

Cape Breton Hospital

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SYDNEY, NOVA SCOTIA

B1P 6H4

March 18, 1987

CAPE BRETON HOSPITAL PRIVATE & CONFIDENTIAL

Mr. G. Fred Horne, Investigator
Royal Commission on the Donald
Marshall, Jr., Prosecution
Maritime Centre
Suite 1026
1505 Barrington Street
Halifax, N.S. B3J 3K5

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Mr. Horne's information only.
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the Cape Breton Hospital.

Dear Mr. Horne:

Re: John Pratico

I examined Mr. John Pratico on the morning of March 18, 1987.

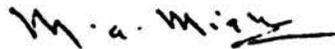
On mental status examination, his condition is well stabilized on Modecate 25 mgs I/M every three weeks. In addition to that, he is on Nozinan 75 mgs h.s. and Artane 2 mgs daily. There is no overt evidence of any psychotic manifestations of his illness. His mood and affect are appropriate.

In my opinion, he is under no stress of duress now, and he is able to give information regarding Donald Marshall, Jr.'s case without any distortion of reality, at this time.

Considering his psychiatric history, I would respectfully suggest that his cross-examination be held in camera and should not be more thirty to forty-five minutes duration.

I hope this will be helpful to you.

Sincerely,



M.A. Mian, M.D., F.R.C.P. (C)
MEDICAL DIRECTOR

/pm

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CUMULATIVE THERAPEUTIC RECORDS & CONFIDENTIAL
CAPE BRETON HOSPITAL

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COMM 40

NAME John Pratico

CASE NUMBER 2064

①

Date

June 11/79

John was initially referred to the Mental Health Clinic on August 16, 1970 by the Gaum Clinic, Whitney Pier (Dr. Wallace).

John, at this time, was seen by Dr. Binnie and was 15 years of age. He was repeating grade 7 and at this stage was 3 grades behind his peer group. It is noted by Dr. Binnie that he had been the target of other boys aggression at school. He was picked on by most of the other fellows in his class. John felt that he had to keep his temper in control and that he had very little control when he gives in to his frustrations.

John, at this time, was living with his father in an apartment in Whitney Pier. His older brother, Richard - 22 years, was in the Army. He had a 23 year old sister Pat who was living in Toronto.

John's mother and father had been separated and his mother was living on Bentinck Street with his twin sister, Joanne. His parents had been separated three years previous to having been seen initially by Dr. Binnie. His mother is described as a heavy drinker and generally while drinking contributed to a lot of the fighting that went on.

John is described as always very nervous; everything bugged him. He found it very difficult at school, losing his temper fairly frequently, and getting very upset if he made any type of mistake whatsoever.

His father, at this time, was unemployed, on compensation, fell off the roof while doing his regular work as a roof repairman.

Dr. Binnie describes John further by saying that he was a jumpy, excitable young man. He had no self-awareness, and almost no neutral supportive relationships. He had strong ambivalent feelings of great intensity to both parents.

Dr. Binnie recommended the following:

1. To talk to the school and possible relatives.
2. Drug use considered, but not prescribed.
3. Consider the need for foster home placement.

Dr. Binnie continued to see John on an out-patient basis following initial assessment up to August 20, 1971. During these months Dr. Binnie had approximately six sessions with John. John was described generally as an angry, unreasonable and defiant person. It is noted, however, that he was not incoherent, depressed or retarded. July 30, 1971, John apparently was living with his mother and his twin sister, Joanne. Mother was receiving Social Assistance plus alimony. John's father was living also in the Pier at this time, and his daughter June was with him. July 30, 1971, Dr. Binnie prescribed Nozinan 5 mgs b.i.d. (to be administered by mother).

John's brother, Richard, joined the Army and moved to British Columbia prior to October 21, 1970. John had indicated that his father was also thinking of

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moving to British Columbia and that John, himself, was considering joining the Army.

On discharge from the Nova Scotia Hospital, June 21, 1972, John was followed at the Clinic by Dr. Donovan. Dr. Donovan saw John fairly regularly up until December 11, 1974. In 1972 Dr. Donovan saw John on an out-patient basis approximately on seven occasions. In 1973 he was seen approximately on three occasions, and in 1974 he was seen approximately on eight occasions.

In June of 1972, when John was initially seen by Dr. Donovan, he was maintained on the following medication:

1. Mellaril 200 mgs t.i.d.
2. Stelazine 5 mgs t.i.d.
3. Cogentin 2 mgs b.i.d.
(Flurazepam was discontinued)

September 5, 1972, request was received from the Department of Public Welfare, Rehabilitation Division, requesting information to see if John was capable of being admitted to vocational training. At this time, Dr. Donovan recommended that we should keep the possibility alive while at the same time assessing his readiness over the next few months. Dr. Donovan further recommended that John would be 18 years of age on December 17, and by that time he would qualify for Provincial Social Assistance and that John had been advised to apply for this assistance immediately through his own family doctor.

Dr. Donovan notes that the routes of John's problem stem from the following situations:

1. The family breakup.
2. Alcoholism in the mother.
3. Poverty due to the fact he is three years behind his age mates in school.
4. He is presently not attending because of his shame and inferiority feelings regarding this.
5. A long history of ridicule from both his parents and his school mates which, no doubt, accounts for his aggressive character or his psychotic outbursts when they occur, and also, of course, his paranoid nature.

John was again re-evaluated by Dr. Donovan on the request of Dr. D.J. Tinning, Medical Advisor, Department of Public Welfare, Rehabilitation Division, Halifax, Nova Scotia, February 22, 1973. Again, Dr. Donovan recommended that John qualify for Provincial Social Assistance and that his fitness for rehabilitation would be re-assessed again in 1974. Dr. Donovan notes that for the most part John got along fairly well during the period that he was in regular contact with him. There were certain times periodically that John became quite upset. August 7, 1972, it is noted that John was worked up quite a bit. He had to go to receive a needle from his family doctor. Trouble with the guys and the gang. John periodically stayed with his mother and then when upsets would occur, would return and stay with his father. For a while during October 11, 1972, while

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John was with his father, it is indicated that he felt very much upset and the fact that his father was unable to provide him with furniture for example, t.v. At this time his father was watching the neighbours t.v. while John was left without such convenience.

June 11, 1973, it is noted that John was sort of upset. At this time he was staying with his mother and expressed some very hostile feelings towards her. He indicated to Dr. Donovan at this time that he was leaving town and that he was throwing his pills away. Apparently he related that he was having some difficulty with some Indian friends. He expressed that they were driving around the house, looking for him. Dr. Donovan notes that John has been somewhat overly demanding of his mother - "meals on time and all that." "She has, of course, systematically rejected him."

April 24, 1974, Dr. Donovan notes that Public Health Nurse accompanied John into the Clinic. At this time he was upset because his father was sick with a severe case of the flu. At this time Dr. Donovan increased John's injection of Moditen and that John continue to take his Cogentin. I understand John had been on Moditen since August 8, 1973.

Following Dr. Donovan's contact, John was followed by Dr. McDonagh who, during the year 1975-76, up to January 30, 1976, saw John approximately 15 times. February 12, 1975, Dr. McDonagh notes that John's blood pressure was very low and that a Public Health Nurse was given permission not to give John his Moditen injection. May 28, 1975, his moditen injection of 2 cc was changed to every two weeks. John continued to be his natural self over the period that Dr. McDonagh saw him. There were times when he was quite pleasant, very talkative. However, some of the times he became very moody, hostile, resentful, restless, and somewhat demanding. September 10, 1975, Dr. McDonagh notes that John was deteriorating and at this time he was admitted to the Cape Breton Hospital. He was discharged September 10, and his psychotic symptoms had been diminished. At this time, Dr. McDonagh discontinued Haldol, however, April 7, 1976, it is noted that he was on Moditen 1 cc every two weeks, Chlorpromazine 100 mgs b.i.d. and Artane 2 mgs one tab b.i.d.

John was followed up by Marie MacAdam between the time August 18, 1976 and November 8, 1977. In between some occasions, John was seen by Dr. McDonagh, Dr. Mian and on one occasion by Dr. Samuels. I understand that also John was seen by other staff at the Clinic, depending on who was available when he would drop in unannounced.

Marie notes again that John fluctuated between periods of calmness and being settled to periods of being very angry and upset, shouting, crying, claiming that his life was useless because everywhere people were turning on him. On September 28, 1976, Marie notes that because of several reasons he was quite upset.

1. That his social assistance was threatened to be lowered because of his change in boarding situation.

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2. That he had an argument with his father, his sister and his mother and that they told him he was crazy and should be in the hospital.
3. That he had somatic complaints which he blamed on the medication, weakness, dizziness, agitation, and vomiting.
4. That he had been hanging around with a friend, a Mr. MacDonald, and Marie indicated that this usually meant that he had been drinking and probably using some grass. At this time in consultation with Dr. McDonagh, John was asked to take 200 mgs of Chlorpromazine until the following Wednesday, when his situation would be reviewed. Shortly after, as John discontinued the use of elicit drugs and alcohol, his situation seemed to improve.

It is indicated that John on occasion has created quite a scene both here at the Clinic and at the Metrocentre and Community Friends. Very often this would be loud talk, cursing and swearing and being quite paranoid about other people who John very often would suspect not care about him.

John was transferred to my care on July 5, 1978, and was followed fairly regularly on sessions sometimes weekly and most of the time every second week, up until the present - June, 1979.

Initially John was very talkative and somewhat demanding and testing. He spoke quite openly that he was interested in reactivating or helping to reactivate the Community Friends Group. John generally skips his scheduled appointment and comes unannounced, requesting to be seen. He has sometimes created a scene because the worker was tied up and he becomes very frustrated when he has to wait any length of time. Most of the time John expresses feelings of rejecting, feelings that no one cares, especially his mother and father and sister. Apparently his behavior presents such that it is very difficult for most people who come in contact with John to show any type of acceptance. He boasters most of the time; his appearance is unkempt; and this presents some very serious problems. John has very little insight in terms of what his own behavior is presenting and not aware that his own presentation invites rejection and avoidance by those who come in contact with him. October 18, 1978, John expressed some very depressed feelings, tended to be very dopey and almost to the point of sleeping throughout the interview. His eyes were generally focusing to the right and he found it very difficult to make eye contact with the worker. He describes that "hell of a weekend." He expressed not caring about anything, he was worried about everything, and that his mind was wandering. He describes that his lips felt swollen and he felt like things were crawling all over his body.

John expressed with some hesitation that he had not been taking his Nozinan and Flurazepam as was prescribed by the doctor. "I only take one a day, some days I don't take any." Feeling, he claims, he is afraid that they will make him too sleepy.

After consultation with Dr. Mian, it was recommended that John be referred for an

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E.E.G. and a brain scan. He related that he was in difficulty with the law and was caught stealing and was put on probation. Apparently he was accused of stealing \$60 which he denied. However, he was found guilty and was to do 6 months probation. It was around this time that John expressed his concern regarding his behavior pattern with his girlfriend Helen. Apparently they were accustomed to stealing from the local store and it was customary for the local police to let them go without charges being laid because of Helen being at Braemore and generally was able to manipulate the R.C.M.P. or City Police officials in letting her go.

The results of the E.E.G. and brain scan were both normal.

John has been very faithful to attending Community Friends sessions. He generally is quite talkative and competes very aggressively for most of the time that Community Friends is in session. He generally seems to cope when there is small members in attendance, and seems to get into great difficulty when certain members present who also are competing for attention and time. It was around Christmas time, 1978, that John and Helen announced their engagement. However, John had indicated that he was just going along with Helen's request. This engagement never amounted to very much as they separated approximately a couple of months later and did not see themselves as boyfriend-girlfriend.

This breakup has created a great deal of frustration and angry feelings with John, however, for the most part he seems to have worked most of these feelings out and recognizes that he has played a great deal to do with the relationship and the parting is probably going to be for the best. March 21, it was noted that John has been taking an extra amount of Nozinan. He had indicated that he would use up his two weeks supply received from the Clinic and then receive another weeks supply from Dr. Murphy. In consultation with Dr. Mian, we decided to increase John's Nozinan to the amount of 50 mgs q.i.d. and encourage and see that he sticks to the amount as prescribed. If not, that he immediately or as soon as possible, get back to myself or Dr. Mian.

John as of April, 1979, has also attended the Moditen Group which is held weekly in which John attends every second week. He expresses that he enjoys attending this group, is quite talkative and seems to get a great deal of insight from listening to some of the problems as expressed by other patients in the group. It is interesting to note that John is able to respond to the confrontation he is presently receiving from the various sources of help that he is involved in, individual sessions, Community Friends, and the Moditen Group.

John has had three admissions to the Nova Scotia Hospital. His first admission was August 25, 1971 to October 25, 1971. This admission was as a voluntary patient. His second admission was approximately one month later - March of 1972. His third admission was December 12, 1972 to January 23, 1973. At this time he was a certified patient.

On the 1971 admission, John was diagnosed as Acute Adolescent Situational

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Reaction and Schizophrenia. It was recommended on discharge that he be continued on the course of Largactil and Elavil in appropriate dosages.

On the 1972 admission, he was diagnosed as Personality Disorder - Explosive Type with Borderline Mental Deficiency. His medication at this time was Chlorpromazine 150 mgs t.i.d. and Trihexyphenidyl 2 mgs o.d.

John had a number of admissions to the Cape Breton Hospital - March 29, 1972 to June 13, 1972. This admission was as a transfer from the Nova Scotia Hospital. Second admission was April 5, 1973 to April 12, 1973. This was as a voluntary patient. His third admission was September 10, 1975 to September 18, 1975. This also was as a voluntary patient under the recommendation of Dr. McDonagh. His fourth admission was from November 9, 1977 to November 14, 1977. This again was as a voluntary patient. Finally, his fifth admission was from June 6, 1979.

