date: <u>12/05/01</u>
3. By: (Print Inmate Name and Number) <u>JAMES B. STEVENSON</u> <u>DK9729</u> <u>James B. Stevenson</u> Inmate Signature	4. Counselor's Name <u>Mr. White</u> 5. Unit Manager's Name <u>Ms. Beth Bailey</u>
6. Work Assignment <u>Blockworker</u>	7. Housing Assignment <u>JN-3</u>
8. Subject: State your request completely but briefly. Give details. <u>DEAR, SUPERINTENDENT.</u> <u>I lose a lot of respect for you regardless what other inmates</u> <u>said about you. BECAUSE of this remark you made this afternoon</u> <u>that this must be Stevenson, because he always have a complaint</u> <u>here on there.</u> <u>I wish all my complaints be legitimate and yes they are about</u> <u>some of your staff members and times. But this is where the</u> <u>luck stops at right now, because my Pawnshop radio was</u> <u>playing and doing everything except cutting off the cassette tape</u> <u>automatic. So I sent my radio to get the automatic stop fix on</u> <u>repaired. My radio was sent to American Institutional Supply, Inc.</u> <u>40 Rose Street</u> <u>Scranton, PA 18502</u>	
9. Response: (This Section for Staff Response Only) <u>James B. Stevenson</u> <u>is between the</u> <u>American Song and</u> <u>is</u>	
To DC-14 CAP only ☐	To DC-14 CAP and DC-15 IRS ☐

Staff Member Name _____ Print _____ Sign _____ Date _____

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR Kathy M. EMEI	FACILITY: R&D Superintendent	DATE: 12/08/01
FROM: (INMATE NAME & NUMBER) JAMES STEVENSON DK9729	SIGNATURE OF INMATE: James B. Stevenson	
WORK ASSIGNMENT: Blockworker	HOUSING ASSIGNMENT: JN-3	
INSTRUCTIONS: 1. Refer to the DC-ADM 804 for procedures on the inmate grievance system. 2. State your grievance in Block A in a brief and understandable manner. 3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.		
A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages. On 10/09/01 I sent my radio out to be repaired at this place American Institutional Supply Inc. 49 Rose St. Stoughton, MA. 02072. Okay they were not able to repair the automatic stop button for the tape to stop when it is finished. But my radio was working great good before I sent it out. So I had my Counselor Mr. White to call them before he went on his holiday break, but he wasn't able to catch the right person there. So my Unit Manager Ms. Bailey call them to tell them that they could use \$5.00 of some money had sent for repairs to make my radio. So I got my radio back on 12-05-01 and it wasn't playing on wednesday and then I ask what happen to my radio they tell me that the company sent my radio like that. See I have brought things like books and when I got them the (shut) should be in the library. B. List actions taken and staff you have contacted, before submitting this grievance. Because I have a pair of boots from Hot Bird Sports that are a little over a year old and you can look at the laces how because they were sabotage in R&D. I wrote to the Superintendent and he is in denial that it is staff members don't do no wrong. But I want the point I'm tired of you people keep taking from me over and over when it's costing me more money.		

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date

DC-ADM 804. Inmate Grievance System

DC-804
Part 3

Attachment C
COMMONWEALTH OF PENNSYLVANIA
Department of Corrections
SCI- HLM

DATE:
SUBJECT:
TO:

12/10/01
Grievance Rejection Form
James Stevenon, OK9729 J-13
Kathy Emel
Facility Grievance Coordinator

FOR OFFICIAL USE ONLY
9207
GRIEVANCE NUMBER

The attached grievance is being returned to you because you have failed to comply with the provision(s) of DC-ADM 804, Inmate Grievance System:

1. _____ Grievances related to the following issues shall be handled according to procedures specified in the policies listed and shall not be reviewed by the Facility Grievance Coordinator:
 - a. DC-ADM 801-Inmate Disciplinary and Restricted Housing Unit Procedures
 - b. DC-ADM 802-Administrative Custody Procedures
 - c. other policies not applicable to DC-ADM 804.
2. _____ Block B must be completed, as per the Instruction #3 of the Official Inmate Grievance Form.
3. X The grievance does not indicate that you were personally affected by a Department or facility action or policy.
4. _____ Group grievances are prohibited.
5. _____ The grievance was not signed and/or dated.
6. _____ Grievances must be legible and presented in a courteous manner.
7. _____ The grievance exceeded the two (2) page limit. Description needs to be brief.
8. _____ Grievances based upon different events shall be presented separately.
9. _____ The grievance was not submitted within fifteen (15) working days after the events upon which claims are based.
10. _____ You are currently under grievance restriction. You may not file any grievances until _____
Date
11. _____ Grievance involves matter(s) that occurred at another facility and should be directed by the inmate to the appropriate facility.
12. _____ The issue(s) presented on the attached grievance has been reviewed and addressed previously.

Your issue is with American Institutional Supply.

RECEIVED & FILED
COMMONWEALTH COURT
OF PENNSYLVANIA

2002 FEB 22 A 10:03

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
petitioner / plaintiff
vs.
PENNSYLVANIA DEPARTMENT OF
CORRECTIONS et al

Commonwealth of Pennsylvania
County of Clearfield
Docket, No.
81 MB 2002

PROOF OF SERVICE

I James Starinson, Petitioner / Plaintiff hereby
certified That I am this 02-06 day of 2002,
SERVED THE Prothonotary's Office of This Honorable
Court Two Summons (1) one original (1) one copy
To Respectfully Request That The Prothonotary Mr.
Daniel R Schuckers, To serve Each defendant with
The Attach Summons, To The Defendants Listed
Below. With This Proof of Service which is True and
Correct copy upon The Persons in The manner Listed, which
Service Satisfies The Requirements of Pa. R. A. P. 1210
BY THE WAY OF U.S. FIRST CLASS MAIL AND BY
REQUEST COMMONWEALTH OF PENNSYLVANIA TO HAVE
SERVICE BY THE STATE POLICE. TO DEFENDANTS

OFFICE OF THE PROTHONOTARY
MR Daniel R. Schuckler's Two Summons For Each Defendant
COMMONWEALTH COURT, OF PENNSYLVANIA LISTED Below.
P.O. Box 11730
Harrisburg Pa 17108

PENNSYLVANIA, DEPARTMENT OF
CORRECTIONS, MR JEFFRY A BEARD,
Secretary of D.O.C, 2520 LISBURN
Road, PO Box 598, CAMPHILL, PA
17001-0598 COUNTY OF DAUPHIN

Thomas L. Jamis, Chief Grievance
Coordinator
Pa Department of Corrections
2520 Lisburn Road P.O. Box 598
CAMP HILL, PA 17001-0598 DAUPHIN
County.

John m McCullough, Superintendent
of SCI HOUTZDALE 2007 STATE ROUTE
P.O. Box 1000 HOUTZDALE PA 16698-
1000 County of Clearfield.

MS KATHY EMEL, Grievance Coordinator
FOR SCI HOUTZDALE, 2007 STATE ROUTE
P.O. Box 1000 HOUTZDALE, PA 16698-1000
County of Clearfield

MS NORENE P. Greenleaf, CHCA THE
HEAD PERSON, OF SCI HOUTZDALE
MEDICAL DEPARTMENT 2007
STATE ROUTE P.O. Box 1000
HOUTZDALE PA 16698-1000 COUNTY OF Clearfield.
(2)

MR Jeffrey Pomeroy, Doctor Medical Department of
SCI HOUTZDALE 2007 STATE ROUTE
P.O. Box 1000 HOUTZDALE PA 16698-1000
COUNTY OF CLEARFIELD,

Randy Schharns, Male Nurse Medical Department of
SCI HOUTZDALE 2007 STATE ROUTE
P.O. Box 1000
HOUTZDALE, PA 16698-1000 COUNTY OF CLEARFIELD.

VERY TRULY YOURS

(S) James Stevenson

Petitioner / Plaintiff

JAMES STEVENSON

DK9729

P.O. Box 1000

2007 STATE ROUTE

HOUTZDALE PA, 16698-1000

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / Plaintiff

VS.

PENNSYLVANIA DEPARTMENT OF

CORRECTIONS ET AL

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF DAUPHIN

FORM OF WRIT OF SUMMONS

To Defendant Jeffrey R. Bond, Secretary, of
PENNSYLVANIA Department of Corrections, Located at 2520
Lisburn Road P.O. Box 598 Camp Hill, Pa 17001-0598
County of Dauphin

You are hereby Notified That, James Stevenson
has (have) commenced an ACTION Against you.

Dated:

Daniel R. Schuckers, Prothonotary

SEAL OF THE COURT.

By _____

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

COMMONWEALTH OF PENNSYLVANIA

Petitioner / plaintiff

COUNTY OF DAUPHIN DEFENDANT.

VS

DOCKET NO.

PENNSYLVANIA DEPARTMENT

COMMONWEALTH OF PENNSYLVANIA

OF CORRECTIONS et al

COUNTY OF DAUPHIN

FORM OF WRIT OF

SUMMONS

TO Defendant Thomas L. James Chief Grievance
Coordinator For Pennsylvania Department of Corrections
Located at P.O. Box 598 Camp Hill, PA 2520 Lisbon
Road P.O. Box 598 Camp Hill PA 17001-0598 DAUPHIN COUNTY

You are hereby Notified That, James Stevenson,
has (have) commenced An Action Against you

DATED:

Daniel R. Schuckers Prothonotary

SEAL OF THE COURT

BY _____

(DEPUTY)

VERY TRULY YOURS

James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / Plaintiff

VS.

Commonwealth of Pennsylvania

County of Clearfield Defendant.

Docket No.

PENNSYLVANIA DEPARTMENT

OF CORRECTIONS et al

Commonwealth of Pennsylvania

County of Dauphin Court House

FORM OF WRIT OF

SUMMONS

To Defendant Superintendent John M. McCullough
Sch Hantzdale

Located at 2007 State Route / P.O. Box 1000 Houtzdale

Pennsylvania 16698-1000, County of Clearfield

You are hereby notified that, James Stevenson,
has (have) commenced an action against you

Date

Daniel R. Schuckers Prothonotary

SEAL OF THE COURT.

By _____

(Deputy)

VERY TRULY YOURS

James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner/Plaintiff

VS

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

Commonwealth of Pennsylvania

County of Clearfield

DOCKET

Commonwealth of Pennsylvania

County Dauphin Courthouse

FORM OF WRIT OF

SUMMONS

TO Defendant Ms Kath Emel Grievance Coordinator

For SC# HENTZDALE, Located at 2007 State Route

P.O. Box 1000 HENTZDALE, PA 16658-1000 Clearfield County

You are hereby notified that, James Stevenson,

has (have) commenced an action against you

Dated:

Daniel R. Schuckers, Prothonotary

By _____

(Deputy)

Seal of the Court

Very Truly Yours
James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

PETITIONER / PLAINTIFF

VS.