Admission March, 1972, it is noted that John was initially admitted to the MC3 and treated with Phenothiazines. He found it difficult at first to adjust but later became quite helpful and helped care for some of the defective patients. He socialized well with other patients. However, sometimes he would use profane language, but for the most part settled down to ward routine and on April 19, 1972 was transferred to an open ward. On discharge he was placed under his father's care. Discharge medication was Mellaril 200 mgs t.i.d., Stelazine 5 mgs t.i.d., Cogentin 2 mgs t.i.d. and Fluphenazine 1 cc IM weekly.

During his April, 1973, admission to the Cape Breton Hospital, John was initially admitted to an open ward and again adjusted quite well. He was co-operative to ward rules and got along well with the staff and other patients. He was again discharged in the care of his father and following medication:

1. Chlorpromazine 100 mgs b.i.d.; 200 mgs h.s.
2. Trihexyphenidyl 2 mgs b.i.d.

Diagnosis was Schizophrenia.

His admission in September, 1975, after becoming agitated, anxious, apprehensive and depressed, it was noted that this was activated somewhat by the fact that his father was admitted to the local hospital. At this time Dr. Mian notes that there was no overt evidence of any psychotic manifestations. His mood and affect were of psychomotor excitation. There was no evidence of any delusions, hallucinations, or any organic manifestations.

Again, during hospital stay, he settled down to ward routine and his tension level reduced fairly rapidly. He was discharged on the following medication:

1. Fluphenazine 1 cc I/M q2wks.
2. Haloperidol 2 mgs b.i.d.
3. Chlorpromazine 100 t.i.d.
4. Trihexyphenidyl 2 mgs b.i.d.

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During November, 1977, admission, it is noted that John was regressing, that his hygiene was poor; that he was abusive and verbally aggressive and hostile. Prior to admission while smoking in his bedroom while falling asleep, he burned a hole in his mattress.

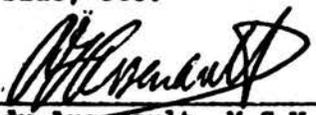
He continued to present a picture of chronic schizophrenia, and was continued on the following medication:

1. Fluphenazine Decanoate 1 cc IM q2w
2. Methotrimeprazine 15 mgs t.i.d. p.r.n.

He was discharged on the same medication. The latest admission of June 8, 1979, was as a result of John being somewhat upset. He was complaining mostly of some somatic complaints, his legs were going numb, severe headaches, etc. Apparently this could have been the result of a change in his boarding house. Some months ago his cousin requested that he find another boarding place. As a result, he moved in with friends who are providing him room and board close to Henry Street in Whitney Pier area. John expressed very little resentful feeling regarding this pressure to move. However, he does feel somewhat that no one cares and whenever he turns to his relatives, mother, father, brothers, and sisters, it seems that the situation ends up in fighting or aggressive and hostile arguing.

Prior to admission John expressed some strong desire that he wished to do away with himself. He indicated that he was hearing the voice telling him that no one cares - do away with yourself. This was a repetitive type of pattern and was constantly on John's mind. Some weeks prior to this last admission, John had been drinking quite heavily and at periods this drinking would last for two or three days before these bouts terminated.

It is thoroughly realistic to expect that John's hospitalization should not be of long term duration. He should be encouraged to continue on his out-patient contact; his contact with Community Friends; and his contacts with the Moditen Group. Hopefully he will not fit in and become too secure in the hospital routine, but will be encouraged to maintain his community pattern and encouraged to continue his contacts out of hospital. It is also probably important to have John's physical status checked as recently he has complained of dizziness, headaches, paralysis of the right side, etc.



 Andy Arsenault, M.S.W.
 Social Worker

bb

CUMULATIVE THERAPEUTIC RECORD

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pt. 20/79

This 24 year old Catholic single male was re-admitted to this hospital on June 5, 1979. Apparently he was not able to function in the community and had been progressively becoming agitated, anxious, displaying poor emotional and impulse control. It was felt necessary that he should be hospitalized for regulation of his medications.

During his stay in the hospital there was no significant change in his condition. He continued to display a somewhat demanding attitude and little insight. However, his condition significantly improved and he was discharged on September 7, 1979.

M. A. Mian

M.A. Mian, M.D.
 Psychiatrist

bb

t. 12/80

Since beginning the Moditen Group a year and one half ago, John has attended regularly on a bi-monthly basis. Six weeks ago he went to New Brunswick to visit his brother for three weeks and has not as yet returned. John had been attending Community Friends as well on a sporadic basis.

Current medication is Fluphenazine 1 cc IM two weeks and Methotrimeprazine 50 mg t.i.d.

In Moditen Group John has had several complaints: of periodic inability to sleep, of trouble saying "NO" to unreasonable requests, of side effects of his medication, of persistent problems with anger against his family, of not being admitted to the Day Centre Programme, and that no one really cares about him.

John's behavior in the group is quite boisterous and controlling. He gains control through playing games such as "you can't help me" and "poor me," by arguments, his boisterousness, and at times by non-stop talking. There is a teasing quality to some of his behavior and even in his attention seeking he is a likable young man and he can be quite nurturing to some of the group members. At this time he is more open to confrontation than he has been in the past. Also, John has a problem with alcohol abuse and in the group situation he talks for others. John has changed his living accommodation several times in the past year, at one time sharing his apartment with another member of the group.

bb

Pam Kennedy
Pam Kennedy
 Social Service Department

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CUMULATIVE THERAPEUTIC RECORD
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Date

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ril 8/81

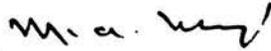
This 26-year old single male was readmitted to this hospital on February 23, 1981 as an informal person under observation by referral of Dr. Paul Murphy. John stated that he was seeing people and hearing voices.

On admission to this hospital, he was very agitated, belligerent, domineering, and demanding - his usual self. He stated that he had not taken any medication for the past ten days.

Behind this admission was a reason for John to feel the way he did. This was due to the recent church fire on George Street. Somehow, John felt that he might be picked up because he was loitering around George Street that night with some of his friends. He would not come out and admit this so, as a result, he resorted to this admission to seek custody and protection in a safe place. Otherwise, there was no psychiatric reason for his admission.

During his stay in hospital, he did not manifest any overt psychotic behaviour, other than his nasty behaviour and disposition. He was treated symptomatically and was discharged on March 10, 1981, on Nozinan 100 mgs t.i.d., Moditen 0.5 c.c. I/M q 2 weeks, and Artane Tab 1 daily.

Since his discharge, John decided to move in with Mr. Francis Burke of New Waterford, where he will keep the house.


M.A. Mian, M.D.

MAM:pm

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

**CAPE BRETON HOSPITAL
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Date

Aug. 10/82

On John's return from New Brunswick, where he stayed with his brother for some months, he related that his stay in New Brunswick was very good, and during this time he managed to work at various gas stations for his board and keep. There is some question whether John's description of his stay in New Brunswick is accurate, because on one occasion Dr. Mian did relate that he received a 'phone call from the out-patient department of the Mental Health Hospital. John was reluctant to return to the needle (Modecate .5 cc's), but on Dr. Mian's advice he agreed to do so.

Although he appeared very well adjusted at first, he quickly ran into difficulty regarding his boarding placement (a cousin in the Sydney area). He was taking friends in without permission and using excess groceries. He had mentioned to staff of the Moditen Group that he intended to return to New Brunswick. However his pattern deteriorated and there was some social stresses. One was there was some question as to whether he would be brought forward as a witness regarding the burning of a church in the Sydney area.

He was admitted to the Cape Breton Hospital February 23/81 and discharged March 10/81. There is some question whether John wanted to avoid being involved in the investigation of the fire incident. A follow-up contact after his discharge was through the New Waterford Satellite clinic. He arranged on his own to stay with a friend, Francis Burke, whom he met while a patient at the Cape Breton Hospital. For some time John continued his stable pattern. His uncle died in September, 1981. At this time he went through an upsetting period and there was a great deal of conflict between John and his mother. Apparently he was accused of taking some money or articles from the apartment. John, being unable to co-operate or get along with Mr. Burke, he moved to another new boarding home on August 20th, 1981 to 231 MacKay Street, New Waterford (Mrs. R.C. Gitten), 862 2181.

At Mrs. Gitten's John continued a stable pattern, attending the clinic, and taking his medications co-operatively, helping out with the housework, and he felt very secure and confident. His physical appearance was much improved, as well as his hygiene pattern. John attended Community Friends occasionally, and it was noted that he was less aggressive verbally, and much more supportive to members in their expression of certain problems.

February 28, 1982, John was seen by Constable Carroll at the New Waterford Satellite clinic regarding the Marshall case. John expressed very little verbally about his feeling over this situation at that time, as well as in the past. He showed outwardly a great deal of anxious movements in his behaviour indicating that something was bothering him. I stayed with Constable Carroll and John until the introduction was completed, and until John seemed to relax.

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(11)

Date

Aug. 10/82

After a few minutes he said he was O.K., and quickly relaxed, showing less shakiness of voice, muscle twitching. John related again very little verbal concern following this session, and expressed that there was nothing to be worried about, everything was going to be O.K. and looked after.

Around May, 1982, John's condition again deteriorated at his boarding house. He appeared at the New Waterford clinic very demanding and physically aggressive, and said that he had not been taking his total medication as prescribed. His speech was with difficulty and he expressed that he had been drinking excessively for the past few days, but now wanted to stop and find himself a new boarding home. Contact with his landlady, Mrs. Gitten on June 10th, 1982, indicated that John left without any notification, and without taking his clothing. The public health nurse was unable to locate him, and a message was left for John to get in touch with the public health nurse if he wished to receive his needle.

June 17th, 1982, John communicated that he had a new address, 423 Arthur Street, New Waterford. The public health nurse asked John to attend the Public Health Clinic for his needle.

In the past few months, John's pattern appears to be constantly improving and he is to be followed up twice monthly at the New Waterford Satellite clinic for supportive therapy, along with follow-up medication - Nozinan 100 mgs t.i.d., Artane 2 mgs daily., and Modecate 25 mgs I/M (to be given by the public health nurse in New Waterford).



A. Arsenault, MSW
SOCIAL WORK DEPARTMENT

/ew

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CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico.....

CASE NUMBER..... 2064.....

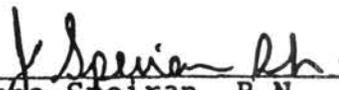
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(13)

Date
July 12/83
Continued

Nozinan, 50 mg., tabs 2, t.i.d.
Artane, 2 mg., daily
Taba Sun Blocker (SPS-21) p.r.n.
Modecate, 25 mg., every two weeks

He will be assessed by Dr. Mian as the need arises.


June Speiran, R.N.
Community Mental Health Nurse

/mr

Oct, 20/83

John attended the Modecate Clinic on July 13, 18, 27, August 10, 24, September 7, 21, and October 10, 1983.

His condition remains stable, but I do find him mildly agitated during our interviews. His speech is often pressured and he is slightly aggressive.

John was having some difficulty with his cousin's boyfriend, and John was very proud to tell me that he "punched him out". There is some question as to whether or not John is still living at his cousin's as he seems very friendly with a female client from this Clinic and is often seen at her place. I did not confront John about this.

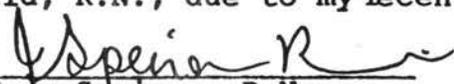
His personal hygiene is still poor, despite his efforts to "dress up". His teeth are severely decayed, and is troubled with toothaches. He attempted to get them fixed through MSI or Social Assistance and they refused. He was encouraged to see a social worker regarding this matter if he wanted to pursue it. He also speaks of occasional "anxiety attacks" (i.e., palpitation, hyperventilation) and controls them with leisurely walks.

He is still active in Community Friends and attended the social group here on September 12, 1983. His main objective at present is to continue his sobriety and he admits to doing very well staying away from alcohol.

John is presently compliant on Fluphenazine Decanoate, 25 mg., I/M every two weeks
Methotrimeprazine, 50 mgs., tabs 1 t.i.d.
Trihexyphenidyl, 2 mgs., o.d.

This case is referred to Marie MacDonald, R.N., due to my recent resignation.

Audit Checked: Yes No


June Speiran, R.N.
Community Mental Health Nurse

CUMULATIVE THERAPEUTIC RECORD

CAPE BRETON HOSPITAL
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NAME John Pratico
CASE NUMBER 2064

(14)

Date
Aug. 30/83

b. 13/84

John Pratico attends the weekly meeting of Community Friends in Sydney on a regular basis. John is an active, an interested member, who participates appropriately and is particularly supportive of members who require assistance, for example - with grocery shopping and spending their money wisely.

Both Marg Graham and I, as leaders of Community Friends, are pleased with John's progress and involvement with Community Friends.

Evelyn O'Leary
Evelyn O'Leary, RSW
Social Worker

/ew

John attended the Clinic regularly on the following dates; 02/11/83, 23/11/83, 14/12/83, 04/01/84, and 25/01/84.

It is noted that a medication change took place on November 2/83. The injection of Fluphenazine Decanoate 25 mgs., I.M. was changed by Dr. Mian from every two weeks to every three weeks. Following this reduction in medication, client stated that he felt that he was "more alert". He also stated that he felt quite good about the medication being reduced.

Client seems to cope very well in his present lifestyle as he keeps quite active socially and he also keeps himself busy doing odd jobs, etc. His mood is usually cheerful.

John's condition continues to be well stabilized on the following medication:

Methotrimeprazine, 50 mgs., tabs 2 T.I.D.,
Trihexyphenidyl, 2 mgs., O.D.,
Fluphenazine Decanoate, 25 mgs., I.M. every three weeks.

Marie MacDonald R.N.
Marie MacDonald, R.N.
Community Mental Health Nurse

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico
CASE NUMBER 2064

(15)

Date

y 28/84

John attended the Modocate Clinic on the following dates: 15/02/84, 07/03/84, 28/03/84, 18/04/84, and 09/05/84.

Client's condition continues to be well maintained on his present medication, and there has been no significant changes since the previous CTR of 02/13/84.

John is always compliant with his medication, and also has a good attitude about keeping his regular appointments at the Clinic.