PENNSYLVANIA DEPARTMENT

OF CORRECTIONS et al

Commonwealth of Pennsylvania

County of Clearfield

Docket No

FORM OF WRIT OF

SUMMONS

TO DEFENDANT MS Noreen, P. Green Leaf, CHCA THE Head
Person of SCI HENTZDALE Medical Department Located
State Route, P.O. Box 1000 HENTZDALE PA 16698-1000

You are hereby Notified That, James Stevenson,
has (have) commenced an Action Against you.

Dated

Denial Schuckers, Prothonotary
(Deputy)

Seal of The Court.

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
PETITIONER / PLAINTIFF
VS.
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS ET AL
COMMONWEALTH OF PENNSYLVANIA
COUNTY OF DAUPHIN DEFENDANT
DOCKET NO. 81 MD 2002
COUNTY OF DAUPHIN COURTHOUSE

FORM OF WRIT OF
SUMMONS

TO Defendant, Jeffrey A. Beard Secretary of
PENNSYLVANIA Department of Corrections, Located
at 2520 LISBURN Road P.O. Box 598 CAMPHILL, Pa 17001-0598
You are hereby Notified That, James Stevenson,
has (have) commenced an Action Against you

Date

Daniel R. Schuckers, Prothonotary

SEAL OF THE COURT

BY

(Deputy)

Very Truly Yours
James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
commonwealth of Pennsylvania
JAMES STEVENSON
Petitioner / Plaintiff
VS.
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al
COUNTY OF DAUPHIN Defendant.
DOCKET NO.
COMMONWEALTH OF PENNSYLVANIA
COUNTY OF DAUPHIN COURTHOUSE

FORM OF WRIT OF
SUMMONS

TO Defendant, Jeffrey A. Beard Secretary of
PENNSYLVANIA Department of Corrections, Located
at 2520 LISBURN Road P.O. Box 598 CAMPHILL, Pa 17001-0598
You are hereby Notified That, James Stevenson,
has (have) commenced an Action Against you

Date

Daniel R. Schuckers Prothonotary

SEAL OF THE COURT

By _____

(Deputy)

VERY TRULY YOURS

James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / Plaintiff

VS.

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF DAUPHIN

PENNSYLVANIA DEPARTMENT OF
CORRECTIONS ET AL

FORM OF WRIT OF SUMMONS

TO Defendant Thomas L James Chief Grievance Coordinator of
PENNSYLVANIA Department of Corrections, Located at 2520
Lisburn Road P.O. Box 598 Camp Hill, Pa 17001-0598
County of Dauphin

You are hereby Notified That, James Stevenson
has (have) commenced an ACTION Against you.

Dated:

Daniel R. Schuckers, Prothonotary

SEAL OF THE COURT.

By _____

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner / Plaintiff
VS
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

1. COMMONWEALTH OF PENNSYLVANIA
2. COUNTY OF DAUPHIN
3. DOCKET NO.
4. COMMONWEALTH OF PENNSYLVANIA
5. COUNTY OF DAUPHIN COURTHOUSE

FORM OF WRIT OF
SUMMONS

TO Defendant Thomas L James Chief Grievance
Coordinator for Pennsylvania Department of Corrections
Located at P.O. Box 598 Camp Hill, Pa 2520 Lisdurn
Road P.O. Box 598 Camp Hill Pa 17001-0598

You are hereby Notified That, James Stevenson,
has (have) commenced An Action Against you

DATED:

Daniel R. Schuckers Prothonotary

SEAL OF THE COURT

BY _____
(Deputy)

VERY TRULY YOURS

James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner / Plaintiff
V.
PENNSYLVANIA DEPARTMENT OF
CORRECTIONS et al

, COMMONWEALTH OF PENNSYLVANIA
, COUNTY of Clearfield
, DOCKET NO.
;

FORM OF WRIT OF
SUMMONS

TO Defendant John M. McCullough Superintendent of
SCI HOUTZDALE Located at 2007 State Route,
P.O. Box 1000 HOUTZDALE Pa. 16698-1000 County of
Clearfield.

You are hereby Notified That, James Stevenson,
has (have) commenced An Action Against you.

Dated

Daniel R. Schuckers, Prothonotary

By _____
(Deputy)

Seal of The Court.

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / Plaintiff

vs.

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

Commonwealth of Pennsylvania

County of Chester Defendant

Docket No.

Commonwealth of Pennsylvania

County of Dauphin

FORM OF WRIT OF
SUMMONS

To Defendant Superintendent John M. McCullough
Located at 2007 State Route / PO Box 1000 Houtzdale
Pennsylvania 16698-1000, Sci Houtzdale Court Clarified
you are hereby notified that, James Stevenson,
has (have) commenced an Action Against you

Date

Daniel R. Schuckers Prothonotary

SEAL OF THE COURT.

By _____

(Deputy)

VERY TRULY YOURS

James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner / Plaintiff
VS.
PENNSYLVANIA DEPARTMENT
CORRECTIONS et al

Commonwealth of Pennsylvania
County of Clearfield Defendant
Docket No.
Commonwealth of Pennsylvania
County of Dauphin Court House

FORM OF WRIT OF

SUMMONS

TO Defendant MS. KATH EMIL GRIFFIN Coordinator
FOR SCI HOUTSDALE Located at 2007 State Route
P.O. Box 1000 HOUTSDALE, PA 16658-1000 Clearfield County
You are hereby Notified That, James Stevenson,
has (have) commenced an Action Against you.

Dated

Daniel R. Schuckers, Prothonotary

By _____

(Deputy)

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner / Plaintiff
VS.
PENNSYLVANIA DEPARTMENT OF
CORRECTIONS et al

Commonwealth of Pennsylvania
County of Clearfield
Docket No.

FORM OF WRIT OF

SUMMONS

TO Defendant MS KATHY EMIL GRIFFIN Coordinator
FOR SCI HOUTSDALE Located at 2007 State Route
P.O. Box 1000 HOUTSDALE Pa. 16658-1000 County of
Clearfield.

You are hereby Notified That, James Stevenson,
has (have) commenced an Action Against you.

Dated

Daniel R. Schuckers, Prothonotary

By _____

(Deputy)

Sign of the Court.

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON , COMMONWEALTH OF PENNSYLVANIA
Petitioner / Plaintiff , COUNTY OF CLEARFIELD
V. , DOCKET NO.
PENNSYLVANIA DEPARTMENT OF
CORRECTIONS et al

FORM OF WRIT OF
SUMMONS

TO Defendant MS KATHY EMIL GRIVANEC Coordinator
FOR SCI HOUTSDALE Located at 2007 STATE ROUTE
P.O. BOX 1000 HOUTSDALE PA. 16698-1000 COUNTY OF
CLEARFIELD.

You are hereby Notified That, James Stevenson,
has (have) commenced An Action Against you.

Dated

Daniel R Schuckers, Prothonotary

By _____
(Deputy)

Seal of The Court.

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner / Plaintiff
VS.
PENNSYLVANIA DEPARTMENT
CORRECTIONS et al

Commonwealth of Pennsylvania
County of Clearfield Defendant
Docket No:
Commonwealth of Pennsylvania
County of Dauphin Courthouse

FORM OF WRIT OF

SUMMONS

TO Defendant MS. Kath Emel Grivner Coordinator
FOR SCI HOUTZDALE Located at 2007 State Route
P.O. Box 1000 HOUTZDALE, PA 16658-1000 Clearfield County
You are hereby Notified That, James Stevenson,
has (have) commenced an Action Against you.

Dated

Daniel R. Schuckers, Prothonotary

By _____
(Deputy)

Seal of the Court

Very Truly yours
James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / Plaintiff

VS

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF CLEARFIELD DEFENDANT

DOCKET NO

PENNSYLVANIA DEPARTMENT

COMMONWEALTH OF PENNSYLVANIA

OF CORRECTIONS AT AT

COUNTY OF DAUPHIN COURTHOUSE

FORM OF WRIT OF

SUMMONS

TO Defendant MS Norene P. Greenleaf, CHCA The Head
Person of 362 HENTZDALE Medical Department Located
at 2007 STATE Route P.O. Box 1000 HENTZDALE,
Pa 16648 - 1000 CLEARFIELD COUNTY.

You Are hereby NOTIFIED That, James Stevenson,
has (have) commenced An Action Against You.

Dated

Daniel R. Schuckers Prothonotary

By _____

(Deputy)

Seal of The Court

Very Truly Yours
(S) James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / Plaintiff

VS

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF CLEARFIELD DEFENDANT

DOCKET NO

PENNSYLVANIA DEPARTMENT

OF CORRECTIONS AT AT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF DAUPHIN COURTHOUSE

FORM OF WRIT OF

SUMMONS

TO Defendant MS Norene P. Grunleaf, CHCA The Head
Person of SCI HENTZDALE Medical Department Located
at 2007 STATE ROUTE P.O. Box 1000 HENTZDALE,
Pa 16698 - 1000 CLEARFIELD COUNTY

You are hereby NOTIFIED THAT, James Stevenson,
has (have) commenced an ACTION Against you.

Dated

Daniel R. Schuckers Prothonotary

BY _____

(Deputy)

Seal of the Court

Very Truly yours

(S) James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner/Plaintiff
VS
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al
COMMONWEALTH OF PENNSYLVANIA
COUNTY OF CLEARFIELD
DOCKET NO.

FORM OF WRIT OF
SUMMONS

TO Defendant MR Jeffrey Pomranitz Doctor For SCI
HOUTZDALE Medical Department, Located AT 2007
State Route P.O. Box 1000 HOUTZDALE PA 16658-1000
COUNTY OF CLEARFIELD.

You are hereby Notified That James Stevenson has
(have) commenced An Action Against you

Dated

Denial R. S. Schuckers, Prothonotary

By _____

Seal of The Court

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner / Plaintiff
V.S.
COMMONWEALTH OF PENNSYLVANIA
COUNTY OF CLEARFIELD DEFENDANT
DOCKET NO.

PENNSYLVANIA DEPARTMENT OF CORRECTIONS ET AL.
COMMONWEALTH OF PENNSYLVANIA
COUNTY OF DAUPHIN ^{COURTHOUSE} ~~COURTHOUSE~~

FORM OF WRIT OF SUMMON

To Defendant Jeffrey Pomranitz The Doctor of SCI
HOUTZDALE'S Medical Department Located at 2007
State Route, P.O. Box 1000 HOUTZDALE PA 16698-1000
You are hereby Notified That, James Stevenson,
has (have) commenced an action against you.

Dated

Daniel A. Schuckers Prothonotary

BY _____

(Deputy)

Seal of the Court

VERY TRULY YOURS
(S) James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
vs.
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al
COMMONWEALTH OF PENNSYLVANIA
COUNTY OF CLEARFIELD DEFENDANT
DOCKET NO.
COMMONWEALTH OF PENNSYLVANIA
COUNTY OF DAUPHIN COURTHOUSE

FORM OF WRIT OF SUMMONS

To Defendant Randy Schnarrs male Nurse AT SCI HOUTZDALE
Medical Department located AT 2007 State Route, P.O. Box 1000
HOUTZDALE, PA 16898-1000 County of Clearfield

You are hereby notified that, James Stevenson has (have)
commenced an action against you.

Dated:

Denial R. Schuckers, Prothonotary

BY _____

Deputy

Seal of the Court,

VERY TRULY YOURS
(s) James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
Petitioner Plaintiff
VS
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al
i. COMMONWEALTH OF PENNSYLVANIA
i. COUNTY OF CLEARFIELD
i. DOCKET NO.

FORM OF WRIT OF
SUMMONS

TO Defendant MR Randy Schnarrs male Mares at SCI
HOUTZDALE Medical Department Located at 2007
STAT. ROUTE P.O. Box 1000 HOUTZDALE PA 16658-1000
County of Clearfield.

You are hereby Notified That James Stevenson has
[have] commenced An Action Against you

Dated

Daniel R. S. Schuckers, Prothonotary

B2

Seal of The Court

I N T H E C O M M O N

RECEIVED
COMMONWEALTH COURT
OF PENNSYLVANIA

2002 FEB 22 A 10:03

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON

VS

, DOCKET NO 81 MD 2002

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS ET AL

SUBPOENA ISSUANCE

SERVICE COMPLIANCE

FEEES PRISONERS

I James Stevenson hereby Respectfully Request of
a party, The Prothonotary Shall Issue a subpoena signed
and under the seal of the Court upon the person named
Below. To A Person out-side This Commonwealth.

John Doe owner of Institutional
Supply INC. Located AT SToughton
MA, 02072. BY any form of mail

SEE 42 Pa C.S.A. § 5903 For The Compensation and
Expenses of witnesses see also Evans & Otis Elevator
Co Pa. 13 168 A2d 573 (1967).

Thank you for you time and help in this matter
send to

John Doe owner of the

Institutional Supply Co.

49 ROSE STREET

MA, 02072.

Court Seal.

Very Truly yours
James Stevenson

Dated. 02-06-02

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

v. S.

DEPART

IN THE COMMONWEALTH COURT OF PENNSYLVANIA
JAMES STEVENSON
VS
PENNSYLVANIA DEPARTMENT
OF CORRECTIONS ET AL

DOCKET NO.

SUBPOENA ISSUANCE
SERVICE COMPLIANCE
FEE PRISONERS

I James Stevenson hereby Respectfully Request of
a Party, The Prothonotary Shall Issue a subpoena signed
and under The Seal of The court upon The person Named
Below To A person out of Philadelphia county.

John Doe The Head of Philadelphia
County Prison C.F.C.F. Medical Department Located
at 7901 State Road Philadelphia 19136

BY ANY FORM OF MAIL.

SEE 42 Pa C.S.A. § 5903 for The compensation and
Expenses of witnesses See ALSO EVANS V. OTIS ELEVATOR
CO. PA, 13 168 A2d 573 (1967).

Thank you for your Time and Help in This
MATTER.

Dated: 02-06-02

Very Truly Yours
James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

VS.

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

DOCKET No.

AFFIDAVIT OF WITNESS

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF CLEARFIELD

} John Doe Head of medical
{ Department at C. F. C. F. Philadelphia

I John Doe, witness do hereby state The Following under
The penalty of perjury:

1) That in Respects, to my statements made As follows:

2)

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

VS

DOCKET NO

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

AFFIDAVIT OF WITNESS

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF CLEARFIELD

{ John Doe owner of INSTITUT-
{ iona Supply INC.

I John Doe, witness do hereby state the following under
the penalty of Perjury:

That in response to MR James Stevenson Radio That:

1)

2)

3)

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / plaintiff

v.

PENNSYLVANIA DEPARTMENT

OF CORRECTIONS et al

DOCKET NO.

SERVICE OUTSIDE THE

COMMONWEALTH

I James Stevenson, Petitioner / Plaintiff hereby Requests
With The Upmost Respect To Ask The Prothonotary
Of This Honorable To Serve The Subpoena To
John Doe Owner Of The Institutional Supply INC
001 MA. 02072 AT 49 ROSE STREET Under Rule
404(b) A Return of Service Shall Set Forth The date
Time _____ Place _____ And manner
of service, To The Above Name Person and Place
Served And Any Other Facts Necessary For The
Court to determine whether proper service has been
made. To Serve my Witness. outside This Commonwealth.
Dated 02-06-02

Very Truly Yours
(S) James Stevenson

RETURN OF SERVICE

ON THE _____ day of _____ I James
Stevenson, John Doe owner of Institutional Supply
INC. with the foregoing Subpoena by: (Describe
method of service) BY THE WAY OF U.S. FIRST
CLASS MAIL CERTIFIED RECEIPT MAIL, BY THE COURT.
I verify that the statements in this Return of service
are true and correct. I understand that false statements
herein are made subject to the penalties of 18 Pa
C.S.A. § 4904 relating to falsification to
authorities.

I hereby state that I am requesting a hearing
in connection with depositions and before Arbitrators.
For see Hunt2DAL staff members are saying the
above named John Doe sent my Radio back unfixed
and it has no sound at all they only had to fix
the automatic stop button, other than that my Radio
was working real good. You are being blamed for
breaking my Radio. By the staff members in SCI
Hunt2DALE.

Date: 02-06-02

Signature
James Stevenson

IF you fail to ATTend or to produce the Estimate
Statement Form or Things Required by This Subpoena,
you may be Subject to the sanctions Authorized
by Rule 234.5 of the Pennsylvania Rules of Civil
Procedure, including but NOT limited to costs,
Attorney fees and Imprisonment

REQUESTED BY

JAMES STEVENSON

502 HOUTZDALE

P.O. Box 1000

HOUTZDALE, PA 16698-1000

BY THE COURT

DATE:

By _____

(Name of Prothonotary)

Seal of the Court.

RETURN OF SERVICE (Reverse side of
Subpoena)

BY THE COURT

DATE

BY _____

NAME OF PROTHONOTARY

Seal of The Court

RETURN OF SERVICE

On the _____ day of _____, I James
Stevenson, John Doe The Head Person for C F C F medical
Department: with the foregoing subpoena to have
this Honorable Courts prothonotary to have the
Pennsylvania State Police serve the subpoena.
I verify that the statements in this Return of
Service are true and correct I understand that
false statements herein are made subject to the
penalties of 18 Pa. C.S.A. § 4904 relating to
Falsification to Authorities

Dated: 02-06-02

Signature

James Stevenson

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON

Petitioner / Plaintiff

DOCKET NO.

vs.

PENNSYLVANIA DEPARTMENT OF

CORRECTIONS, et al

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF

SUBPOENA TO ATTEND AND TESTIFY

TO JOHN DOE OWNER OF INSTITUTIONAL SUPPLY INC.

Witness: Located AT 49 ROSE STREET SToughton

MASSachusetts 02072

1. YOU ARE Ordered by The Court To Come To

PENNSYLVANIA ON

AT

0 Clock — M — To Testify on behalf of James Stevenson
in The above case, and To Remain until excused.

2. And Bring with you The Following: The Estimates
Form For The Repairs of my Radio of what was
Wrong With my Radio. For it came Back without
Sound, Co Buck AT SCI HOUTSDALE R and D
of The Receiving Room is stating it came Back
With Sound Working.

We do not have your medication here. I had my mother call SGT HEUTZDALE to send my medication down to C.F.C.F. My mother had to make 3 phone calls to talk to MS Greenleaf who is the head person of SGT HEUTZDALE medical Department. Then MS Greenleaf had to order the medication and when I came back of C.F.C.F. in Philadelphia, SGT HEUTZDALE is now blaming C.F.C.F. stating my issues with Philadelphia NOT us. For we sent a 5 day supply with you when you went on ATA as per policy.

Your mother phoned me and I contacted medical staff and informed them of the medications you were on.

This is the answer to my Grievance. Philadelphia C.F.C.F. would of had my medication that would of gave it to me. I need the above named person to come to a hearing on my Petition for Review that is filed in the Commonwealth of Pennsylvania.

If you fail to attend or to produce the medical records or the order of the medication required by this subpoena you may be subject to the sanctions authorized by Rule 234.3 of the Pennsylvania Rules of Civil Procedure, including but not limited to costs attorney fees and imprisonment

REQUESTED BY

sign James Stevenson

JAMES STEVENSON
DK 9729

SGT HEUTZDALE
P.O. Box 1000
HEUTZDALE, PA 16698-1000

RECEIVED & FILED
COMMONWEALTH COURT
OF PENNSYLVANIA

2002 FEB 22 A 10:03

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

FILED

JAMES STEVENSON,
Petitioner
v.
PENNSYLVANIA DEPARTMENT OF
CORRECTIONS et al.,
Respondents

:
:
:
:

MAR 22 2002

William A. Shaw
Prothonotary

No. 81 M.D. 2002

02-447-C2

PER CURIAM

ORDER

NOW, February 27, 2002, upon consideration of petitioner's pro se complaint, and it appearing that petitioner seeks money damages from respondents for an alleged violation of petitioner's constitutional rights, and it further appearing that this court lacks jurisdiction over tort actions for money damages whether based on common law trespass or 42 U.S.C. §1983 because such actions are in the nature of trespass in that they seek money damages as redress for an unlawful injury and are properly commenced in the court of common pleas, see Fawber v. Cohen, 516 Pa. 353, 532 A.2d 429 (1987); Balshy v. Rank, 507 Pa. 384, 490 A.2d 415 (1985), this matter is transferred to the Court of Common Pleas of Clearfield County.

The Chief Clerk shall certify a photocopy of the docket entries of the above matter and the record to the prothonotary of the Court of Common Pleas of Clearfield County.

Certified from the Record

FEB 28 2002
and Order Exit

Miscellaneous Docket Sheet**Commonwealth Court of Pennsylvania****Docket Number: 81 MD 2002****Page 1 of 3****March 21, 2002**

James Stevenson, Jr.,
 Petitioner
 v.
 Pennsylvania Department of
 Corrections et al.,
 Respondents

FILED

MAR 22 2002

Initiating Document: Petition for Review

Case Status: Closed

Case Processing Status: February 27, 2002 Completed

Journal Number:

Case Category: Miscellaneous

CaseType: Inmate Petition for Review

William A. Shaw
 Prothonotary

Consolidated Docket Nos.:**Related Docket Nos.:****COUNSEL INFORMATION****Petitioner** Stevenson, James

Pro Se: ProSe

Appoint Counsel Status:

IFP Status: Pending

Attorney: Stevenson Jr., James B.

Bar No.:

Law Firm:

Address: DK-9729

P.O. 1000

Houtzdale, PA 16698-1000

Phone No.:

Fax No.:

Receive Mail: Yes

Certified from the Record**MAR 21 2002****and Order Exit****Respondent** Department of Corrections, et al

Pro Se:

Appoint Counsel Status:

IFP Status:

Attorney: Farnan, Michael A.