Marie MacDonald RN
Marie MacDonald, R.N.
Community Mental Health Nurse

/mr

pt. 12/84

John continued his regular attendance at the Modocate Clinic and was present on 30/05/84, 20/06/84, 11/07/84, 01/08/84, and 22/08/84. There have been no changes in John's medication routine and his injection is on a three week schedule. During the recent summer months John was very active with the local drop-in centre. His usual cheerful mood persists, and he seems to be able to come up with a positive attitude about everything. No significant change since the previous CTR.

Marie MacDonald RN
Marie MacDonald, R.N.
Community Mental Health Nurse

/mr

October 2, 1984

We discussed the situation regarding the retired Chief of Police and his suit against the CBC. John has to appear in court tomorrow, and he was given reassurance regarding this.

M.A. Mian, M.D.
M.A. Mian, M.D.

MAM:pm

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico

CASE NUMBER 2064

16

Date

Feb. 8/85

John Pratico continues to be seen every three weeks when he comes to the clinic for his injection (Fluphenazine Decanoate 25 mg). Since the last recording on this CTR he has maintained a stable pattern. He is an active member of Community Friends, attends the Drop-In Centre on a daily basis, and has a part-time job caring for an elderly gentleman. He is compliant with medication.

Joanne Chabassol
Joanne Chabassol
Community Mental Health Nurse

/mr

May 21, 1985

John was assessed on the marginal date. There are no extrapyramidal symptoms noted, and he continues to maintain his improvement. He is well stabilized on his current medication and should continue on Fluphenazine Decanoate 25 mgs I/M q3 weeks, Methotrimeprazine 50 mgs Tabs 2 t.i.d., and Artane 2 mgs daily.

M.A. Mian
M.A. Mian, M.D.

MAM:pm

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME JOHN PRATICO
CASE NUMBER 2064

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Date
pt, 4/85

John Pratico is seen every three weeks at the Cape Breton Mental Health Center. He continues to maintain a stable pattern - there has been no evidence of depression or thought disorder. He is active in Community Friends and the Drop-In Center.

Current Medication:

Fluphenazine Decanoate, 25 mgs., I/M every three weeks
Trihexyphenidyl, 2 mgs., daily
Methotrimeprazine, 50 mgs., tabs 2 t.i.d.

Joanne Chabassol
Joanne Chabassol
Community Mental Health Nurse

/mr

. 26, 1985

John continues to maintain his improvement and is taking active part in Community Friends and the Drop In Centre. His meds were reviewed today, and I feel he should continue on them as prescribed.

M.A. Mian
M.A. Mian, M.D.

MAM:pm

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico.....

CASE NUMBER 2064.....

Date

March 12 /86

John continues to be seen at the Clinic every three weeks. Was seen by Faye Morrison on 24/09/85 and 06/11/85. Faye Morrison noted that he was doing well.

He has been seen by the undersigned since 26/11/85. Seen by Dr. Mian on 26/11/85.

On 17/12/85 it was noted that he was drooling. John stated it was from Novocaine he received at the dentist's. Refused to see Dr. Mian.

On 07/01/85 drooling subsided. Client was doing well. Talked about his girlfriend.

On 28/01/86 - B/P 148/88. Complained of chest pain. John was encouraged to see his family doctor.

On 18/02/86 John was seen by Joanne Chabassol. John stated he has seen his family doctor who said his blood pressure at that time was 120/80. Advised him to cut down on his salt intake.

On 11/03/86 John had no complaints. Blood pressure was 138/80. John was doing well.

Medication at present:

Fluphenazine Decanoate, 25 mgs., I/M q3weeks

Trihexyphenidyl, 2 mgs., daily

Methotrimeprazine, 50 mgs., tabs 2 t.i.d.

Laura Lee Gillis RN

Laura Lee Gillis, R.N.
Community Mental Health Nurse

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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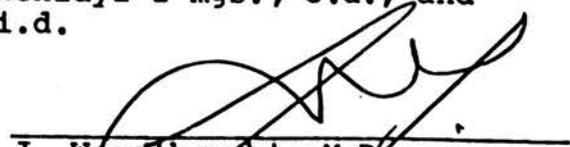
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NAME John Pratico
CASE NUMBER..... 2064.....

Date
April 1, 1986

I saw John on marginal date and he stated that he has been feeling fine with no complaints. He has been taking his present medication regularly. His medication is as follows: Fluphenazine Decanoate 25 mgs., I/M q3weeks, Trihexyphenidyl 2 mgs., o.d., and Methotrimeprazine 100 mgs., t.i.d.



J. Wesolkowski, M.D.
Psychiatrist

/mr

April 22/86

John was seen by Dr. Wesolkowski today who decreased his Methotrimperazine to 50 mgs., h.s. Routine Blood Work was done.

Laura Lee Gillis, R.N.
Community Mental Health Nurse

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

NAME John Pratico.....

CASE NUMBER 2064.....

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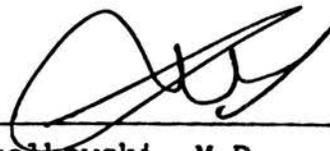
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20

Date

April 22, 1986

The patient stated that he has been feeling quite well with no overt psychotic features. He will continue on Modecate 25 mgs. IM q. 3 weeks. However, his Metrotrimeprazine will be reduced to 50 mgs. t.i.d.



J. Wesolkowski, M.D.,
Psychiatrist

kt

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico

CASE NUMBER 2064

21

Date
June 24/86

Subjective:

John was referred for counselling in weight reduction. Presently he eats at Loaves and Fishes six meals a week, and he prepared his own suppers at home. He abstains from alcohol, excessive snacking and junk food, and claims not to overeat. He drinks up to twenty cups of coffee per day, each with two sugar and whole milk.

Recently he has been able to reduce cigarette smoking to one package on the advice of his physician. He walks, plays ball and basketball regularly. We discussed caffeine and he took some printed information.

Objective:

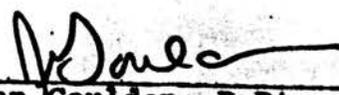
- Height - 5'6"
- Weight - 229.5 lbs.
- Ideal Weight - 135-165 lbs.
- Waist - 42"
- Goal - 38"

Assessment:

John's reported eating habits are adequate and a few small changes may be all that are required for weight loss. He has shown that he can make changes, and wants to try some dietary modifications.

Plan:

John plans to reduce his sugar intake (in coffee) by 75%. To see for further counselling every three weeks.



 Jean Goulden, P.Dt.
 Therapeutic Dietitian

/mr

Audit Checked: Yes No

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NAME John Pratico
CASE NUMBER 2064

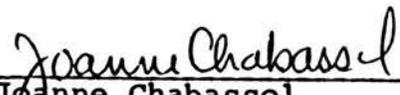
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Date
July 10/86

John Pratico is seen every three weeks. Since the last recording on this CTR he has continued to maintain a stable pattern. He still has a relationship with Joan Scott and is active in the Drop-In Center Program.

Current Medication:

Methotrimeprazine, 50 mgs., t.i.d.
Trihexphenidyl, 2 mgs., daily
Fluphenazine Decanoate, 25 mgs., I/M q3weeks


Joanne Chabassol
Community Mental Health Nurse

/mr

Audit Checked: Yes No

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NAME John Pratico
CASE NUMBER..... 2064

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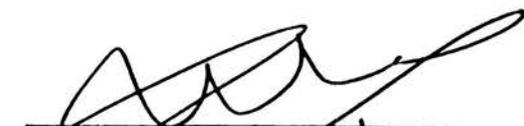
23

Date

Sept. 16/86

I saw John today. He is feeling fairly well. There is no overt psychotic activity and he will be continued on his present medication.

He will be seen again in four weeks' time.



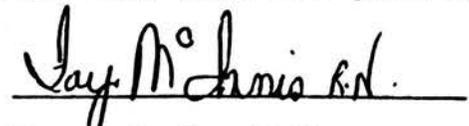
J. Wesolkowski, M.D.
Psychiatrist

km

Oct. 7/86

John Pratico continues to be seen at the Mental Health Clinic every 3 weeks for injection of Fluphenazine Decanoate 25 mgs.

John has maintained a stable pattern. He has moved from a rooming house to his own apartment and is coping well with the extra work and finances. Keeps busy with odd jobs and has an active social life.



Fay McInnis, R.N.

/dc

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico

CASE NUMBER 2064

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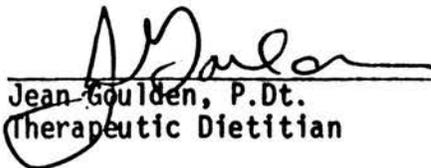
Date

Oct. 29/86

John has attended diet counselling on July 14th, October 7th and October 28th, 1986. He generally eats a varied and balanced diet and has a good understanding of weight reduction principles. He has lost 20 lbs in the past four months which is very good progress.

John has been feeling tired and has had several colds recently which led him to investigate multivitamin supplements. I advised him that, although they won't hurt him, they are not likely to help prevent tiredness or colds.

John has recently moved into a new apartment and has also broken off with a girlfriend of four years. He stated he was "glad he was stable" as the break-up was quite stressful and he had a few nights of poor sleep. He has been keeping busy doing some odd jobs and his own cooking and housework.


Jean Goulden, P.Dt.
Therapeutic Dietitian

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

NAME John Practico
CASE NUMBER 2064

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Date
c. 9/86

I saw the patient today. He is living in his own apartment and is kept busy with cleaning and cooking. He sees his friends and is working. He has no complaints and there is no overt psychotic activity. It seems that he is stabilized on his present medication.

He will be continued on Fluphenazine Decanoate 25 mg. I.M. q three weeks and Methotrimeprazine 50 mg. t.i.d. and Trihexypenidyl 2 mg. daily.

He will be seen again in 12 weeks' time.


J. Wesolkowski, M.D.
Psychiatrist

km

Feb. 10/87

I have seen John Pratico on the following dates since last recorded CTR. 28/10/86, 18/11/86, 09/12/86, 30/12/86, 20/01/87, and today, 10/02/87. During this time period John has maintained a stable pattern. He has been seeing the Dietitian and has been consistently losing weight. John is pleased with his progress in this area. On his last visit John complained of having side effects from medication "jumping movements of extremities while sleeping". He was assessed by Dr. Sothy who decreased his Nozinan from 50 mgs., t.i.d., to 75 mgs., at h.s. John reported that this had resolved his problem. His next scheduled appointment is for March 4, 1987 at 11:00 a.m.


Fay McInnis, R.N.

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME JOHN PRATICO.....

CASE NUMBER..... 2064.....

26

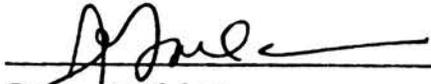
Date

ar. 4/87

John reports that he has recently been started on medication for high blood pressure by his family doctor. He claims to feel less light-headed. No complaints since decreasing his oral medication (January 20, 1987) and he is keeping busy.

He continues to take an active interest in his reducing diet and has been trying new foods with success. He has been following high fiber guidelines with good results and in general is managing his diet very well.

To return to clinic in 3 weeks time.


Jean Goulden,
Therapeutic Dietitian

/dc

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico

CASE NUMBER 2064

(27)

Date

March 4/87

On February 13, 1987, John telephoned the Mental Health Clinic to say that he had been feeling very tired, sleepy and "dragged out" for the past few days. He stated that he did not feel like getting out of bed and he spoke to Dr. Roxburgh at that time who advised him to discontinue taking his tablet medication since he was on depot medication.

I contacted John on February 17th by telephone to see how he was doing. He told me that he had not discontinued the medication basically because he felt that he would end up in hospital if he did and he felt that his problem was a physical one and so he had visited his family doctor who placed him on medication for his blood pressure at that time. On today's visit John informed me that he has had several tests done related to his problem with dizziness and that he will be going back to his own doctor on March 10th for the results from these tests. His family doctor, Dr. Pandey, has placed him on Serc 4 mg. for vertigo and he is feeling much better.

km


Fay McInnis, R.N.

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

NAME John Pratico

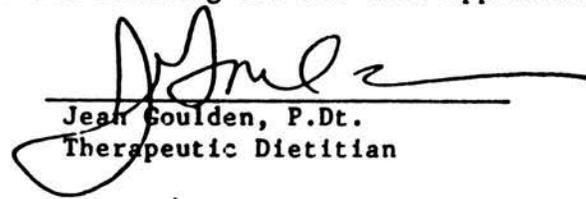
CASE NUMBER 2064

Date

March 25/87

John attended diet counselling today. He reported having had the flu over the past week but otherwise had no complaints. He has been busy with odd jobs, and continues ^{to manage} his diet and budget well. He was given some high fibre recipes which he plans to try. As I will be out of the building for his next appointment, he will be seen in six weeks time.

/mr


Jean Goulden, P.Dt.
Therapeutic Dietitian

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Audit Checked: Yes No

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NAME John Pratico
CASE NUMBER 2064

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29

Date
March 25/87

I saw John today for his injection of Fluphenazine Decanoate, 25 mgs. Blood Pressure 122/82. He continues to do well. Has lost another two lbs. in the past three weeks and is quite excited about his success thus far. Assessed by Dr. Sothy today. Nozinan reduced to 50 mgs., at h.s. from 75 mgs., h.s.

Jay McInnis, R.N.
Jay McInnis, R.N.

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico

CASE NUMBER 2064

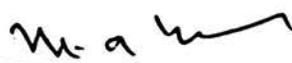
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(30)

Date

April 8, 1987

I received a telephone call from Mr. Wally Spicer from Halifax (424-4800). He will be cross-examining John at the Marshall Inquiry. We discussed the basic questions of John's credibility, reliability, and competency in 1971 versus 1987. He also questioned me regarding the recommendation I had made earlier about the length of the cross-examination. He is going to contact me again in a couple of weeks when he is in Sydney.



M.A. Mian, M.D.

/pm

April 15, 1987

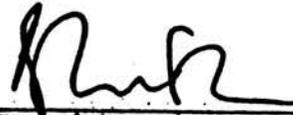
I saw John this morning for his injection of Fluphenazine Decanoate, 25 mgs. Blood Pressure 114/80. John stated that he has done very well with his reduction in his medication and has had no specific problems. He continues to manage his diet quite well, weighing in today at 194 lbs.


Fay McInnis, R.N.

/mr

May 6, 1987

Claims to feel anxious and restless during the day and at night as well with disturbed sleep. This seems to have been precipitated following stomach upset. He denies any overt psychotic symptoms. He was given four days supply of Nozinan 10 mgs. a.m. in addition to his usual medication. He will be reviewed periodically.



P. Sothy, Psychiatrist

km

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

CAPE BRETON HOSPITAL
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NAME John Pratico
CASE NUMBER 2064

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(31)

Date

May 6/87

John called me yesterday (May 5th) to inform me that he had been ill over the past week with "influenza". He had been to his family doctor who had prescribed only Gravol for two doses and John was still feeling somewhat nauseated and weak from the flu. He arrived today for his injection, however and it was noticeable that there was some increased restlessness and anxiety. He told me that he had not been sleeping well for the past four nights and that he was unable to sit still for any period of time. Based on this I had Dr. Sothy see him and he prescribed Nozinan, 10 mgs., a.m. X 4 days for John to see if this would decrease his anxiety level. Dr. Sothy told John to come in and see him next week if this continued. John agreed to call me next week to let me know how he is progressing.

Fay McInnis, R.N.
Fay McInnis, R.N.

/mr

May 27/87

John was seen today for his injection of Fluphenazine Decanoate, 25 mgs. Blood Pressure 120/78. John stated that he has had no further problems with anxiety or restlessness since last seen on May 6th. John is doing well at present.

Fay McInnis, R.N.
Fay McInnis, R.N.

/mr

June 17/87

John continues to do well and has been busy painting and working temporarily. He has increased the fiber content of his diet with good results. He has made very good progress with weight control, having lost 39 lbs., over the past year. His weight loss has slowed recently; however, he plans to continue as he has been doing. John will return in three weeks time.

Jean Goulden, P.Dt.
Therapeutic Dietitian

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAMEJohn Pratico.....

CASE NUMBER.....2064.....

(32)

Date

June 17/87

Remains well. Seen today for his injection of Fluphenazine Decanoate, 25 mgs. Blood Pressure 130/74. Assessed by Dr. Sothy. There were some changes made in his medication. See CTR today's date.

Fay McInnis, R.N.

Fay McInnis, R.N.

/mr

June 24, 1987

I met with Mr. W. Wylie Spicer, from the Royal Commission on the Donald Marshall, Jr., Prosecution, at the Holiday Inn. We discussed John Pratico and the forthcoming inquiry in September. He taped most of the conversation, which was mainly about John's mental capacity in 1971 and at the present, and also about the effects of an open hearing versus a closed hearing on John.

M.A. Mian, M.D.

M.A. Mian, M.D.

/pm

July 8, 1987

John was seen today for his injection of Fluphenazine Decanoate, 25 mgs. Blood Pressure 110/70. He was also assessed by Dr. Sothy. John informed us that he was admitted to City Hospital last week for a "breathing problem" and was monitored throughout the evening and the night, and was told that he has bronchial asthma. John stated that he was given medication, Theolair, and has since quit smoking, it is now eight days since he has had a smoke. He was somewhat discouraged, however today, because he had gained seven pounds, possibly due to the fact that he has quit smoking. He was seen by the dietitian and will be seen again on his next visit. Next scheduled appointment is for July 29th 11:00 a.m.

Fay McInnis, R.N.

Fay McInnis, R.N.

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

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NAME John Pratico.....

CASE NUMBER 2064.....

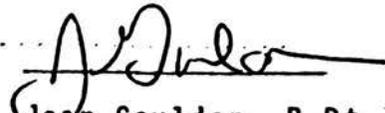
33

Date

uly 8/87

John was seen for nutrition counselling today. He reported a respiratory crisis for which he was taken to hospital by ambulance, and treated for 18 hrs, as above. He has had an uncharacteristic weight gain, and felt that his abdominal area was bloated, however he had no G.I. complaints.

We discussed the possibility of the weight gain being due to either new medication, Theolair, or to quitting smoking. He will continue his usual eating habits and we will assess further his condition at next interview.



Jean Goulden, P.Dt.,
Therapeutic Dietitian

:pp

ly 29/87

Remains well. Nozinan was decreased to 20 mgs. h.s. He will be reviewed periodically.

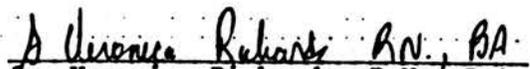


P. Sothy, Psychiatrist

km

y 29, 1987

John has had a cold for the past four days and is treating it symptomatically. States he is keeping busy making plans for his sister's wedding, which will occur on October 17th. He is walking and exercising daily. He quit smoking for twenty-five days then started again due to hand tremor. He now smokes one package every two to three days but hopes to quit again. Fluphenazine Decanoate 25 mgs I/M was administered. Blood pressure 132/80. He was seen by Dr. Sothy. Appointment given for three weeks' time. Also, he will see Dr. Mian in three weeks' time.


Sr. Veronica Richards, R.N., B.A.
Community Mental Health Nurse

/pm

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

CAPE BRETON HOSPITAL
PRIVATE & CONFIDENTIAL

NAMEJohn Pratico.....

CASE NUMBER.....2064.....

34

This report is confidential and for your
..... information only.
No: to be released, copied or published in
whole or in part without written consent of
the Cape Breton Hospital.

Date

Aug. 12/87

TELEPHONE CONTACT:

John telephoned this afternoon. Since I was unable to be contacted I returned his call. He stated that he continues to be bothered by a cold and is breaking out in sweats as a result. He saw his family doctor approximately one week ago and was prescribed Co-Actifed. John was wondering what he should do now that his cold symptoms are back. Since seeing his family physician and receiving Co-Actifed was so helpful the last time, I encouraged him to go the same route. He also wondered about the possibility about getting nicorettes since he plans to try to quit smoking. Other than the symptoms from the cold John is doing well and is maintaining his stability. He will be seen by Fay McInnis on August 18, 1987.

Sister Veronica Richards RN BA

Sister Veronica Richards, R.N., B.A.
Community Mental Health Nurse

/mr

Audit Checked: Yes No

CUMULATIVE THERAPEUTIC RECORD

CAPE BRETON HOSPITAL
PRIVATE & CONFIDENTIAL

This report is confidential and for your information only.
No. to be released, copied or published in whole or in part without written consent of the Cape Breton Hospital.

NAME John Pratico

CASE NUMBER 2064

(35)

Date

Aug. 19/87

John talked today at length about problems and events in his life (sister's upcoming wedding, recent death of an uncle). He complained of a prolonged headcold, but has been eating well. He has lost 2 1/2 lbs. in the past six weeks and plans to continue with his diet.


Jean Goulden, P.Dt.
Therapeutic Dietitian

/mr

Audit Checked: Yes No



MAR 25 1987

Nova Scotia



**Nova Scotia
Hospital**

Drawer 1004
Dartmouth, Nova Scotia
B2Y 3Z9

902 469-7500

March 25, 1987

I certify the foregoing to be a true copy of the
medical records of:

John Louis PRATICO

at the Nova Scotia Hospital.

Diane E. Calder
Director of Medical Records

72-03544

NOVA SCOTIA HOSPITAL
DARTMOUTH, N.S.
--DISCHARGE REPORT--

# 148	<u>SERVICE:</u> In-Patient
<u>NAME:</u> PRATIOO, JOHN LOUIS	<u>CASE NUMBER:</u> 72-03544
<u>ADDRESS:</u> 212 Henry Street Sydney, N. S.	<u>DATE OF ADMISSION:</u> December 12, 1972
<u>AGE:</u> 17	<u>DATE OF DISCHARGE:</u> January 23, 1973
<u>HUSBAND'S NAME:</u> N/A	<u>PERIOD OF EXPIRES:</u> Full Discharge
	<u>STATUS:</u> Certified

This seventeen year old boy from Cape Breton, was admitted for the third time on December 12, 1972 as a certified patient. He was referred from the Cape Breton Mental Hospital primarily for behavior problems. He was first admitted to this hospital in October, 1971 with a diagnosis of Acute Adolescence Situational Reaction and Schizophrenia and was referred to the local mental health centre for further follow up. A month later, he was again re-admitted until March, 1972 and discharged to the Cape Breton Mental Hospital. At that time, he was diagnosed as Schizophrenia. He remained at the Cape Breton Hospital until June 13, 1972 after he began to settle down considerably on psychotropic medications. Since he was out of the hospital, John said that he wasn't doing badly, but kept on drinking, and this was three to four months after he got out of the Cape Breton Hospital.

COURSE IN THE HOSPITAL

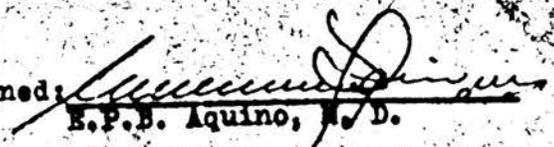
On admission, he was quite overactive, but spoke spontaneously, coherent, relevant with no evidence of thought disorder. He admits to having a bad temper, especially when he is drinking. He was continued on Chlorpromazine, 100 mgs. t.i.d., and then increased to 150 mgs. t.i.d. along with Trihexyphenidyl, 2 mgs. o.d. He responded quite well on this dosage of the medication and continued to function fairly well to such. Then he was recommended for a transfer to the Cape Breton Mental Hospital. Since I found out on his previous admission, the patient was presented at the unit conference and was felt that he could function outside of hospital. When this was carried out, the patient refused to return to the municipal hospital, so arrangements were made to evaluate the home situation with the father. Dr. Donovan agreed to return this patient in care of the father as it was found that things at home with the father seemed to have improved over the past year. It was also recommended that he should be followed up at the Cape Breton Mental Health Centre.

DISCHARGE DIAGNOSIS

Personality Disorder - Explosive Type
Borderline Mental Deficiency

RECOMMENDATIONS

1. To continue Chlorpromazine, 150 mgs. t.i.d. and Trihexyphenidyl, 2 mgs. o.d.
2. Follow up at the Cape Breton Mental Health Clinic by Dr. C. Donovan and family physician, Dr. A. Guam.

Signed: 
E.P.D. Aquino, M.D.

/s/jm

Copies To:
Cape Breton Mental Health Clinic
Cape Breton Health Unit
Dr. A. Guam
Chart

TRANSFER DOCUMENT

72-03444

It has been found necessary to transfer John Lewis PRATICO
(Name of Patient)
from the Cape Breton Hospital
(Name of Local Hospital) to the Nova Scotia Hospital
for the following reasons: Aggravated mental state

This patient was transferred from the Nova Scotia Hospital to a Local Asylum for the Harmless
Insane on March 29, 1972
(Date)

INFORMATION RESPECTING PATIENT

Sex Male Age 17 years Religion R.C.
Violent? At times Destructive? At times Clean? Yes
Unclean? No Homicidal? No Suicidal? No
From what physical disability does he suffer?
Give name and address of nearest relative Mr. Lewis Pratico (Father)
212 Henry Street, Sydney, N.S.
Place Sydney River, N.S. Telephone 564-6535 Neighbours 539-3146
Date December 12, 1972

IMPORTANT

This form is only to be used for the transfer to the Nova Scotia Hospital and must be
transferred from that institution. It must be sent with the patient to the Nova Scotia Hospital.

NOVA SCOTIA HOSPITAL

DISCHARGE SHEET

WARD: 53

DATE: _____

ORDERED

DATE

DISCHARGE DATE:

23 January '78

TYPE OF DISCHARGE:

FULL:

ON TRIAL:

NO. OF MONTHS:

Form I.

Form II.

DIAGNOSIS:

Personality Disorder - Explosive
Type

TREATMENT HAS BEEN:

Chlorpromazine 150 mg TID
Trichlorphenidyl 2 mg OD
Nozitan 25 mg hs prn
Adolescent Program

RECOMMENDATIONS:

1. Medication

Chlorpromazine 150 mg TID
Trichlorphenidyl 2 mg OD

2. Discharged in care of -

Cape Breton father

3. Aftercare:

Cape Breton Mental Health Ctr
Dr. A. Gaurin + family physicianDr. A. Gaurin

Form # 396

SIGNED:

[Signature]

72-03444

PRATICO JOHN LOUIS
 12 12 72 03544 31 12 54 YARD
 17 81M. RC CERT. TRANSFER SRD
 NSI 110 929 841 01 NIL
 212 HENRY ST STONEY NS
 MR LEWIS PRATICO FATHER
 SAME ADDRESS
 PH 564 6535
 A B GUAN F OR 71 03131