Bar No.:

Law Firm:

Address: Office of Chief Counsel

55 Utley Drive

Camp Hill, PA 17011

Phone No.:

Fax No.:

Receive Mail: Yes

Miscellaneous Docket Sheet**Commonwealth Court of Pennsylvania****Docket Number: 81 MD 2002****Page 2 of 3****March 21, 2002****TRIAL COURT/AGENCY INFORMATION**

Court Below: Department of Corrections

County:

Division:

Date of Order Appealed From:

Judicial District:

Date Documents Received: February 22, 2002

Date Notice of Appeal Filed:

Order Type:

Judge:

Lower Court Docket No.: DK9729

ORIGINAL RECORD CONTENTS**Original Record Item****Filed Date****Content/Description****Date of Remand of Record:****BRIEFING SCHEDULE****DOCKET ENTRIES**

Filed Date	Docket Entry/Document Name	Party Type	Filed By
February 22, 2002	Petition for Review Filed	Petitioner	Stevenson, James
February 22, 2002	Application to Proceed In Forma Pauperis	Petitioner	Stevenson, James
February 27, 2002	Transfer		Per Curiam
The matter shall be transferred to the Court of Common Pleas of Clearfield County.			
March 21, 2002	Transfer to Court of Common Pleas Clearfield County		

Commonwealth Court Filing Office

Miscellaneous Docket Sheet

Commonwealth Court of Pennsylvania

Docket Number: 81 MD 2002

Page 3 of 3

March 21, 2002



SESSION INFORMATION

Journal Number:

Consideration Type:

Date Listed/Submitted:

DISPOSITION INFORMATION

Related Journal Number:

Judgment Date: 2/27/2002

Disposition Category:

Disposed Before Decision

Disposition Author: Per Curiam

Disposition:

Transfer

Disposition Date: 2/27/2002

Dispositional Comments: The matter shall be transferred to the Court of Common Pleas of Clearfield County.

Dispositional Filing:

Author:

Filed Date:

REARGUMENT/RECONSIDERATION/REMITTAL

Reargument/Reconsideration Filed Date:

Reargument Disposition:

Date:

Record Remitted:



Commonwealth Court of Pennsylvania

Charles R. Hostutler
Deputy Prothonotary/Chief Clerk

March 21, 2002

P.O. Box 11730
Harrisburg, PA 17108
717-255-1650

TO:

RE: Stevenson v. Dept. of Corrections
No.81 MD 2002

Trial Court/Agency Dkt. Number: DK9729

Trial Court/Agency Name: Department of Corrections

Annexed hereto pursuant to Pennsylvania Rules of Appellate Procedure 2571 and 2572
is the entire record for the above matter.

Contents of Original Record:

Original Record Item	Filed Date	Description
----------------------	------------	-------------

Date of Remand of Record:

Enclosed is an additional copy of the certificate. Please acknowledge receipt by signing,
dating, and returning the enclosed copy to the Prothonotary Office or the Chief Clerk's office.

A handwritten signature in black ink, appearing to read "William A. Shanley".

Commonwealth Court Filing Office

A handwritten signature in black ink, appearing to read "William A. Shanley".

Signature

3-22-02

Date

William A. Shanley

Printed Name

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON
Petitioner / Plaintiff

V.

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

• COMMONWEALTH OF PENNSYLVANIA
• COUNTY'S OF CLEARFIELD AND
• DAUPHIN
• DOCKET NO.

81 MD 2002

MOTION TO PROCEED IN FORMA PAUPERIS

I James Stevenson, hereby states the information concerning my inability to pay the cost of this proceeding pursuant to Rule 561 of Pa.R.APP. PROC., is true and correct, and made subjected to the penalties set forth in 18, Pa.C.S.A. § 4904 relating to unsworn falsification to authorities,

I state under the penalties provided in 18, Pa.C.S.A. 4904 THAT:

- 1) I am the Petitioner, in the matter within and because of my financial situations, I am unable to pay the fees and costs of this proceeding or any other proceeding hereafter.
- 2) The questions to my unemployment to pay the fees and cost in applying judicial actions are true and correct.
- 3) I have not been employed due to my incarceration, and not have any income, pensions, annuity, social security benefits, support payments, or my I state no real-estate, stocks, bonds, notes, automobiles or any other valuable property.

I understand that false statements made in this verified statements are subject to the penalties provided by law in the second degree.

Dated 02-06-02

FILED

MAR 22 2002

William A. Shaw
Prothonotary

Respectfully submitted

(s) James Stevenson
James Stevenson

P.O. Box 1000

HOUTZDALE, PA 16698-1000

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

JAMES STEVENSON
Petitioner / plaintiff

V.

PENNSYLVANIA DEPARTMENT
OF CORRECTIONS et al

COMMONWEALTH OF PENNSYLVANIA
COUNTY'S OF CLEARFIELD AND
DAUPHIN,

DOCKET NO.

MOTION TO PROCEED IN FORMA PAUPERIS

I James Stevenson, hereby states the information ~~concerning~~ concerning my inability to pay the cost of this proceeding pursuant to Rule 561 of The PA.R. APP. PROC., is true and correct, and made subjected to the penalties set forth in 18 Pa. C.S.A. § 4904 relating to unsworn falsification to authorities, I state under the penalties provided in 18 Pa. C.S.A. 4904 THAT:

- 1) I am the petitioner in the matter within and because of my financial situations, I am unable to pay the fees and costs of this proceeding or any other proceeding hereafter.
- 2) The questions to my unemployment to pay the fees and cost of this proceeding or any other proceeding hereafter.

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

COMMONWEALTH OF PENNSYLVANIA

JAMES STEVENSON

COUNTY OF CLEARFIELD

Petitioner / Plaintiff

DOCKET NO.

V.S.

PENNSYLVANIA DEPARTMENT OF

CORRECTIONS, et al

PETITION FOR REVIEW IN NATURE OF CIVIL
ACTION OR /SPECIAL RELIEF/ POTENTIAL MEDICAL
MALPRACTICE CASE.

PRELIMINARY INJUNCTION

TO THE HONORABLE JUDGE OF SAID COURT:

Now comes Petitioner James Stevenson, "Pro-se", respectfully request this Honorable Court to issue a medical order(s) or other(s) order(s) against the above respondents for relief specified below. This court has original jurisdiction in this matter and granted by 42 Pa.C.S. § 761. In support of this request, the petitioner states the following.

1) The Petitioner, James Stevenson, is an inmate currently incarcerated at the State Correctional Institution at HUNTZDALE, located at 2007

State Route, P.O. Box 1000, Huntzdale, Pennsylvania

16678-1000 Clearfield County.

2) The Respondent, Pennsylvania Department of Corrections, is a State-wide Jurisdiction, and has its Principal Office located at 2520 Lisburn Road Camp Hill, Pennsylvania 17001-0598, County of Dauphin.

3) The Respondent, Jeffery Beard, Secretary of Pennsylvania Department of Correction located at 2520 Lisburn P.O. Box 598 Camp Hill, Pa 17001-0598 DAUPHIN COUNTY.

4) The Respondent, Thomas L. James, CHIEF Grievance Coordinator For The Pennsylvania Department of Corrections located at 2520 Lisburn P.O. Box 598 Camp Hill, Pa 17001-0598 DAUPHIN COUNTY.

5) The Respondent, John M. McCullough Superintendent of SCI HOUTZDALE located AT 2007 State Route P.O. Box 1000, HOUTZDALE, Pa 16698-1000 Clearfield County.

6) The Respondent, Kathy Emel, Grievance Coordinator For SCI HOUTZDALE, located at 2007 State Route P.O. Box 1000, HOUTZDALE, Pa 16698-1000, County of Clearfield.

7.) The Respondent, ms Norine P. Green-Leaf, C.H.C.A. The Head Parson, of SCI HOUTZDALE's medical Department Located at 2007 State Route P.O. Box 1000 HOUTZDALE, Pa, 16698-1000 Clearfield, County.

8.) The Respondent, Jeffery Pomirantz, The Doctor For SCI HOUTZDALE Located at 2007 State Route, P.O. Box 1000, HOUTZDALE, Pa 16698-1000 Clearfield County.

9.) The Respondent, Randy Schnarrs, M.A.L. NURSE AT SCI HOUTZDALE'S Medical Department, Located AT 2007 State Route P.O. Box 1000 HOUTZDALE, Pa 16698 1000 Clearfield County.

10.) This Court has original Jurisdiction To entertain This Civil Action Pursuant To 42 Pa.C.S. § 761

11.) The Petitioner / Plaintiff Avers That he is in Severe Pain, and is Suffering from The Pain in his Neck To his Lower Back, wears a Neck Brass That is old has No more Support To his Neck The medical Department fails To Exercise The degree of care and skill That a Physician or Surgeon of The Same medical specialty would use under Similar Circumstances often Shortened To med. mal.

12) All Respondents herein Named Are Adult Individual Citizens of The United States and Acted under The Color of State Law.

13) All Respondents herein Named Are sued in Their Individual, and personal private, Public official capacity at all Times, mentioned in This Complaint, As Each Respondent Acted under Color of State Law while denying The Plaintiff of his Constitutional Rights.

Petitioner Request That a Jury Trial be Demanded.

14) This is A Civil Rights Action Filed for damages of Relief Alleging The denial of Eighth Amendment

guarantees to The prison's medical setting Failure

To provide adequate medical care (constitute cruel and unusual punishment) As A Inmate I have The

Right To be free from punishment under The due process clause. To preclude "deliberate Indifference

To my serious medical needs, By Doctor Pomerantz and MS Norene Greenleaf and Nurse Randy Schnarr.

Plus Not Receiving my Pain medication for 4 1/2 days for I went on ATA to Philadelphia County

for Court Had To get my 83 year old mom To

Call up To HOUTZDALE Medical Department To

get in touch with MS Greenleaf To send and order

Down so The County Jail would Give me my medication

SCI HOUTZDALE Medical Department was Negligence
For Failure To send my medication by NOT given it
To The OFFICERS in SCI HOUTZDALES RECEIVING ROOM
To give To The Phila Sheriffs with The Rest of my
property That went down with me. They Are To give
The Sheriffs ~~our~~ medication for The days we are away
on A.T.A. This ACTION will show That The medical Depart-
ment AT SCI HOUTZDALE having No particular
Interest in or concers for: Neither good nor Bad medicine
Indifferent Not mATTing one way or The other.

STATEMENT OF CLAIM

1) Petitioner Asserts That He Filed a Grievance on
July 31, 01 on Ms Greenleaf is allowing medical STAFF
under Authority To perform using unprofessional conduct
That Leads To unproper medical care. She Allowed Doctor
Pomerantz order me All kinds of medications That don't
work or help with my severe pain I have in my Neck.
He is using me for a Lab Rat and Refused To send me
out for A MRI. For my Neck and Back, I wrote To
Ms Greenleaf on a Request on 7/12/01 For all The pain
I am in. for The medication is not working, she wrote
she said Remember you had a E.M.G Reading and with
The E.M.G Reading The pain is still The same. All I
Requested was To have and MRI For All This medications.
That Doctor Pomerantz is ordering is not working.