NOVA SCOTIA HOSPITAL INSURANCE COMMISSION
PSYCHIATRIC SEPARATION

7203444

1-3	4-6	7-14	15-22																														
ADMISSION NO.	DATE OF ADMISSION	NAME OF PATIENT																															
-03544	12 Dec. 72	SURNAME	GIVEN NAMES																														
		PRATICO, John	Louis																														
COL. 21-30 TREATMENT SERVICES	CHECK ALL APPLICABLE ITEMS																																
	1 <input type="checkbox"/> INVESTIGATION ONLY	2 <input type="checkbox"/> FAMILY THERAPY	7 <input type="checkbox"/> E.C.T.																														
	2 <input checked="" type="checkbox"/> INDIVIDUAL THERAPY	8 <input type="checkbox"/> BEHAVIOR THERAPY	8 <input type="checkbox"/> SUBCUTANEOUS INSULIN																														
	3 <input checked="" type="checkbox"/> GROUP THERAPY	9 <input checked="" type="checkbox"/> CHEMOTHERAPY	9 <input type="checkbox"/> OTHER _____ SPECIFY																														
COL. 31 CONDITION ON SEPARATION	1 <input checked="" type="checkbox"/> IMPROVED	2 <input type="checkbox"/> UNDETERMINED																															
	3 <input type="checkbox"/> UNIMPROVED	4 <input type="checkbox"/> DIED																															
COL. 32-33 SEPARATED IN	<table border="1"> <tr> <th>INSTITUTION</th> <th>COMMUNITY</th> <th></th> </tr> <tr> <td>1 <input type="checkbox"/> NOVA SCOTIA HOSPITAL</td> <td>10 <input type="checkbox"/> PRIVATE PSYCHIATRIST</td> <td>16 <input type="checkbox"/> DIED</td> </tr> <tr> <td>2 <input type="checkbox"/> MUNICIPAL MENTAL HOSPITAL</td> <td>11 <input type="checkbox"/> PSYCHIATRIC-OUTPATIENT</td> <td>17 <input type="checkbox"/> UNKNOWN</td> </tr> <tr> <td>3 <input type="checkbox"/> GENERAL HOSPITAL</td> <td>12 <input type="checkbox"/> PUBLIC HEALTH</td> <td></td> </tr> <tr> <td>4 <input type="checkbox"/> OUT-OF-PROVINCE HOSPITAL</td> <td>13 <input type="checkbox"/> OTHER MEDICAL</td> <td></td> </tr> <tr> <td>5 <input type="checkbox"/> FOSTER HOME</td> <td>14 <input checked="" type="checkbox"/> NONMEDICAL</td> <td></td> </tr> <tr> <td>6 <input type="checkbox"/> WELFARE INSTITUTION</td> <td>15 <input type="checkbox"/> SELF CARE</td> <td></td> </tr> <tr> <td>7 <input type="checkbox"/> PRIVATE INSTITUTION</td> <td></td> <td></td> </tr> <tr> <td>8 <input type="checkbox"/> PENAL INSTITUTION</td> <td></td> <td></td> </tr> <tr> <td>9 <input type="checkbox"/> OTHER INSTITUTION (SPECIFY)</td> <td></td> <td></td> </tr> </table>			INSTITUTION	COMMUNITY		1 <input type="checkbox"/> NOVA SCOTIA HOSPITAL	10 <input type="checkbox"/> PRIVATE PSYCHIATRIST	16 <input type="checkbox"/> DIED	2 <input type="checkbox"/> MUNICIPAL MENTAL HOSPITAL	11 <input type="checkbox"/> PSYCHIATRIC-OUTPATIENT	17 <input type="checkbox"/> UNKNOWN	3 <input type="checkbox"/> GENERAL HOSPITAL	12 <input type="checkbox"/> PUBLIC HEALTH		4 <input type="checkbox"/> OUT-OF-PROVINCE HOSPITAL	13 <input type="checkbox"/> OTHER MEDICAL		5 <input type="checkbox"/> FOSTER HOME	14 <input checked="" type="checkbox"/> NONMEDICAL		6 <input type="checkbox"/> WELFARE INSTITUTION	15 <input type="checkbox"/> SELF CARE		7 <input type="checkbox"/> PRIVATE INSTITUTION			8 <input type="checkbox"/> PENAL INSTITUTION			9 <input type="checkbox"/> OTHER INSTITUTION (SPECIFY)		
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7 <input type="checkbox"/> PRIVATE INSTITUTION																																	
8 <input type="checkbox"/> PENAL INSTITUTION																																	
9 <input type="checkbox"/> OTHER INSTITUTION (SPECIFY)																																	
COL. 34 NATURE OF SEPARATION	1 <input checked="" type="checkbox"/> ON MEDICAL ADVICE	2 <input type="checkbox"/> AGAINST MEDICAL ADVICE	3 <input type="checkbox"/> DEATH																														
COL. 35-36 FINAL DIAGNOSIS	Personality disorder - explosive type		CODE NO. 301.3																														
COL. 37-42 OTHER SIGNIFICANT CONDITIONS																																	
COL. 43-46 CAUSE OF DEATH			CODE NO. COL. 41 AUTOPSY <input type="checkbox"/> YES <input type="checkbox"/> NO																														
COL. 47-50 DATE OF SEPARATION	DAY: 23	MONTH: JAN	YEAR: 1972 TOTAL DAYS: 13																														
ACCOUNTING RECORD																																	
COL. 51-54 RESPONSIBILITY	RESPONSIBILITY OF:	TOTAL DAYS	DATE																														
	TOTAL																																

NOVA SCOTIA HOSPITAL INSURANCE COMMISSION PSYCHIATRIC ADMISSION

72-03444

NAME OF HOSPITAL N.S. Hospital		ADM. OFF. NO. -03544	DATE OF ADMISSION HOUR X DAY 12 MO. 12 YEAR 72		WARD 8	RESPONSIBILITY N.S.H.I.C.	
GIVEN NAMES PRATICO, John Louis			MUNICIPALITY Sydney City		SOCIAL INSURANCE NO. 110-929-841-01		
ADDRESS 212 Henry St., Sydney, N.S.			COUNTRY OF BIRTH Canada		RELIGION R.C.		
DATE OF BIRTH DAY 31 MO. 12 YEAR 54		MARRIAGE STATUS Single		EDUCATION Gr. 7		RELATIONSHIP Father	
NAME OF THE BLADE Lewis		ADDRESS Mrs. Margaret Pratico		RELATIONSHIP Mother		PHONE NO. 564-6535	
RECEIVED BY Dr. A. ... - Fam. Dr.		DOCTOR/AGENCY Transfer					

COL. 29 METHOD OF ADMISSION
 1 INFORMAL 2 VOLUNTARY 3 CERTIFIED 4 WARRANT 5 OTHER - COURT

COL. 30-31 ADMITTED FROM
 1 NOVA SCOTIA HOSPITAL 2 COMMUNITY 3 PENAL INSTITUTION
 2 MUNICIPAL MENTAL HOSPITAL 6 FOSTER HOME 10 OTHER
 3 GENERAL HOSPITAL 7 WELFARE INSTITUTIONS 11 UNKNOWN
 4 OUT-OF-PROVINCE HOSPITAL 8 PRIVATE INSTITUTIONS

COL. 32-33 IF PATIENT IS STUDENT OR HOUSEWIFE, COMPLETE FOR HEAD OF FAMILY
 OCCUPATION OF PATIENT
 1 MANAGERIAL - PROFESSIONAL 5 FARMER 9 CRAFTSMAN - PRODUCTION WORKER
 2 CLERICAL - SALES 6 LUMBERMAN 10 LABOURER - OTHER
 3 SERVICE - RECREATION 7 FISHERMAN 11 NONE
 4 TRANSPORT - COMMUNICATION 8 MINER 12 UNKNOWN

COL. 34 EMPLOYMENT STATUS OF PATIENT
 1 SELF-EMPLOYED 4 NEVER EMPLOYED 7 HOUSEWIFE
 2 OTHER EMPLOYED 5 PRE-SCHOOL 8 UNKNOWN
 3 UNEMPLOYED 6 STUDENT

COL. 35-39 PSYCHIATRIC HISTORY
 35-37 PREVIOUS TREATMENT (UP TO 3 ITEMS MAY BE CHECKED)
 1 MENTAL HOSPITAL 3 MENTAL HEALTH CLINIC 5 NONE
 2 GEN. HOSP. - PSYCHIATRIC UNIT 4 PRIVATE PSYCHIATRIST 6 UNKNOWN

LAST EPISODE
 ADMISSION DATE **Nov. 1971** **N.S.H.** FACILITY OR INSTIT.

38-39 PREVIOUS ADMISSIONS
 TO ANY PSYCHIATRIC FACILITY 1 NONE 2 ONE 3 MORE THAN ONE 4 UNKNOWN
 TO THIS HOSPITAL 1 NONE 2 ONE 3 MORE THAN ONE

40-41 PSYCHIATRIC DISORDERS
 1 YES 2 NO 3 UNKNOWN

COL. 41-47 AREA AND DEGREE OF IMPAIRMENT	41 INTRAPSYCHIC FUNCTION	1 NONE	2 MILD	3 MODERATE	4 SEVERE	72-03131
	42 BEHAVIOR					
	43 SOCIAL RELATIONS					
	44 SCHOOL PERFORMANCE	N/A				
	45 WORK PERFORMANCE					
	46 PHYSICAL FUNCTION					
	47 INTELLECTUAL DEVELOPMENT					

COL. 48-71 DIAGNOSIS
Chr. Schizophrenia

COL. 72-74 OTHER SIGNIFICANT CONDITIONS
295.9

72-03444

362

NOVA SCOTIA HOSPITAL

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 WARD
17 51N. RC CERT. TRANSFER 3RD
929 841 01 N1L
212 HENRY ST SYDNEY NS
PRATICO FATHER
CR 71 03131

1. Authorization for Medical and / or Surgical Treatment

I hereby authorize the physician or physicians in charge of John Pratico (Patient's Name) to administer any treatment or to administer such anaesthetic or to perform such operation as may be deemed necessary or advisable in the diagnosis and treatment of this patient.

DATE: Dec. 12, 1972 SIGNED: _____ (Patient)

WITNESS: _____ OR: Louis J Pratico (Nearest Relative)

RELATIONSHIP TO PATIENT: _____

2. Authorization for Release of Information

Authorization is hereby granted to release to my family doctor and/or appropriate agencies such information as may be deemed necessary, subject to the discretion of the Responsible Medical Officer.

DATE: Dec. 12, 1972 SIGNED: _____ (Patient)

OR: Louis J Pratico (Nearest Relative)

RELATIONSHIP TO PATIENT: _____

3. Authorization for Dental Treatment

Authorization is hereby granted to perform such dental treatment as is deemed necessary on J. Pratico (Patient's Name) to render him/her dentally fit while a patient in the Nova Scotia Hospital.

DATE: Dec. 12, 1972 SIGNED: _____ (Patient)

OR: Louis J Pratico (Nearest Relative)

The above authorisations must be signed by the patient, or by the nearest relative in the case of a minor, or when patient is mentally incompetent.

NOVA SCOTIA HOSPITAL

ADMISSION FORM

Escort: C.B. Mental Hospl. Staff

Time of Admission: 1545 hrs.

First Admission ()

Re-Admission (x)

Esc. from Trial ()

Family Physician: Dr. A. Gaum

Referring Physician: Dr. Habib

Dentures Upper (), Lower (), Partial (), Glasses (x), Hearing Aid ()

72-03444
94

PRATICO JOHN LOUIS
12 12 78 03544 31 12 54 VARD
17 814. RC GRY. TRANSFER 3RD
431 112 929 641 01 NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 564 6555
A B GUAN F CR 71 CB130

Clinical Condition (including H.P.I., Drug and food allergies)

To begin with, see transfer letter from Dr. Habib
On admitting to day he is post-operative
says he thinks he took about a day to get over
his drunk - and says he settled down fairly well
Get along well with the staff but see patient about
a retarded child and this annoyed Pratico.

P.P.H. R.I.H. repair.

Provisional Diagnosis

schiz.

Has a Caution Card been issued?

Admission Orders (valid for 24 hours only, over a weekend and non-urgent, unless specified)

APZ 100 mgm b.i.d.
Trichlorophenyl dyl 2 mgm b.i.d.
Valium 50 mgm i.m. q.i.d.
Sleeping draught h.s. q.n.

Admitted by: V. Singh

13
72-03444

PSYCHIATRIC SURVEY - December 18, 1972:

This 17 year old male from Cape Breton, was admitted for the third time on December 12, 1972 as a Certified patient. He was referred from the Cape Breton Mental Hospital primarily for behavior problems. He was there for a few days and calmed down slightly on Chlorpromazine 100 mgs., Trihexyphenidyl 2 mgs., both t.i.d. and Valium 50 mgs. IM p.r.n. His first admission to this hospital was from August - October, 1971 because of the history of anxiety and paranoid ideation along with occasional hallucinations. He was treated with chemotherapy and all other modalities of therapy on the S-3 programme. He was referred to the local Mental Health Centre for further follow-up at this time. Discharge diagnosis at that time was Acute Adolescent Situational Reaction and Schizophrenia. He was again re-admitted a month later until March, 1972 and discharged to the Cape Breton Mental Hospital. At that time he was extremely jumpy, jittery and hyperactive. He functioned only marginally on the adolescent programme, treated with large doses of phenothiazines, presented at the Unit Conference and was felt that he could not function outside of hospital. Discharge diagnosis at that time was Schizophrenia. He remained at the Cape Breton Mental Hospital until June 13, 1972 after he had settled down considerably on Thioridazine 200 mgs., Trifluoperazine 5 mgs., Benztropine Mesylate 2 mgs., all t.i.d. with IM weekly injections of Fluoperazine, 1 cc to the care of his father.

On my interview the patient stated that his problem was mostly his nerves. "I get jumpy quick. Sometimes when I go home my sister will argue and I lose my temper." He was able to recall how many times he was in this hospital and who his doctor was at that time. Since he was out of the hospital, he said he wasn't doing badly but kept on drinking and this was three to four months after he got out of the Cape Breton Hospital. "When my nerves got bad I didn't know what to do so I started drinking." Drinking apparently occurred once a week and this was when "I argue with my sister, then I start drinking."

Mental Status: He is appropriately dressed but disheveled, cooperative and comfortable with the interviewer but quite restless. He spoke spontaneously, coherent and relevant with no evidence of thought disorder. Affect is appropriate, not depressed. Sleep and appetite were not impaired. No hallucinations and when I inquired about paranoid ideations it was gathered from his referral paper that the patient was expressing frank delusions about everybody at home, he said that his sister often argued with him which made him mad. While he was in the hospital recently he said that one guy picked on one of the

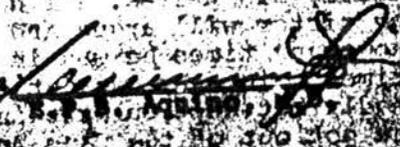
retarded kids in the hospital so he protected this kid by fighting with this guy. Sensorium - He is oriented in three spheres. His memory is grossly intact. Insight - "Just my nerves, that's all."

Impression: Since the patient came into the hospital he was continued on Chlorpromazine 100 mgs. t.i.d., Trihexyphenidyl 2 mgs. t.i.d. and hasn't shown any problem other than his being quite overactive. He was socializing well, cooperative and helpful and there was no problem in management. I do not see this boy as psychotic at the present time but we will observe him further if he requires increase in his medications. After he settles down with chemotherapy, we will refer him back to the Cape Breton Mental Hospital. I have the suspicion that this boy is of low intelligence.

Tentative Diagnosis: Chronic Schizophrenia.

Recommendations:

- (1) To continue Chlorpromazine 100 mgs. t.i.d. and Trihexyphenidyl 2 mgs. t.i.d.
- (2) For further observation if medications need to be increased further.
- (3) To participate in ward activities.

Signed: 

/jal
DD - Dec 15/72
BT - Dec 18/72

Nova Scotia Hospital
CLINICAL RECORD

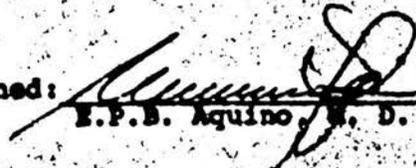
PRATICO John T.

72-03544
72-03444

Page 1

PROGRESS NOTE - December 29, 1972

John was transferred and confined to B-4 after he tried to elope with two girls. Since then, he has been cooperative and helpful and showed no problems on the ward except his being over-active. We'll try to increase his Chlorpromazine to 125 mgs. t.i.d.

Signed: 

E.P.S. Aquino, M.D.

/gjm

D. T. January 8, 1973

Nova Scotia Hospital
CLINICAL RECORD

FRATICO, JOHN LOUIS

Dr. Lopez

72-03544

72-03444

Page 3

PROGRESS NOTE - January 23, 1973

John is being discharged today to the care of his father. He was initially recommended for transfer to Cape Breton Hospital, which was approved, but after Mrs. Pelletier had talked to him about this arrangement, John was not happy returning to the Cape Breton Municipal Hospital. Cape Breton Mental Health Clinic was then contacted for evaluation of the home situation with the father in having John returned to his father. ~~and~~ Dr. Donovan agreed to have him return to his home with his father since things seemed to have improved over the past year. Dr. Donevan also agreed to follow up this patient.

Signed: 

Dr. E.P.B. Aquino, M. D.

/gjm

D. T. February 14, 1973

72-03444

No. 72-03544

FRATICO, John

Worker: (Mrs.) Judy Pelletier, M.S.W.

Social Service Note, January 30, 1973:

John was discharged from the hospital on January 23, 1973, en route to his home in Sydney. He was looking forward to going home, and seems to have progressed very well here on this admission. He was certainly a lot less volatile and aggressive this time.

John had originally been referred for admission to Cape Breton County Hospital. However, he did not like the idea and claimed that he had been living at home with his father and that this is where he wanted to go. John believed that life with father was fairly healthy.

I contacted Mrs. Burnette of the Family and Child Service. She was in touch with the father, and conveyed the message that father wanted John home; this was an acceptable placement in her view and father would be sending money for his transportation. I also wrote to the Mental Health Centre in Sydney, and was sent a report (which is on file) from them, giving the O.K. to John's father's home. The request for transfer to Cape Breton County Hospital then was cancelled.

Pelletier

72-03444

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 WARD
17 SIN. RC CERT. TRANSFER 3RD
MSI 110.929 841 01 NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 304 0515
A B 71 03131

101

NOVA SCOTIA HOSPITAL

**PRELIMINARY EXAMINATION AND REPORT
BY ADMITTING PHYSICIAN**

(To be made in Physician's own hand-writing within two hours of admission)
Please answer all questions even when the answer is in the negative or appears to be irrelevant in this case.

GENERAL PHYSICAL APPEARANCE

HEIGHT: 170.2 WEIGHT: 74.0 COLOR OF EYES: Brown
COLOR AND CONDITION OF HAIR: Brown

Rate and quality of pulse: Regular 70 120/70
If B.P. appears abnormal check by instrument:

CONDITION OF SKIN (Marks, bruises, scars, bedsores, erythema, eruptions, infections, subcutaneous edema, etc.)
Normal

CONDITION OF SKELETAL SYSTEM: (Deformities, dislocations, fractures, etc.)
Normal

EXAMINATION OF ABDOMEN: (Distension, hernia, impactions of the bowel, etc.)
R.H. 20cm

DISTENSION OF THE BLADDER (Especially important in confused and catatonic states)
None

OTHER ABNORMALITIES NOTED OR EXAMINATIONS CONSIDERED NECESSARY

72-03444

101

BRIEF SURVEY ON MENTAL STATUS

ATTITUDE AND CO-OPERATION (Very important)

Good

ORIENTATION AND MEMORY

Good

DELUSIONS, HALLUCINATIONS, HOMICIDAL OR SUICIDAL IDEAS NOTED

ANY UNUSUAL BEHAVIOR NOTED

REMARKS OR RECOMMENDATIONS FOR ATTENDING PHYSICIAN

See admit form

DATE

12/12/72

TIME

1605

SIGNED

V. Stone

101

72-03444

#32

PHYSICAL EXAMINATION

DATE: Dec - 14/22

CO-OPERATION - Good

COMPLAINTS: Had Trauma on the

RT foot - struck a piece of wood - from body was pulled out

PREVIOUS HISTORY: pulled out

about the time of the RT Hernia operation - No known allergies

GENERAL APPEARANCE

well nourished boy

Identification Marks or Scars:

Skin: Small infected area on RT foot

HEAD AND NECK:

Hair: Dark

Nose: Normal

Mouth & Tongue: moist & clear

Teeth: fairly good

LYMPHATIC SYSTEM:

Neck: 0

Axilla: 0

Groin: 0

BREASTS: NAD in palpation

RESPIRATORY SYSTEM: NAD

CIRCULATORY SYSTEM: SVP not ↑

Pulse: 92/min regular RR: 18/0

Heart: Not enlarged NO murmurs

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 VARD
17 SIM. PC CERT. TRANSFER: HRB
MSI 110 929 841 CI NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 564 6535
A-B GUAM F CR 71 03131

Pratico - John S-3

HEIGHT:

WEIGHT: 74.9 kg

Mucous Membranes: normal

Eyes: Hazel - Has glasses

Ears: 1 ear good

Throat & Tonsils: Not inflamed

Thyroid: NOT palpable

72-03444

32 (continued)

NEUROLOGICAL EXAMINATION

page 2

Gait: Normal
Station: Stead
Speech: good
Invol. Movements: None
Co-ordination: good
Pupils: Round equal react to L
Fundi: Clear
Other Cranial Nerves: intact
Motor:
Sensory: } intact

(xx - Normal; x - Hypoactive;
 xxx - Hyperactive; 0 - Absent)

RIGHT LEFT

Biceps	xx	xx
Triceps	xx	xx
Knees	xx	xx
Ankles	xx	xx
Abdomen	xx	xx
Crem.		
Plantar	flexion	
Hoffman	-	-

ABDOMINAL EXAMINATION: No mass. No Tenderness

RECTAL EXAMINATION: NAD.

G.U. EXAMINATION: Normal.

VAGINAL EXAMINATION:

BACK AND EXTREMITIES:

No deformities. Small infected area on the pt. foot.

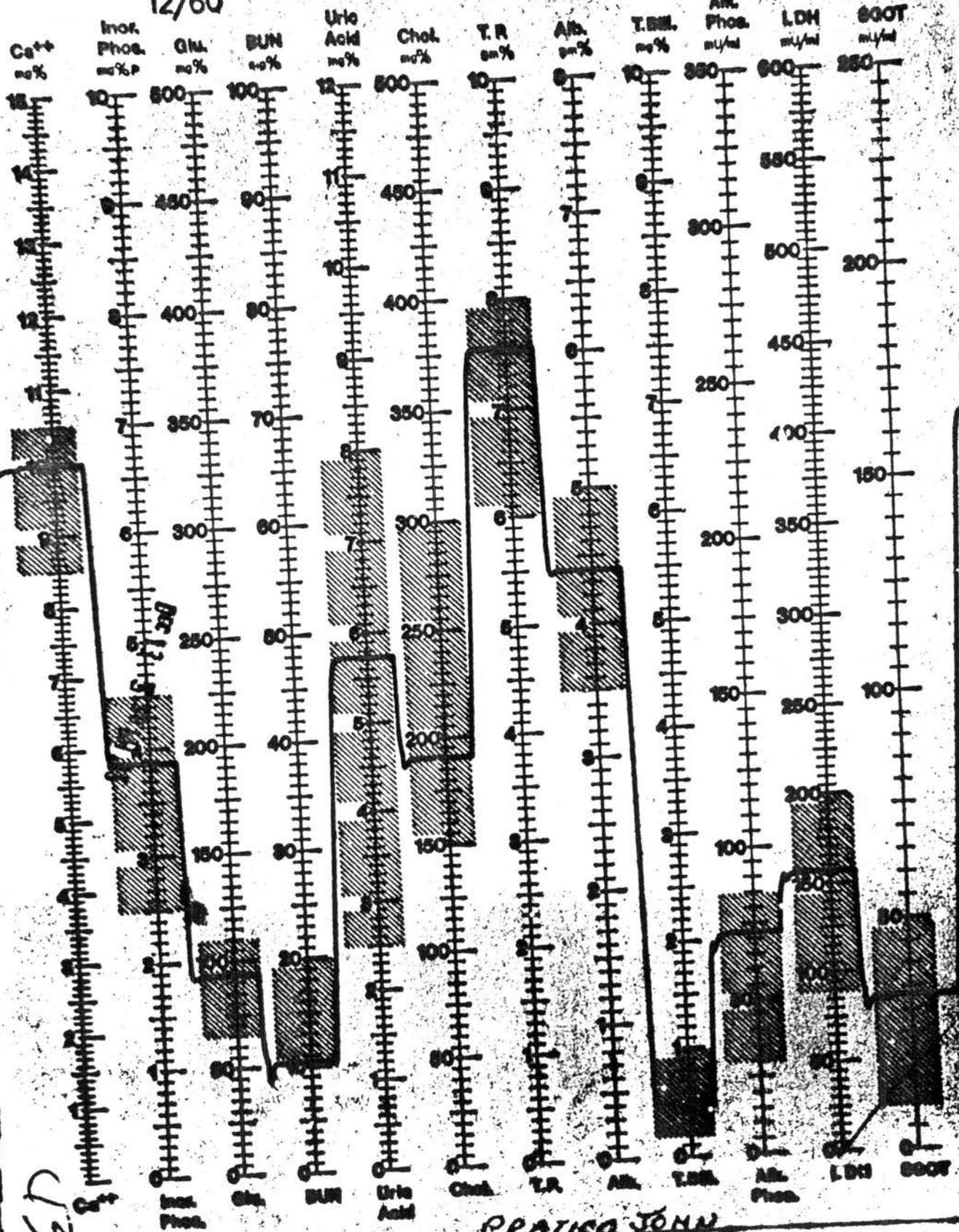
SUMMARY:

17 yrs old well nourished boy.
 Physical exam unremarkable.
 Small infected area on the pt. foot.

Examiner: S. C. [Signature]

72-03144
5-3

12/60



43

Patient Name

PRATICA JONN

SV

Date 13.12.72

USL No.

S-3

72-03544 Ward 8 4

DEC 14, 1972

Prattice, John L.

17 72-03444

Dr. Jane

MSR

HALIFAX INFIRMARY
DEPARTMENT OF PATHOLOGY
HALIFAX, NOVA SCOTIA

MISCELLANEOUS REPORTS

22 471

Date DEC 14 1972

V.D.R.L. REACTION

Non-Reactive

Reactive



Titre

BB R.T.

NOVA SCOTIA HOSPITAL

79 DOCTOR'S ORDER SHEET

WARD: S-4

DATE: Dec 12/72

72-03444

PRATICO JOHN LOUIS
 12 12 72 03544 31 12 54 WARD
 17 SIN. RC CERT. TRANSFER SRD
 NSI 110 929 841 CI NIL
 212 HENRY ST SYDNEY NS
 MR LEWIS PRATICO FATHER
 SAME ADDRESS
 PH 564 6535
 N S GOVERNOR CR 71 03131

Admission Orders

CPZ 100mg TID

Trihexyphenidyl 2mg TID

- Valium 50mg IM - PRN

Sleeping Draught AS - PRN

Doctor's signature

Dec 13/72

transfer to S-3

Dr. Burslem / J. DeGastrea

Dec 14/72 Warm Saline Soaks Rt foot TID

10 - each day

Ampicillin 500mg ABM for 7 days

signature

Dec 19/72 Transfer to S-4

Dr. Burslem / J. DeGastrea

Dec 20/72

CPZ 100mg TID

~~CPZ~~ Trihexyphenidyl 2mg P.O. Q.D.

Valium 50mg I.M. PRN

Loxapane 25mg HS PRN

Michael Burslem

29 Dec '72 One CPZ to 125mg TID

signature

72-03444

NOVA SCOTIA HOSPITAL

79 DOCTOR'S ORDER SHEET

WARD: 8-9

DATE: Jan 1/73

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 WARD
17 814. PC CERT. TRANSFER 3RD
NSI 110 929 841 CI NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 564 6835
A B GUAN P CR 71 03131

Jan 2/73 Jan 1 1 8.

re. Dr. Aquino / Dr. Rebar

10 Jan 73

Pres. CPZ to 150 mg TID

[Signature]

Jan 2/73.

Full discharge in the care of his father,
Mr. Louis Pratico, 212 Henry St., Sydney, NS.
Aftercare at Cape Breton Mental Health
services. Two week supply of Chlorpromazine
150mg tid; trihexyphenidyl 2mg qd. Left
at 11:00 hr with social worker to
catch 11:30 hr train home.

Dr Aquino / P. Rebar, MD

72-03444

PSYCHIATRIC NURSING NOTES

Page No. 1

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 WARD
17 SIN. RC CERT. TRANSFER 3RD
MSI 110 929 841 01 NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 564 6535
A B GUAM F DR 71 03131

Dec 12/72 (1630 hrs)

Admitted, ambulatorily to S-4. Pres. Diag "Schizophrenia".
Destructive on adm. Continually
twitching during interview.