1. I replied to MS Greenleaf Answer of 7/13/01 I STATED SAW DR. POMERANTZ AFTER having to sign up for sick call so many times. The Answer is NOT receiving proper medical care. Grievance No 593 sent to be filed on 07/31/01 EXHIBIT A

2. PETITIONER, ASSERTS on 8/1/01 MS KATHY E. M. I. Filed The Grievance No 593 marked as EXHIBIT A. MS E. M. I. as The Grievance Coordinator did NOT Answer The Grievance. She Allowed MS. Greenleaf To Answer her own Grievance That WAS Filed against her. MS Greenleaf Answer Dated 8/2/01. Previous TESTS Shaven'T Clarified What The problem is. So Additional TEST Are Needed. See EXHIBIT B.

3. PETITIONER, ASSERTS on 8/8/01 He Filed his Appeal on Grievance 593. I STATED When I first got hurt was in 902 camp Hill I was treated for Pinch Nerves in my Neck. When I came to SC-2 HOUTSDALE Doctor POMERANTZ STATED I have Pinch Nerves, Now MS Greenleaf States Dr. POMERANTZ states If I had a pinch Nerve problem IT would of shown on The E.M.G. my complaint is I am being Refused A MRI And Dr. POMERANTZ has order me all kind of medications That Don'T work. MS Greenleaf Also Answered her own Grievance and about her staff using unprofessional conduct. Appeal is marked EXHIBIT C. on Grievance 593.

4) PETITIONER ASSERTS ON 8/15/2001 MR McCullough
SENT HIS ANSWER TO THE GRIEVANCE APPEAL NO 593

HE STATES STEVENSON IS DISAPPOINTED THAT THE TEST DID
NOT SHOW ANY NERVE PROBLEM. I CANNOT ALTER THE RESULTS
OF A DIAGNOSTIC TEST. THERE WAS NO OBJECTIVE OR ORGANIC
FINDING AND WE CAN'T KEEP ORDERING TESTS WHEN NOTHING
IS THERE. GRIEVANCE APPEAL IS DENIED. HE DOES NOT SAY
ANYTHING ABOUT THE UNPROFESSIONAL CONDUCT ALL THE
MEDICATIONS THAT DON'T WORK. AND HE REFUSED TO
HAVE MEDICAL TO ORDER A MRI TEST. AND MY PAIN
IS MORE AND MORE AS EACH DAY GOES ON AND ON.

I AM IN A LOT OF PAIN. MR McCullough ANSWER IS
UNJUST MARKET EXHIBIT D

5) PETITIONER ASSERTS THAT HE APPEALED JOHN M McCullough
JUDGMENT TO THE CHIEF GRIEVANCE COORDINATOR MR THOMAS
L. JAMES AT CENTRAL OFFICE REVIEW COMMITTEE IN CAMP HILL,
ON HIS ANSWER TO MY APPEAL. HE SHOWS PREJUDICE
I SHOWED HIM THAT MS GREENHEAT REFUSED TO HAVE
ANOTHER TEST DONE FOR A MRI DONE FOR MY PINCH NERVES
IN MY ^{Neck} ~~Neck~~ AND ALL THE PAIN AND SUFFERING WITH PAIN
IN MY LOWER BACK. I TOLD HIM I COULD NOT TAKE ALL
THE PAIN I AM IN. I AM LOSING A LOT OF SLEEP AT
NIGHT AND THAT I AM IN GREAT NEED OF PROPER MEDICAL
CARE.

and How Doctor Pomerant and Ms Greenleaf is just Abusing Their power. MR Thomas L. James Agreed with John m. McCullough and Ms Greenleaf Judgment and Denied my Appeal. I cannot go see / or To A Doctor on my own Free will To see what is wrong with my Neck I need A MRI done. All The Respondents Are Allowing Sct Huntzdale Medical Staff under John m. McCullough Authority To use unprofessional Conduct For The Prison Doctor Pomerant To Give unproper medical care. We had a Lot of Inmates die in Sct Huntzdale For They donot Like Spending money On Inmates who Hepatitis C For They Tell The Inmates The medication costs A Lot of money. So instead I focus Repeated Instances of A denial or delay's in Treatment, systemic And Chronic Problems I am very Concerned of my medical Needs in Sct Huntzdale. I had Filed A Lot of Grievances and They all get Denied from The Above Respondents. Whereas All my Requests and Grievances Are marked as Exhibits. To support Petitioner's Claim.

(6) Petitioner Asserts That he claims Deliberate Indifference Standard Applied To Actions Against Prison Officials Doctor Pomerant Failed To give Petitioner proper Treatment and Refused To send him

OUT TO RECEIVE FOR A M.R.I. I am in Great Pain have difficulty walking and I am complaining about my Neck, and Back, Pain over to my hip That pain is from The Neck, To Lower Back and ACROSS my Lower Back. Prison official Including Ms Greenleaf, Doctor Pomerantz, on Almost Seventy occasions medical malpractice on part of Prison medical Department precluded finding of deliberate indifference to Petitioner's Neck and Lower Back Pain cause by Doctor's Pomerantz's Neglect. I have serious medical need based on The fact That between NOV of 1997 When I got hurt down SCI Camp Hill. To Now and The Petitioner's Experienced great Pain in my Neck and Back.

7) Petitioner Asserts That he sent complaints to Mr. Jeffrey A Beard, Ph.D. Secretary of The Department of Corrections To direct The operations. He is Allowing The above Named Respondents who are under is Authority To Violate Plaintiff Stevensens U.S. Constitution 5th, 8th, and 14th Amendments Rights, By Allowing Ms Greenleaf and Doctor Pomerantz To Denied Adequate medical and use up professional conduct. And Allows The Chief Grievance coordinator Mr Thomas L James To Answer Grievances in A unlawful matter knowing The Grievances have merit he denied them.

All Grievances were Filed with merit and in Good Faith
For Relief, MR. James is Violating The due process of Law
and The Equal protection Law, and he is obstructions
of Justice. He is NOT Honest with his Answers To The
Grievances. He does not Answer them he Just Agrees
with John M. McCullough's Appeal Judgment and Mr.
Kathy E. Mail's Judgment on her Review of The Grievances.
This is not what The Grievance system is made for.
When you have a serious complaint or a violation of
your U.S. Constitutional Rights. Whereas Petitioner
has a serious medical complaint. And my complaint
should be Granted. MR. Jeffrey Beard Petitioner sent
him a complaint stating my medical needs. He is Allow-
ing his medical Administrator, and Physician to denied
Prompt medical care, and Prompt medical Treatment, And
he Allows MR. James to denied Grievances with merit
and That whereas Filed in Good Faith For Relief. For
They are Failing To provide Adequate medical care.
Nurse Randy Schnarrs many complaints are Filed against
him, He is unfit and unprofessional To be Even working
in a medical Department. Talks To The Inmates Like
They are Less Than Humans. Very Rude with his mouth
and ways. Calls you up for sick call has you sign
A cash slip Two have you keep paying Two Dollars
For The same Treatment That you never Received.

Pick it up tomorrow when your Block get called for Pill Line. I went up to Pill Line Told The Nurse I hear to Pick up my medication she Look for it could Not Find it. Then she Looked in The Book and Told me That Schnarrs Never ordered my medication. So Again I had to sign up for Sick Call To have my medication ordered, and I'm without my medication for Two week's. Then when you File A Grievance on The matter IT get's Denied, Like I said MR Beard is Responsible for The Respondents And The Officials of Th. medical Administrators and The Doctors under his Authority in his personal, private, and official capacity. is Allowing The medical Department To

From The First day I seen MR Schnarrs, I Told him in A Nice Way on going Treatment, for The same medical problems you, do Not have To pay Two Dollars for Sick Call Fees, MR Schnarrs Then would Get Real Rude with his mouth and State, IF you don't sign The Two Dollar medical cash slip you can get out Now go Back To your Block and I will mark you down as Refusing Sick call. So you must sign The cash slip Before you are seen for medical treatment. IF you don't He, Tells you, "To get out Now," Then you must Take his Rudeness on Top of Not Receiving Adequate medical care. MR Schnarrs has called me up To Sick Call To Reorder my medication Ever 6 months Our medication orders Run out. IT may Take 6 To 10 days To be called. When I put my medication order is going To Run out in 4 days can you Please call me up To Reorder my medication. The order Ran out and I was without my medication for 8 days, Then I was called To Sick Call Saw MR. Schnarrs Saw him in and very up set way. What can I do for you Today. I need To have my medication Reordered sign The cash slip. I only Need my medication Reorder only. Sign The cash slip or Leave get out Now. I signed The cash He said he Reordered my medication

From The First day I seen MR Schnarrs, I Told him in A Nice way on going Treatment, for The same medical problems you, do NOT have To pay Two Dollars for sick call Fees, MR Schnarrs Then would Get Real Rude with his mouth and Statz. IF you don't sign The Two Dollar medical cash slip you can get out Now go Back To your Block and I will mark you down as Refusing Sick call. So you must sign The cash slip B4 you are seen for medical treatment. IF you don't He, Tells you, "To get out Now," Then you must Take his Rudeness on Top of NOT Receiving Adequate medical care. MR Schnarrs has called me up To sick call To Reorder my medication Ever 6 months our medication orders Run out. IT may Take 6 To 10 days To be called. When I put my medication order is going To Run out in 4 days can you Please call me up To Reorder my medication. The order Ran out and I was without my medication for 8 days. Then I was called To sick call Saw MR. Schnarrs Saw him in and vird up s2t way. What can I do for you Today. I need To have my medication Reordered sign The cash slip. I only Need my medication Reorder only. Sign The cash slip or Leave get out Now. I signed The cash He said he Reordered my medication

Pick it up Tomorrow when your Block get called for Pill Line. I went up to Pill Line Told The Nurse I hear to Pick up my medication she Look for it could Not Find it. Then she Looked in The Book and Told me That Schnurrs Never ordered my medication. So Again I had to sign up for Sick Call to have my medication ordered, and I'm without my medication for Two week's. Then when you file A Grievance on The matter IT get's Denied, Like I said Mr Beard is Responsible for The Respondents And The Officials of The medical Administrators and The Doctors under his Authority in his personal, private, and official capacity. is Allowing The medical Department to denied Are Rights to Adequate medical care. And Allowing The Grievance coordinator and The Chief Grievance coordinator to denied Grievances Filed with merit and in good faith without ~~using~~ using Honest Judgment He Always makes The inmates Look like The Bad Guy's and He allows The Officials to never Admitt They Are Wrong. All They do is Violate Inmates constitutional Rights and Allow The medical Department to denied My Rights to medical care I Receive unnecessary suffering by The medical Administrators for Failure to provide prompt medical care and prompt medical Treatment and have The Right to be pain free of punishment.