States he was admitted to
Cape Breton Hospital because he was
drinking shaving cream & rubbing alcohol.
This position he states used to be fine
but it isn't anymore. "I have had several
you know" then completely change the
subject & state "I haven't eaten anything
in ages."

Running around ward, getting
settled & familiarizing himself with staff
& other pts. Co-operative to admission
processes. Friendly in approach.
A.P. 120

(1630-2400) Socializing well. Co-operative
& helpful in ward. Settled for sleep
early.

72-03444

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 YARD
17 81M. PC CERT. TRANSFER 2R
MSI 110 929 841 01 NIL
212 HENRY ST STONEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 564 6535
A B GUAM P CR 71 03131

PSYCHIATRIC NURSING NOTES

Page No. 2

Dec 12/72 (2400-0800 L)

Up early part of the shift. Loud and
childish about ward. Ch. Hygiene given at bedtime
Shift well after 0800 L.

[Signature]

Dec 13/72 (0800-1600)

Up about usual this a.m. very active, talking
continually to staff; estimate. Co-operative to staff
transferred to S-3.

[Signature]

Dec 19/72

Has been somewhat overactive on the ward,
loud at times & bothering the other patients
occasionally, keeping them awake at night.
This morning eloped. Two female
patients from the hospital returned
this afternoon @ 3:00 p.m. Transferred to
S-4 by Dr. Bursales.

[Signature]

PSYCHIATRIC NURSING NOTES

Page No. 2

72-03444
PRATICO JOHN LOUIS
12 72 03544 31 12 54 VARD
17 SIN. RC CERT. TRANSFER 320
M61 170 929 841 01 NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 864 6535
B GUAN P CR 71 03131

Dec. 23. 72 (1600-2400 hrs) Pratico, John 72-03544

Pt. helpful but over active at times, talking about other pts. and happenings on the floor & staff, c/o vomiting and upset stomach at 23:00 hrs. travel some given. 1. Sargent
Temp 37.2°C, P 104 BP 105/65

Dec 25/72 (0800-1600)

Very helpful about ward & anxious to please. Taking active part in ward activities. Naisy & hysterical at times although has been very quiet during latter part of week. Appetite good. Personal hygiene fair.
W. H. H. R. N.

Dec. 26. 72 (18:00 hrs)

Pt c/o not having had a "b.m." for last three days.

John Very active and loud at times anxious to please. No complaints noted. Appetite good. Hygiene fair. Weight 78.3kg
W. H. H. R. N.

PSYCHIATRIC NURSING NOTES

72-03444

Page No. 1

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 WARD
17 SIN. PC CERT. TRANSFER 3RD
MSI 110 929 841 01 NIL
212 HENRY ST SYDNEY NS
MR LEUIS PRATICO FATHER
SAME ADDRESS
PH 564 6535
A B GUAM F OR 71 03131

Jan 4/73 (0800-1400)

Confused today. Refused to go down. Became upset & began crying. Stated that he wasn't going to a county home but wanted to go home to his dad. Explained to him that he would be transferred back to the hospital in Sydney; if he continued to do well he would be discharged in his father's care. Little down this afternoon. Started on 9-2 during the day.

J. De Costa R.N.

Jan 5/73 (0800-1600)

Started day care on 9-3 J. De Costa R.N.

0800 - 2100 hrs

Jan 8/73. (0800¹⁴⁴¹-1600) Home A 5-3.

W. H. H. H.

Jan 10-73 -

For the past couple of days he has been low and withdrawn on the ward. He has been using a lot of language and states he is being picked on. He still remains high on the ward.

72-03444

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 VARD
17 SIM. RC CERT. TRANSFER 3ND
MSI 110 929 841 CI NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 564 6535
A B GUAM F CR 71 03131

Jan. 25 (cont)

and carries out his ward duty well. He appears to be concerned about his return to Case Bldg. Hospital. He is presently having a decrease in his medication.

Signature

Jan. 11-72. John's behavior remains calm to 6. He has been going to his work placement successfully. His medication were increased yesterday and appear very steady today. He appeared very disinterested in group activities today. John participates in all ward activities and is very helpful around the ward.

Signature

Jan. 10-72. John's behavior remains calm. The afternoon he was carrying out duties in the kitchen in the hall. He attended his work placement without reminders. Still very helpful around the ward.

Signature

72 03444

Page No. 6

PRATICO JOHN LOUIS
12 12 72 03544 31 12 54 WARD
17 SIN. RC CERT. TRANSFER SRD
NSI 110 929 841 CI NIL
212 HENRY ST SYDNEY NS
MR LEWIS PRATICO FATHER
SAME ADDRESS
PH 564 6535
A B GUAM F CR 71 03131

Jan 23/73

Full discharge in care of his father
Mr. Lewis Pratico of 212 Henry St Sydney
N.S. Aftercare at Fore Cape. Briton Mental
Health Clinic. Two week supply of
Chlormprom 150mg tid; itribexyphenidyl 2mg
qd given. Left for 1130hr train with
Mrs. Pollitier, social worker for home

Dr. Aquino / P. Polver, MD

Cape Breton Hospital

72-23444

SYDNEY, NOVA SCOTIA

P. O. BOX 511, SYDNEY, N.S. B2N 2B7

TRANSFER NOTE

NAME: PRATICO, John

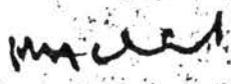
DATE OF TRANSFER: December 12, 1972

This patient was transferred to this hospital from the Nova Scotia Hospital on March 29, 1972 after he was treated for his schizophrenic illness. He was discharged from this hospital on June 13, 1972 after he had settled down considerably on Thioridazine 200 mgs., Trifluoperazine 5 mgs. Benztropine Mesylate 2 mgs.; all t.i.d. with I/M weekly injections of Fluoperazine 1 s.c., to the care of his father.

On the evening of December 7, 1972, he was brought to the hospital by the police when he was shouting, aggressive, restless and unmanageable. On the ward, he started hitting the patients without any reason and was expressing frank delusions against everybody at home. In addition, he was drinking liquor; almost anything he could get, including shaving lotion, etc. He also has some family problems-- his father is living with another woman and his mother is living with another man and there is nobody at home to identify with. He has no work record and there are some financial hardships as well. He is more of a behaviour problem than anything else. He has calmed down slightly on the following medication: Chlorpromazine 100 mgs., Tribexyphenidyl 2 mgs. both t.i.d. with Valium 50 mgs. I/M p.r.n.

Thank you very much for accepting this patient.

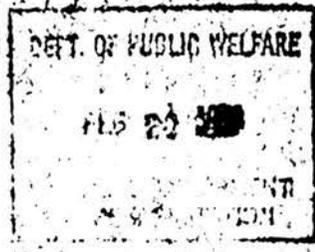
Signed,



M. Habib, M.D., D.P.M., M.R.C. Psych.

nlr

72-03444



PROVINCE OF NOVA SCOTIA
DEPARTMENT OF PUBLIC WELFARE
REHABILITATION SERVICES

MEDICAL INFORMATION CONSENT FORM

I hereby authorize the Medical Consultants to the Department of Public Welfare to examine any or all of my medical records.

I also authorize any doctor or hospital who examined or treated me as a patient to release copies of my medical records or reports to the Department of Public Welfare.

It is understood that such records or reports concerning my medical condition will be treated as confidentially as possible and will be used for the purpose of rehabilitation planning determining my eligibility.

J. John Pratico
(Signature)

..... 212 Henry St
..... Sydney, N.S.
(Address)

A. Brucette
(Witness)

Date in Hospital *Dec 12/72*: *Jan 1973*
Name of Hospital, Clinic, or Doctor *St. Anne's Hospital*
Dartmouth, N.S.
Date Signed *Feb 12/73*

PLEASE RETURN THIS FORM WITH YOUR APPLICATION FOR REHABILITATION SERVICES.

THE GARDEN CITY MENTAL HEALTH CENTRE

Dr. Donovan

EXECUTIVE DIRECTOR - E. G. MADDOGHASH, M.D.
PSYCHIATRISTS - DR. C. DONOVAN
DR. J. P. K. BINNIE
DR. R. S. SAMUEL (CHILD PSYCHIATRIST)
TEL. 562-3333

TELEPHONES: 562-3203
562-3110

94 ST. PETER'S ROAD
SYDNEY, N. S.

January 15, 1973

Mrs. Judy Pelletier, M. S. W.
Social Service Department
Nova Scotia Hospital
Dartmouth, N. S.

723544

Dear Mrs. Pelletier:

RE: John Pratico (age 18)
212 Henry Street
Sydney, N. S.

Thank you for your letter about the captionally named who is presently in your hospital.

I feel that it would be all right for him to return to his home with his father. Things seem to have improved over the past year. He stopped coming to see us at the clinic following an altercation he had with us about having to pay for his drugs. It was a paranoid misunderstanding but it would be helpful if prior to discharge it would be pointed out to him that since he will soon be 18 and in receipt of Provincial Social Assistance he will be expected to pay for his drugs at the clinic. We sell them at about a sixth of the cost.

Yours sincerely,

C. Donovan

C. Donovan, M.D.
Psychiatrist

CD/bas

OS



NEW BRUNSWICK

72-3544

Centre Hospitalier Restigouche Hospital Centre
Formerly
Provincial Hospital, Campbellton, N.B.
THE PROVINCIAL HOSPITAL
L'HÔPITAL PROVINCIAL
CAMPBELLTON, N.B.
R2M 2B8

ME. 72-3544

DATE October 10, 1980

Nova Scotia Hospital
Pleasant Street,
P.O. Box 1004,
S1Y 3Z9

Dear Doctor:

Patient's Name JOHN R. PRATICO (John Pratico).
Our Record # 80-193

Address NEWCASTLE N.B.

Birthdate 31-12-1954

Father's name HOWES

The above mentioned patient states that he/she was treated in your hospital in MARCH 1979 for 6 months.
Would you kindly send us a summary of your findings.

Yours very truly,

H. C. ... M.D.
... M.D.

I hereby authorize Nova Scotia Hospital
to disclose any information pertinent to

my case to the Restigouche Hospital Centre, Campbellton, New Brunswick
Canada.

WITNESSED: [Signature]

SIGNED: [Signature]
John Pratico

PS: PLEASE SEND REPLY DIRECTLY TO DR. H. SEQUEIRA.

NOVA SCOTIA HOSPITAL
DARTMOUTH, N.S.

72-03444

-- DISCHARGE REPORT --

FILE

SERVICE: IN-PATIENT

NAME: PRATCO, John L.

CASE NUMBER: 71-03131

ADDRESS: 201 HENTING ST.
SYDNEY, N.S.

DATE OF ADMISSION: NOVEMBER 29, 1971

AGE: 16

DATE OF DISCHARGE: MARCH 29, 1972

NEAREST RELATIVE: N/A

~~RECOMMENDATIONS~~ FULL DISCHARGE TRANS.
TO CAPE BRETON COUNTY
HOSPITAL
STATUS: CERTIFIED

This patient has had two admissions to the Nova Scotia Hospital for treatment of schizophrenia. On admission he was extremely jumpy, jittery and hyperactive.

While in hospital patient functioned only marginally on the adolescent programme and was treated with large doses of phenothiazines. He was presented at our Unit Conference on February 24, 1972 and at that time it was felt that he could not function outside of hospital. It was therefore recommended that he be transferred to a Municipal Mental Hospital.

DIAGNOSIS: Schizophrenia.

RECOMMENDATIONS: At present patient is receiving Mellaril 200 mgm. q.i.d., Meprobamate 5 mgm. t.i.d. and Cogentin 2 mgm. t.i.d.

He is being transferred to the Cape Breton County Hospital and should continue on the above medication.

for P.K. John, M.B.B.S., F.R.C.P.(C)
Senior Psychiatrist.

/s.

Note: Copy of Psychiatric Survey sent with patient.

Money Being Held In Trust Fund: Nil.