Petitioner Asserts That he also Claims That prison Administrators Are under a Constitutional obligation To provide him with psychiatric Treatment No matter what The Petitioner was convicted of and That Their failure To do so constitutes cruel and unusual Punishment. It is of course True That having incarcerated a prisoner and thereby having prevented him from obtaining Treatment on his own, The State maybe found To have inflicted cruel and unusual punishment by failing To provide needed medical TREATMENT Stevenson's Allegations, however, viewed in The Light most favorable To him do not present a factual dispute In *Estelle v. Gamble*, 429 U.S. 97, Sct. 285, 50 L ed 251 (1976) The Supreme Court held The deliberate Indifference To serious medical needs of prisoners constitutes The unnecessary and wanton infliction of Pain. Proscribed by The Eighth Amendment 429 U.S. at 104, 97 Sct. 291 (citation omitted) The Right To Treatment Recognized in *Estelle* has limits That Stevenson's Claimed Right To psychiatric Treatment exceeds That The Prison Administrators Failure To provide medical care.

Criminal Law 12 B3.10(3)

medical and health care dict.

C.A. 3(Pa) 1992 I hereby Asserts that a minimum, Correctional Institution satisfies its obligations

Under Eighth Amendment when it furnishes prisoners with adequate food, clothing, shelter, sanitation medical care and person of safety U.S. C. A. CONST. Amend 8, see: *Young v. Quinlan* 960 F2d 351 CA3 (Pa) 1991 Two components of concept of serious medical need of prisoners, as to which deliberate indifference by prison officials violates Eighth Amendment's prescription of cruel and unusual punishment, are that the detainees condition must be such that failure to treat can be expected to lead to substantial and unnecessary suffering; Injury is *Estelle v. Gamble*, 429 U.S. 97⁹⁷, 97 S. Ct 285, 50 L. Ed 2d 251 (1976)

Petitioner / Plaintiff asserts that he is suffering irreparable harm the procedures and behaviors by the respondents and petitioner reserve the rights to add other defendants.

PRELIMINARY STATEMENT.

This civil action filed by James Stevenson A State Prisoner, for damages and Injunctive Relief under 42 Pa, C.S. § 761 Alleging violations of his Constitutional Rights, when the above named defendants acted with Deliberate Indifference in Administering An over Excessive Amount-

OF Prescribed [MEDICATION] THAT LEAD TO SERIOUS
medical complications AS UP-TO-DATE AND THAT
THE PETITIONER / PLAINTIFF, ALSO MAINTAINS THAT THIS
IS A Policy And Procedure of which THE COMMISSIONER
OF THE STATE PRISON. THE PLAINTIFF FURTHER ALLEGES
THAT AS A RIGHT OF HIS REPEATEDLY REQUESTED STATE-
MENTS THAT THE SAID MEDICATION TO BE DISCONTINUED
FOR THIS MEDICATION HAS TAKEN TOLL ON THE PETITIONER,
WHICH HARSHLY LIMITED HIM IN PERFORMING HIS EVERY
DAY bodily functions AND HIS EVERYDAY DAILY ACTIVITIES
SO MUCH AS TO PLACE HIM AT THE RISKS OF SERIOUS
INJURY OF FURTHER HEALTH PROBLEMS.

WHEREFORE THE PETITIONER'S CONSTITUTIONAL RIGHTS
ARE BEING VIOLATED. IF THE MEDICAL DEPARTMENT WOULD
NOT PLAY ^{GAMES} GAMES WITH MY MEDICATION I WOULD NOT
BE ASKING TO DISCONTINUING MEDICATIONS THAT TOOK
A TOLL ON ME AND I WOULD NOT BE TELL THEM TO MAINTAIN
THE POLICY AND PROCEDURE FROM THE COMMISSIONER. PLUS
FROM MY RESEARCH OF THIS MEDICATION IT STATES IT
HAS [SIDE EFFECTS] SUCH AS HIGH ENZYME LEVELS
IN THE LIVER AND WEIGHT GAIN AND INFECTION IN
THE BODY AND SOME PASSING OF BLOOD IF TAKEN ~~OVER~~
^{A LONG} PERIOD OF TIME. ALSO I WAS INFORMED BY THE MEDICAL
STAFF HERE AT SCHOENTZDALE THAT THIS WOULD BE A RESULT
OF EXCESSIVE USAGE OF THIS SAME MEDICATION THAT WILL
CAUSE THESE SYMPTOMS. THE MEDICAL ^{STAFF} STAFF HAS REFUSED ME TO

OF Prescribed [MEDICATION] That Lead To serious medical complications AS UP-TO-DATE And That The Petitioner /plaintiff Also maintains That This A Policy And Procedure of which The Commissioner of The State Prison. The Plaintiff further Alleges That As A Right of his Repeatedly Requested Statements That The Said medication To be discontinued for This medication has Taken a toll on The Petitioner, which harshly limited him in Performing his Everyday bodily Functions And his Everyday Daily Activities, so much As To Place him at The Risks of serious Injury of Further health Problems.

WHEREFORE The Petitioner's Constitutional Rights Are being Violated. If The medical Department would NOT Play Games With my medication I would not have To seek medication from The Commissioner, Plus from my Research of This medication IT STATES IT has [SIDE AFFECTS] such AS high Enzymes/levels in The Liver and weight gain And Infection in The Body And some Passing of Blood if Taken over A Long Period of Time. Also I was Informed by The medical staff here at SCI HONTZDALE That These Systems would be A Result of Excessive Usage of This same medication That will cause These symptoms. The medical staff has Refused me To

Receive MRI And They keep on changing my medications like I am A Lab Test Animal. By Telling me Try This Pill If That don't work well Try something Else.

When I first got hurt Camp Hill had me on medication That worked. Came up here To SCI HOUTZDALE The medical Department changed my medication. Doctor Pomirant2 Started To Treatment for my Pinch Nerves and my Lower Back Pain. Then he said I don't have Any Pinch Nerves in my Neck. After He treated me for The Pinch Nerves gave me The medications To Treat me for Pinch Nerves. Down Camp Hill found The Pinch Nerves. And Treated The Problems as Same.

Petitioner states I Told medical Department MS Greenleaf So many Times That The medication is Not helping me at all In The Light They Just Don't Care. I truly believe all of my medical Problems came AS The Result of The Force by The medical department In SCI HOUTZDALE who had me Take This Said medication That was Not needed Because They me take THE pills and they Started The Problems. [I am suffering Do To all This Side Effects] I am gaining more Pain and I am Still having medical Problems because of said medication.

CLAIMS FOR RELIEF

The Actions of The Respondents constitutes Cruel and unusual Punishment in Violation of The United States Constitution Amendments Eight and 14 Fourteen, AS TO The deliberate Indifference To serious medical Needs.

RELIEF REQUESTED:

WHEREFORE, The Plaintiff Requests That This Honorable Court Grant him The Following Relief.

A Issue A declaratory Judgment Stating That:

1) The Acts and omissions of The defendants, Secretary Jeffrey A Beard, P.h.d, Superintendent John m m cullough, MS Kathy Emel, MR Thomas L James, Doctor Pomerantz NURSE Randy Schnarrs MS Grunkaif The head prison of SCI Houtzdale Violated The Petitioners Eighth Amend and Fourteenth

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

593
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR <i>Kathy M. Emel</i>	FACILITY: <i>Medical & Warden, Greentree</i>	DATE: <i>07-31-01</i>
FROM: (INMATE NAME & NUMBER) <i>JAMES B STEVENSON D19729</i>	SIGNATURE of INMATE: <i>James B. Stevenson</i>	
WORK ASSIGNMENT: <i>Blockwork</i>	HOUSING ASSIGNMENT: <i>2A-1</i>	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B the specific actions you have taken to resolve this matter informally. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages.

*I am here by Filing This Grievance on Ms. Greenberg
In her Official capacity of Medical Administrator of SCI
Hartford Medical Department. Is allowing Medical
Staff under her Authority to perform using unprofessional
conduct which is Leads to Abuse of Power.*

*Dr. Pomerantz has order me all kinds of Medications
That don't work he has me like a Lab-Rat. He is
Refusing to send me out for a M.R.I. I hereby state the
Medication he ordered is not working. I am in a lot of pain.
Ms. Greenberg said on 07-12-01 of my request slip remember you
had a EKG Reading. And with the EKG Reading the pain is still the
same. All I am requesting is to have a M.R.I. for all the Medication
that Doctor Pomerantz has ordered is not working*

B. List actions taken and staff you have contacted, before submitting this grievance. Attach the copy of the DC-135A with the staff member's response of your informal resolution attempt.

*Mr. [unclear] would A M.R.I. reply to Ms. Greenberg answer on 07-13-01. Saw Doctor Pomerantz after having to sign up for sick call
so many times. The Answer is not receiving proper medical
care, which is a Violation of my 8th U.S. Const. Amend. rights*

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Kathy Emel
Signature of Facility Grievance Coordinator

8/1/01
Date

DC-804
Part 2COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001OFFICIAL INMATE GRIEVANCE
INITIAL REVIEW RESPONSE

GRIEVANCE NO.

HOU -593

TO: (Inmate Name & DC No.) Stevenson, James B DK9729	FACILITY Houtzdale	EA1	08-01-01
The following is a summary of my findings regarding your grievance: <i>Your grievance stated I am allowing unprofessional conduct in this department and abuse of power. You stated Dr. Pomerantz has tried many medications on you. You state the medication is not working and you are still in pain. You claim you need an MRI.</i> <i>After receiving your grievance I spoke again to Dr. Pomernantz. He stated if you had a nerve problem it would have shown on the EMG. It is good news that you don't have a significant problem. It isn't unusual for the Dr. to attempt to provide some relief of pain. It is normal to try drugs until you have success. No one doubts your pain but with no objective data found when Dr. assesses you he can't order additional tests. Remember you don't exhibit any atrophy of muscles etc. All your symptoms are subjective only.</i> <i>Now you would have a complaint if Dr. refused to work with you but reviewing your chart shows much patience on the part of Dr. Pomerantz.</i> <i>Your grievance has no merit.</i>			
Cc: Inmate Grievant Superintendent Deputies (2) Majors (2) Superintendent's Assistant DC-15 Grievance Officer			
Print Name and Title of Grievance Officer Norcne P. Greenleaf, CHCA	SIGNATURE OF GRIEVANCE OFFICER  GAP		DATE 8/2/01

Revised July 2000

COMMONWEALTH OF PENNSYLVANIA
Department of Corrections
State Correctional Institution at Houtzdale
Office of the Superintendent
August 15, 2001

SUBJECT: Appeal of Grievance #593

TO: James Stevenson, DK9729

EA-01

FROM: John M. McCullough
Superintendent

Stevenson is disappointed that the test did not show any nerve problem. I cannot alter the results of a diagnostic test. There was no objective or organic finding, and we can't keep ordering tests when nothing is there.

Grievance appeal is denied.

JMM:dkc

c: Deputy Tatum
Deputy Patrick
Major Kyler
Acting Major Barone
Ms. Emel
Ms. Greenleaf
Case Record
file

Form DC-135A		Commonwealth of Pennsylvania Department of Corrections	
INMATE'S REQUEST TO STAFF MEMBER		INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.	
1. To: (Name and Title of Officer) Criminal Justice Review Committee		2. Date: 08/17/01	
3. By: (Print Inmate Name and Number) JAMES B. STEVENSON 014734		4. Counselor's Name MS GURIC	
James B. Stevenson Inmate Signature		5. Unit Manager's Name Jay Whitehead	
6. Work Assignment Blockwork		7. Housing Assignment 2A-1	
8. Subject: State your request completely but briefly. Give details. John M. McCullough is his personal capacity as an inmate of SC J. Houghton is allowing the Medical Staff under his Authority to use his professional conduct and to give his proper judgment Medicine Care. In your knowledge, many inmates died in SC J. Houghton for use of prison doctors refused to treat a prisoner for medication for hepatitis C for they said the medication costs a lot of money. They don't like spending money to give proper medication. Inmates reported instances of a decline or delay in treatment systemic and chronic problems are very concerns of my medical needs in SC J. Houghton is about staff in the denied my medical needs which is called inadequate treatment needs or cases where as hostile reception from stress which is a violation of my constitutional rights. Each time I sign up for sick call or see a nurse for medication.			
9. Response: (This Section for Staff Response Only) Of only 10 to 20 seconds, when medical care was denied 2 are considered grossly inadequate and stress were deliberately indifferent to show that the medical authorities were deliberately indifferent to the need of medical care. Right Amendment Violation where medication was prepared and discussed by the inmate and not discussed personally.			
To DC-14 CAR only ☐		To DC-14 CAR and DC-15 IRS ☐	

Staff Member Name _____ / _____ Date _____
Print Sign

OCT 17 2001

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

5715

GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR <u>Kathy M. Emel</u>	FACILITY: <u>Sgt. Whitesel</u>	DATE: <u>10/14/01</u>
FROM: (INMATE NAME & NUMBER) <u>JAMES B. STEVENSON DK9729</u>	SIGNATURE OF INMATE: <u>James B. Stevenson</u>	
WORK ASSIGNMENT: <u>Blockworker</u>	HOUSING ASSIGNMENT: <u>JA-2</u>	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages.

Mr. Whitesel in his personal and official capacity allowed his C.O. and Sgt. like C.O. Kwee forced me to move in with inmate Wilson DU-3600 cell on July 13, 2001. Knowing that inmate Wilson and I don't get along. But me being a Christian of God I followed C.O. Kwee's orders and he said it was only for a short period of time. 2) With Wilson being a heavy guy didn't like the idea of me having his bottom bunk. Mr. Wilson wanted all the space in the cell as well like nobody else is suppose to have anything in the cell and because he was on the block/laundry worker he thinks he should have cell by himself. Mr. Whitesel knew that Wilson and I weren't getting along that good. But he kept us in the cell together for almost 2 months. But I don't feel that I should be the one who was punished by leaving EA where I was making 25 cent an hour and working shows a day job. So with them moving me to JA. I'm only working 4 hours a day. After I moved out of Wilson's cell and was in 10 cell, Wilson's the one who started trouble with me and I was moved off the block and I don't think it's fair for inmate Wilson to have 2 jobs laundry worker and Block clerk and change people.

B. List actions taken and staff you have contacted, before submitting this grievance.

to do their laundry and also to go to the commissary. Mr. Whitesel is Prejudice and Bias and uses Unprofessional. Plus Mr. Whitesel knows that inmate Wilson is doing these things. Before I left EA, I ask Mr. Whitesel was this a DOC laundry on Mr. Wilson's and he didn't answer that.

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date



PENNSYLVANIA DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PENNSYLVANIA 17001-0598
(717) 975-4859

October 17, 2001

James Stevenson, DK-9729
State Correctional Institution Houtzdale

Dear Mr. Stevenson:

The Office of Professional Responsibility recently received your correspondence dated October 14, 2001.

Your correspondence is being referred to Superintendent McCullough for any action he deems appropriate.

Sincerely,

A handwritten signature in dark ink, appearing to read "H. Clifford O'Hara".

H. Clifford O'Hara
Director
Office of Professional Responsibility

HCO/yb

cc: Superintendent McCullough (w/attachments)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

7392
GRIEVANCE NUMBER

NOV 1 2001

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR Kathy M. Emel	FACILITY: R&D & Medical	DATE: 11/09/01
FROM: (INMATE NAME & NUMBER) JAMES B. STEVENSON DK9729	SIGNATURE of INMATE: James B. Stevenson	
WORK ASSIGNMENT: Blockworker	HOUSING ASSIGNMENT: JA-2	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages.

On 11-02-01 I WAS in the R&D at 6:30 PM. I ask C.O. Kinner was my Medical, Records in the paperwork for my ATA, and his reply was yes. So after we got to C.F.C. I was process right away for court on 11-02-01. So when I got back from court they still have to finish my paperwork, they look up and discover that my Medical records didn't come down. So I was put into Quarantine for 4 1/2 days and since my Medical records weren't there I didn't receive any medicine for almost 4 1/2 days. And I had to get my Mother who's up there to make at least 30 more phone calls up to this prison. Me I was in a great amount of pain for these 4 1/2 days on more. Plus who's going to reimburse for the calls and my pain and suffering.

B. List actions taken and staff you have contacted, before submitting this grievance.

My Mother finally talk to Health Care Administrator, Wanda Greenleaf. And then they had to order the medicine. Which they only got the C.T. Alden, and that was all for 1 day or so.

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

7495
GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR Kathy M. Emel	FACILITY: Medical Worrell Greenleaf	DATE: 11/13/01
FROM: (INMATE NAME & NUMBER) JAMES B. STEVENSON DK 9729	SIGNATURE OF INMATE: James B. Stevenson	
WORK ASSIGNMENT: Block Worker	HOUSING ASSIGNMENT: JA-3	

INSTRUCTIONS:

1. Refer to the DC-ADM 804 for procedures on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

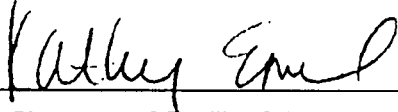
A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages.

My complaint is against S.I. Hartzdale and it's Medical Staff Dr. Pomkinantz, Ms. Worrell Greenleaf, Ms. Gburck PA. I had wrote a request to Dr. Pomkinantz and Worrell Greenleaf about me getting a Complete Physical examination. I wrote the request on 11-12-01, And I was called up to Medical and saw MS. Gburck PA Student. So I told her about my ailments which consist of a bruise big toe where as I can't wear no shoes on my right foot, and then I told her about these coughing spells that I have from time to time, which Dr. Pomkinantz knows about, and then when I showed her my really weak collar, and she tells me there's nothing wrong with my weak collar and I had it for about 6 mos. But what I don't understand I want Ms. Greenleaf to see this eyesore. Also I paid 2.00 for a visit.

B. List actions taken and staff you have contacted, before submitting this grievance.

It seems like Ms. Greenleaf is using all the excuses to not see me. Plus Ms. Gburck PA she didn't say anything regarding my coughing spells. So I guess if I don't receive proper medical care, I'll let my family know, so that they can call my Attorney.

Your grievance has been received and will be processed in accordance with DC-ADM 804.



Signature of Facility Grievance Coordinator

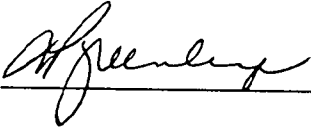
11/14/01

Date

DC-804
Part 2COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001OFFICIAL INMATE GRIEVANCE
INITIAL REVIEW RESPONSE

GRIEVANCE NO.

7495

TO: (Inmate Name & DC No.) Stevenson James DK9729	FACILITY Houtzdale	JA3	11-14-01
The following is a summary of my findings regarding your grievance: On 11-12 -01 you wrote request to Dr. Pomcrantz regarding a physical examination. I responded to you and said you needed to go thru the sick call process. Perhaps you needed a further explanation. We, by policy, offer physicals routinely every year when you are over 50 and every 2 years when you are under 50. You are eligible for the exam in 2002 and q year after. In the meantime if you need medical care you must go through our sick call process. The Pa assessed your collar and said no change needed at this time. She is not a student but a licensed physician assistant and she makes the medical decision – not me. She also checked your foot – dry skin was noted. You didn't get a new collar or your tennis shoe approval to wear them to work. Medical decisions made by a licensed prescriber with proper documentation.. I see no issue here to grieve. Cc: <i>Inmate Grievant</i> Superintendent Deputies (2) Majors (2) Superintendent's Assistant DC-15 Grievance Officer			
Print Name and Title of Grievance Officer Norene P. Greenleaf, CHCA	SIGNATURE OF GRIEVANCE OFFICER  GAP		DATE 11/16/01



PENNSYLVANIA DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PENNSYLVANIA 17001-0598
(717) 975-4859

November 14, 2001

James Stevenson, DK-9729
State Correctional Institution Houtzdale

Dear Mr. Stevenson:

The Office of Professional Responsibility recently received your correspondence dated November 9, 2001 regarding your complaint.

Please refer to DC-ADM 804 in your Inmate Handbook. A copy of your correspondence will be sent to the Bureau of Health Care Services. We will be sending a copy of your complaint to Superintendent McCullough for his review.

Sincerely,

A handwritten signature in black ink, appearing to read "H. Clifford O'Hara".

H. Clifford O'Hara
Director
Office of Professional Responsibility

HCO/yb

cc: Director McVey, BHCS (w/enclosure)
Superintendent McCullough (w/enclosure)

DC-804
Part 2COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001OFFICIAL INMATE GRIEVANCE
INITIAL REVIEW RESPONSE

GRIEVANCE NO.

7392

TO: (Inmate Name & DC No.) Stephenson, James DK 9729	FACILITY Houtzdale	JA-3	11-20-01
---	-----------------------	------	----------

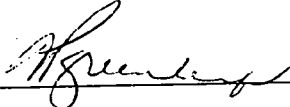
The following is a summary of my findings regarding your grievance:

Your grievance states that you were not offered all your meds while ATA. We sent a 5 day supply with you when you went ATA as per policy.

Your mother phoned me and I contacted medical staff and informed them of the medications you were on. You were gone more than five days. Your issue is with Philadelphia not us. We went out of our way to assist you.

Regarding your cervical collar – it was noted that it was fraying but the Velcro etc. was adequate. You are to be rechecked in one month to see if the collar then needs replaced. That date will be around 12-13.

Cc: Inmate Grievant
Superintendent
Deputies (2)
Majors (2)
Superintendent's Assistant
DC-15
Grievance Officer

Print Name and Title of Grievance Officer	SIGNATURE OF GRIEVANCE OFFICER	DATE
Norene P. Greenleaf, CHCA	 GNP	11/28/01

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
2520 LISBURN ROAD, P.O. BOX 598
CAMP HILL, PA 17001-0598

THE SECRETARY'S OFFICE OF
INMATE GRIEVANCES AND APPEALS

November 27, 2001

James Stevenson, DK-9729
SCI Houtzdale

RE: DC-ADM 804 – Final Review
Grievance No. 7392

Dear Mr. Stevenson:

This is to acknowledge receipt of your letter to this office. Upon review of your letter, it is the decision of this office to file your letter without action. You have failed to comply with the provision(s) of the revised DC-ADM 804 effective January 1, 2001.

In accordance with the provisions of the DC-ADM 804, VI D, 1, a proper appeal to final review must include photocopies of the Initial Grievance, Initial Review, the Appeal to the Facility Manager, and the Facility Manager's decision. The text of your appeal to this office shall be legible, presented in a courteous manner, and the statement of facts shall not exceed two pages.

Review of the record reveals that your appeal is incomplete. You have failed to provide this office with the required documentation that relates to your appeal. An appeal at this level will not be permitted until you have complied with all procedures established in DC-ADM 804. **Any further correspondence from you regarding this grievance, which does not contain the required documents needed to conduct final review, will result in a dismissal of your grievance.**

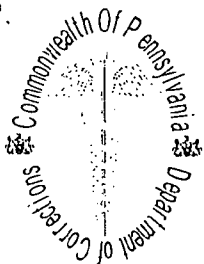
Sincerely,



Tshanna C. Kyler
Grievance Review Officer

TCK/ms

cc: Superintendent McCullough
Grievance Office
Central File



BUREAU OF HEALTH CARE SERVICES PENNSYLVANIA DEPARTMENT OF CORRECTIONS

P.O. Box 598/2520 Lisburn Road Camp Hill, PA 17001-0598

Telephone Number: (717) 731-7031

Fax Number: (717) 731-7000

November 28, 2001

James Stevenson, DK-9729
SCI-Houtzdale

Mr. Stevenson:

This is in response to your recent letter sent to the Office of Professional Responsibility regarding your medical care at SCI-Houtzdale. Your concerns were reviewed by staff at the Bureau of Health Care Services. It has been determined that the care being provided to you by the staff at SCI-Houtzdale is medically appropriate.

The Pennsylvania Department of Corrections provides medical services to inmates that are consistent with community standards. The DOC contracts with vendors who employ credentialed, licensed physicians and physician assistants who are responsible for the assessment, treatment and follow-up of all inmate medical conditions. Access to outside specialists and appropriate medical facilities is also provided through the vendors.

The medical staff at SCI-Graterford will continue to address your health care concerns and assess and appropriately treat every medical condition identified. Please direct your future questions and concerns to Dr. Pomerantz, Medical Director and Noreen Greenleaf, Corrections Health Care Administrator. The grievance process is available to you if you are not satisfied with their responses.

Sincerely,

A handwritten signature in cursive script that reads "Catherine C. McVey".

Catherine C. McVey
Director
Bureau of Health Care Services

CCM/RE/cj

cc: Superintendent McCullough
Deputy Superintendent Speck
CHCA Greenleaf
File:(Stevenson.James.dk-9729.11.28.01)

1

Form DC-135A		Commonwealth of Pennsylvania Department of Corrections	
INMATE'S REQUEST TO STAFF MEMBER		INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.	
1. To: (Name and Title of Officer) John M. McCullough ^{Superintendent}		2. Date: 12/05/01	
3. By: (Print Inmate Name and Number) James B. Stevenson DK9729 James B. Stevenson Inmate Signature		4. Counselor's Name Mr. White	
		5. Unit Manager's Name Ms. Beth Bailey	
6. Work Assignment Blockworker		7. Housing Assignment JN-3	
8. Subject: State your request completely but briefly. Give details. DEAR, SUPERINTENDENT. I loss a lot of respect for you regardless, what other inmates said about you. BECAUSE of this remark you made this afternoon that this must be Stevenson, because he always have a complaint here on there. Listen all my complaints be legitimate and yes they were about some of your staff members and times. But this is where the buck stops at right now, because my Pawnshop radio was playing and doing everything except cutting off the cassette tape automatic. So I sent my radio to get the Automatic Stop fix on repaired. My radio was sent to American Institutional Supply, Inc. 40 Rose Street Soughon, NY 07072			
9. Response: (This Section for Staff Response Only) <i>Answered 1/11/02 between the is American Song and M</i>			
To DC-14 CAP only ☐		To DC-14 CAP and DC-15 IRS ☐	

Staff Member Name _____ Print _____ Sign _____ Date _____

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001-0598

FOR OFFICIAL USE ONLY

GRIEVANCE NUMBER

OFFICIAL INMATE GRIEVANCE

TO: FACILITY GRIEVANCE COORDINATOR Kathy M. EMEI	FACILITY: R&D Superintendent	DATE: 12/08/01
FROM: (INMATE NAME & NUMBER) JAMES STEVENSON DK9729	SIGNATURE of INMATE: James B. Stevenson	
WORK ASSIGNMENT: Blockworker	HOUSING ASSIGNMENT: JN-3	
INSTRUCTIONS: 1. Refer to the DC-ADM 804 for procedures on the inmate grievance system. 2. State your grievance in Block A in a brief and understandable manner. 3. List in Block B any actions you may have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.		
A. Provide a brief, clear statement of your grievance. Additional paper may be used, maximum two pages. On 10/09/01 I sent my radio out to be repaired at this place American, Institutional Supply Inc. 49 Rose St. Stoughton, MA. 02072. Okay they were not able to repair the automatic stop button for the tape to stop when it is finish. But my radio was working real good before I sent it out. So I had my Counselor Mr. White to call them before he went on his holiday break but he was not able to catch the right person there. So my Unit Manager Ms. Bailey call them to tell them that they could use \$5.00 of some money had sent for repairs to mend my radio. So I got my radio back on 12-05-01 and it was not playing on wednesday and then I ask what happen to my radio they tell me that the company sent my radio like that. See I have brought things like books and when I got them the (shut) shoe lace are broken. B. List actions taken and staff you have contacted, before submitting this grievance. BECAUSE I HAVE A PAIR OF BOOTS FROM HOT ABIND. Sports that are a little over a year old and you can look at the laces how because they were sabotage in R&D. I wrote to the Superintendent and here in denial that it is staff members don't do no wrong. But I want the point I'm tired of you people keep taking from me over and over when it's costing me more money.		

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Facility Grievance Coordinator

Date

DC-ADM 804. Inmate Grievance System

DC-804
Part 3

Attachment C
COMMONWEALTH OF PENNSYLVANIA
Department of Corrections
SCI- Hu

DATE:
SUBJECT:
TO:

12/10/01
Grievance Rejection Form
James Stevenan, OK9729 J-13
[Signature]
Facility Grievance Coordinator

FOR OFFICIAL USE ONLY
9207
GRIEVANCE NUMBER

The attached grievance is being returned to you because you have failed to comply with the provision(s) of DC-ADM 804, Inmate Grievance System:

1. _____ Grievances related to the following issues shall be handled according to procedures specified in the policies listed and shall not be reviewed by the Facility Grievance Coordinator:
 - a. DC-ADM 801-Inmate Disciplinary and Restricted Housing Unit Procedures
 - b. DC-ADM 802-Administrative Custody Procedures
 - c. other policies not applicable to DC-ADM 804.
2. _____ Block B must be completed, as per the Instruction #3 of the Official Inmate Grievance Form.
3. X _____ The grievance does not indicate that you were personally affected by a Department or facility action or policy.
4. _____ Group grievances are prohibited.
5. _____ The grievance was not signed and/or dated.
6. _____ Grievances must be legible and presented in a courteous manner.
7. _____ The grievance exceeded the two (2) page limit. Description needs to be brief.
8. _____ Grievances based upon different events shall be presented separately.
9. _____ The grievance was not submitted within fifteen (15) working days after the events upon which claims are based.
10. _____ You are currently under grievance restriction. You may not file any grievances until _____ Date
11. _____ Grievance involves matter(s) that occurred at another facility and should be directed by the inmate to the appropriate facility.
12. _____ The issue(s) presented on the attached grievance has been reviewed and addressed previously.

Your issue is with American Institutional Supply.

Amendment Rights under The United States Constitution.
B) Award The Plaintiff compensatory damages in The Amount of Seven Hundred Fifty Thousand Dollars (\$750,000.00) Against Each defendant in Their Individual Personal and official capacities.

C) Award The Plaintiff Punitive damages in The Amount of Seven Hundred Fifty Thousand Dollars (\$750,000.00) Against Each defendant in Their Individual personal and ~~official~~ capacities.

D) Award The Plaintiff The Cost Incurred As A Result of Litigating This Action, Including but not Limited To Attorney Fees And cost As may be Provided by Law.

E) Issue An Injunction Prohibiting The defendants and Their Subordinates Taking Any Retaliatory Acts Against The Plaintiff.

F) Grant any Other Such Relief as This Honorable Court may deem Appropriate.

Dated 02-06-02

Respectfully submitted

James Stevenson
James STEVENSON
DK 9729

P.O. Box 1000
HENTZDALE, PA 16648-1000

VERIFICATION

I James Stevenson Pro-se hereby Verify under
The Penalty of Perjury That This Information
contained in The Forgoing Annexed Plaintiff's
Complaint is True and Correct To The Best of my
Information, Knowledge and belief, so States
The Plaintiff. I understand That any False Statement is
made subject To The Penalties of 18 Pa.C.S. §4904.

Dated 02-06 day of

2002,

Respectfully submitted

(S) James Stevenson
James Stevenson Pro-se,

PROOF OF SERVICE
CERTIFICATE OF SERVICE.

I do hereby certify That I am This day serving The
Forgoing Civil Complaint A True and correct copy
upon The Following List of Persons In A manner That
satisfying The Requirement of Rule 906.

Pa. R. A. P. 121(b) and 1514 (c).

U.S. FIRST CLASS MAIL FROM HOUTZDALE, PENNSYLVANIA

Daniel R. Schuckers, Prothonotary Original and Two copies.

OFFICE OF THE Prothonotary/Commonwealth Court of Pennsylvania.

P.O. Box; 11730/Harrisburg, Pennsylvania. 17108

Jeffrey A. Brand, Ph.D. Secretary for The Penna. Department of Corrections

2520 Lisburn Road (enc copy)

Camp Hill, Penna. 17001-0598.

John M. McCullough Superintendent SCI HOUTZDALE
2007 STATE ROUTE / HOUTZDALE PA 16698-1000 one copy

Ms Kathy Emel SCI HOUTZDALE 2007 STATE ROUTE one copy
HOUTZDALE PA 16698-1000

Ms Green Leaf SCI HOUTZDALE 2007 STATE ROUTE one copy
HOUTZDALE PA 16698-1000

Doctor Jeffery SCI HOUTZDALE 2007 STATE ROUTE one copy
HOUTZDALE PA 16698-1000

Nurse Randy Schnarrs SCI HOUTZDALE 2007 STATE
ROUTE HOUTZDALE PA 16698-1000 one copy

Thomas James 2520 Lisburn Road one copy
Camp Hill, Penna 17001-0598.

Dated 02-06-02

Respectfully Submitted
(S) James Stevenson

RECEIVED & FILED
COMMONWEALTH COURT
OF PENNSYLVANIA

2002 FEB 22 A 10:03