NOVA SCOTIA HOSPITAL INSURANCE CO. LTD.
PSYCHIATRIC SEPARATION

72-03444

NAME OF HOSPITAL		2-3	4-6 ADMISSION NO.	9-14 DATE OF ADMISSION			16-22	NAME OF PATIENT																																																																																											
N S HOSPITAL			-03131	DAY	MONTH	YEAR	SURNAME	GIVEN NAMES																																																																																											
				29	Nov.	71	PRATICO,	John L.																																																																																											
COL. 71-79 TREATMENT SERVICES	CHECK ALL APPLICABLE ITEMS																																																																																																		
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COL. 25-28 FINAL DIAGNOSIS	Schizophrenia							CODE NO.	295.9																																																																																										
COL. 29-34 OTHER SIGNIFICANT CONDITIONS																																																																																																			
COL. 47-50 CAUSE OF DEATH							CODE NO.	COL. 51 AUTOPSY																																																																																											
								<input type="checkbox"/> YES <input type="checkbox"/> NO																																																																																											
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ACCOUNTING RECORD																																																																																																			
COL. 60-64 MEDICINE RESPONSIBILITY	RESPONSIBILITY OF:			TOTAL DAYS	RATE	AMOUNT																																																																																													
	TOTAL																																																																																																		

NOVA SCOTIA HOSPITAL INSURANCE COMMISSION

PSYCHIATRIC ADMISSION

7203444

NAME OF HOSPITAL N.S. Hospital		ADD. OR NO. -03131	DATE OF ADMISSION HOUR X P.M. DAY 29 MO. 11 YEAR 72		WARD 8	RESPONSIBILITY N.S.H.I.C.
SURNAME PRATICO		GIVEN NAMES John Louis		MUNICIPALITY Sydney City		SOCIAL INSURANCE NO. 110-929-841-01
STREET ADDRESS 201 Bentinck St., Sydney, N.S.		CITY Sydney City		COUNTRY OF BIRTH Canada		
SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	DATE OF BIRTH DAY 31 MO. 12 YEAR 54	AGE 16	IS PATIENT A TWIN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	MARITAL STATUS Single	EDUCATION Gr. 7	RELIGION R.C.
RELATIONSHIP Mrs. Margaret Pratico		REFERRED BY Same		RELATIONSHIP Mother		

DOCTOR/AGENCY **Dr. A. Gaum - Fam. Dr.** REFERRED BY **Same** DOCTOR/AGENCY **Mother**

COL. 29 METHOD OF ADMISSION

1 INFORMAL 2 VOLUNTARY 3 CERTIFIED 4 WARRANT 5 OTHER - COURT

COL. 30-31

1 NOVA SCOTIA HOSPITAL 5 COMMUNITY 9 PENAL INSTITUTION

2 MUNICIPAL MENTAL HOSPITAL 6 FOSTER HOME 10 OTHER

3 GENERAL HOSPITAL 7 WELFARE INSTITUTIONS 11 UNKNOWN

4 OUT-OF-PROVINCE HOSPITAL 8 PRIVATE INSTITUTIONS

COL. 32-33 IF PATIENT IS STUDENT OR HOUSEWIFE, COMPLETE FOR HEAD OF FAMILY

OCCUPATION OF PATIENT

1 MANAGERIAL - PROFESSIONAL 5 FARMER 9 CRAFTSMAN - PRODUCTION WORK

2 CLERICAL - SALES 6 LUMBERMAN 10 LABOURER - OTHER

3 SERVICE - RECREATION 7 FISHERMAN 11 NONE

4 TRANSPORT - COMMUNICATION 8 MINER 12 UNKNOWN

COL. 34 EMPLOYMENT STATUS OF PATIENT

1 SELF-EMPLOYED 4 NEVER EMPLOYED 7 HOUSEWIFE

2 OTHER EMPLOYED 5 PRE-SCHOOL 8 UNKNOWN

3 UNEMPLOYED 6 STUDENT

COL. 55-57 PREVIOUS TREATMENT (UP TO 3 ITEMS MAY BE CHECKED)

1 MENTAL HOSPITAL 3 MENTAL HEALTH CLINIC 5 NONE

2 GEN. HOSP. - PSYCHIATRIC UNIT 4 PRIVATE PSYCHIATRIST 6 UNKNOWN

PSYCHIATRIC HISTORY

LAST EPISODE

ADMISSION DATE **Aug.** **1971** **N.S.H.**

MONTH YEAR FACILITY OR SECTION

58-59 PREVIOUS ADMISSIONS

TO ANY PSYCHIATRIC FACILITY 1 NONE 2 ONE 3 MORE THAN ONE 4 UNKNOWN

TO THIS HOSPITAL 1 NONE 2 ONE 3 MORE THAN ONE

60-61 PSYCHIATRIC DISORDERS

1 YES 2 NO 3 UNKNOWN

COL. 61-67 AREA AND DEGREE OF IMPAIRMENT	61 INTRAPSYCHIC FUNCTION	1 NONE	2 MILD	3 MODERATE	4 SEVERE	71-02150
	62 BEHAVIOR			3		
	63 SOCIAL RELATIONS			3		
	64 SCHOOL PERFORMANCE			3		
	65 WORK PERFORMANCE			3		
	66 PHYSICAL FUNCTION	X				
	67 INTELLECTUAL DEVELOPMENT	3				

COL. 68-71 DIAGNOSIS **Schiz**

COL. 72-79 OTHER SIGNIFICANT CONDITIONS

295.

72-03444

(FORM A)
NOVA SCOTIA HOSPITAL
STATEMENT

The information asked for in the following questions should be given as fully as possible, going into careful detail in each instance. This is desired because it becomes a part of the patient's case-record after admission to the hospital, and it may be of the greatest assistance to the hospital staff in deciding upon the treatment to be followed. It would be well to have the attending physician assist in the preparation of the statement, if practicable.

Before any person is forwarded for admission to the Hospital by medical certificates, a statement of particulars in Form A of the Schedule, and two medical certificates in Form B of the Schedule shall be furnished to the Superintendent and his answer and approval shall be received.

- 1. NAME IN FULL *John Louis Martico*
- 2. RESIDENCE *201 Brantwick St Sydney* BIRTHPLACE *Sydney*
- 3. AGE *14* BIRTHDAY AND YEAR *Dec 31, 1954* RELIGION *RO*
- 4. SINGLE MARRIED, WIDOWED OR DIVORCED

FAMILY HISTORY

- 5. NAME OF FATHER *James H* BIRTHPLACE *British Columbia*
- 6. MOTHER'S MAIDEN NAME *Hawco* BIRTHPLACE *Sydney*

- 7. If either of the patient's parents is dead, state age at death and cause of death
- 8. Is there any degree of relationship between the patient's parents? *no* If so, state fully
- 9. How many brothers and sisters of the patient are living? *10 - 1949* Age of each
- 10. How many brothers and sisters are dead? *nil* Age and cause of death
- 11. If any of the relatives have been treated in a hospital for epilepsy or other disease of the nervous system or insanity, state what hospital and date, and the name of the patient so treated.

PERSONAL HISTORY

How many children has patient had?

(b) If they are deceased, give age at death and cause of death.

(a) Their ages, if living

11. Was the patient as an infant and young child healthy, strong and well developed or otherwise? *YES*
State exceptions.

14. At what age did the patient walk?

Talk?

Go to school?

15. Did patient learn readily?

16. What diseases of infancy and childhood has the patient had?

17. Has the patient ever suffered from any mental or nervous disease (nervous exhaustion, paralysis, epilepsy, hysteria, chorea, tic or habit spasm, head injury or serious accident? State particulars fully in each case, giving age at which injury or condition occurred, and name of hospital treated in if any.

18. Has the patient ever suffered from tuberculosis, acute or chronic rheumatism, gout, eczema, kidney disease, diabetes, cancer, heart disease, syphilis, rickets, pneumonia, typhoid fever, or any infectious disease?

19. What have been the patient's habits as to the use of: (a) alcoholic stimulants, (b) narcotic drugs, opium, etc?

drank to excess on occasion

Nova Scotia Hospital

72-03444

HISTORY OF PRESENT ATTACK

20. Was there any change in character and disposition previous to the present mental change and when did such change first appear?

AGGRESSIVE
with

21. What were the first mental symptoms observed (a) Depression or excitement (b) lassitude or restlessness (c) talkativeness or reticence (d) obtuseness or tactlessness (e) irritability, indignation or the contrary (f) loss of memory (g) defects in judgment (h) confusion or (i) self-accusation?

22. Have the mental changes been progressive and regular or have they suddenly varied; the patient at times seeming much better or the contrary?

23. What are the changes which have taken place in patient's mental and physical symptoms since the commencement of the attack?

12
Note particularly any delusions (false ideas) or hallucinations (perversion of the sense of sight, hearing, etc.) which the patient has had. It is important that change in manner, habits and ideas which have occurred be stated, and as fully as possible. Note any change in speech, habitual or frequent repetition of the same work or phrase, disturbance of vision, alternation of handwriting, difficulty of walking or change of gait, faint or loss of consciousness, convulsive attacks, paralysis in any form, impairment of any muscle or set of muscles or any twitching of limb or single muscle or habitual movements or attitudes?

24. Has suicide or violence to others been threatened or attempted? If so, in what way?

25. State fully any other facts bearing on the case or the patient's past or present history.

26. What physicians have seen the patient during the attack? Give name and address if such known.

72-3444

29. Name, post office and telephone address of relative or friend to whom letters are to be written or information sent.

30. Person giving above history sign name and full address.

I, Mrs. Margaret Mackie certify that to the best of my knowledge the foregoing particulars are correctly stated and I hereby request that the above named John Mackie when I saw at

day of (being within fourteen days from this date) he received as a patient into the Nova Scotia Hospital.

Degree of relationship if any of person giving history Mother

If not signed by a husband or wife or relative of the patient, give the reason why the Statement is not so signed, and the connection of the person who is giving the statement with the patient.

Signed at Sydney Name Mrs. Mackie

On the 26th day of November 1951 at 201 Bentinck St.

Witness Mrs. Bepp

Address Family Co-act. P.O. Box 285 Sydney N.S.

Extract from Chap. 8 Revised Statutes of Nova Scotia, 1930, referring to the mode of admission of a patient to the Nova Scotia Hospital.

The Superintendent may refuse to admit to the Hospital:

- (a) persons who are mentally defective;
- (b) mentally ill persons who are not suicidal or dangerous to the life and property of others; or
- (c) persons who from long-standing mental illness are not likely to be benefited by treatment in the Hospital.

NOVA SCOTIA HOSPITAL

72-03444

MEDICAL CERTIFICATE

- (1) Name in full
- (2) Qualification
- (3) Locality
- (4) Name in full
- (5) Residence
- (6) Occupation

I, the undersigned (a) Dr. C. A. Mansfield
 being (b) M.D. and in actual practice,
 hereby certify that on the 26 day of Nov
 1971 at (c) 201 Brentwood St. Sydney in the County of CB
 separately from any other Medical Practitioner, personally examined (d) John Pratico
 of (e) 201 Brentwood St. Sydney and that the said
 (f) John Pratico is a person of unsound
 mind, and a proper person to be taken charge of, and detained under care and treatment; and
 that I have formed this opinion on the following grounds, viz:

- 1. Appearance
- 2. Conduct
- 3. Conversation

1. Facts indicating insanity observed by myself.

noted
Quiet when I saw
not coherent

- (g) State the information and from whom

2. Facts indicating insanity communicated to me by others. (g)

His mother states that John Pratico states that "people are after him" - he curses & swears intemperately
 Name Cautioned
 Place of Residence Sydney
 Date 26 Nov 71

N.B.—Two certificates (dated within fourteen days of the commitment) are required in every case. The second should not be signed by the father, brother, son, partner or assistant of the Medical Practitioner who has signed the first Certificate.

*The facts upon which (from personal observation) the opinion of insanity has been formed should always be specified

NOVA SCOTIA HOSPITAL

72-03444

MEDICAL CERTIFICATE

- (a) Name in full
- (b) Qualification
- (c) Locality
- (d) Name in full
- (e) Residence
- (f) Occupation

I, the undersigned (a) Dr. J. H. Gaum
 being (b) Surgeon and in actual practice,
 hereby certify that on the 29 day of Nov
 19 71 at (c) Halifax, NS in the County of CK
 separately from any other Medical Practitioner, personally examined (d)
John Lewis (Saxico)
 of (e) Halifax, NS (f) unemployed and that the said
John Lewis Saxico is a person of unsound
 mind, and a proper person to be taken charge of, and detained under care and treatment; and
 that I have formed this opinion on the following grounds, viz:

- 1. Appearance
- 2. Conduct
- 3. Conversation

1. Facts indicating insanity observed by myself.

insanity
Threatening people
Bad language

2. Facts indicating insanity communicated to me by others. (g)

depressions of presenter

Name Dr. J. H. Gaum
 Place of Residence Halifax, NS
THE GAUM CLINIC
 830 VICTORIA ROAD
 SYDNEY, NOVA SCOTIA

Date Nov 25 / 71

N.B.—Two certificates (dated within fourteen days of the commitment) are required in every case. The second certificate must be signed by the father, brother, son partner or assistant of the Medical Practitioner who has signed the first Certificate.

*The facts upon which (from personal observation) the opinion of insanity has been formed should always be specified

3-03131
72-03444

1382

NOVA SCOTIA HOSPITAL

Authorisation for Medical and/or Surgical Treatment

I hereby authorize the physician or physicians in charge of John Pratico (Patient's Name) to administer any treatment or to administer such anaesthetic or to perform such operations as may be deemed necessary or advisable in the diagnosis and treatment of this patient.

DATE: Nov. 29, 1971 SIGNED: _____ (Patient)

WITNESS: _____ OR: X Margaret Pratico (Nearest Relative)

RELATIONSHIP TO PATIENT: _____

Both authorisations must be signed by the patient, or by the nearest relative in the case of a minor, or when patient is mentally incompetent.

Authorisation for Release of Information

Authorisation is hereby granted to release to my family doctor and/or appropriate agencies such information as may be deemed necessary, subject to the discretion of the Responsible Medical Officer.

DATE: Nov. 29, 1971 SIGNED: _____ (Patient)

OR: X Margaret Pratico (Nearest Relative)

RELATIONSHIP TO PATIENT: _____

**NOVA SCOTIA HOSPITAL
ADMISSION FORM**

53 72-03444

Escort: Wm. Urquhart, Sgt. - Sydney

Time of Admission: 1030 hrs.
 First Admission ()
 Re-Admission ()
 Ret. from Trial ()
 Family Physician: Dr. A. Gaum
 Referring Physician: Dr. John

PRATICO, JOHN L.
 29/11/71-03131 DEC. 31/54 WARD
 16 P.C. SIN. CERT.
 NSI 110-429-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 PH. 810-CITY
 871-02158 P.O. Box 8. GAFF

Dentures Upper (), Lower (), Partial (), Glasses (), Hearing Aid ()

Clinical Condition (including H.P.I., Drug and food allergies)

The patient was here from 25/8/71 to 25/10/71 with schizotypia. He was on LPZ 200 mgm q.i.d. when released at his own request, he was to carry on with the Sydney Mental Health Centre and to take Largactil and Elantil.

The re-admission certificate notes that he is incoherent, feels that people are after him, fears and awares continually.

On admission, he lounges in his chair - says he started drinking, fighting with his mother. Denies that he had feelings that people were after him.

He says he was on LPZ 100 mgm for 2/32 after see visit to Dr. Donovan. He was given a return date but no LPZ since. Stopped his LPZ himself. Became Provisional Diagnosis schiz. 90.

(w) schiz.
 Has a Caution Card been issued?

Admission Orders (valid for 24 hours only, over a weekend until next regular working day.)

LPZ 100 mgm q.i.d. (He says he was supposed to do you at home)

Booked by Dr. John

Admitted by T. Smith

Nova Scotia Hospital
CLINICAL RECORD

FRATICO, John

72-034

71-09131

53

PSYCHIATRIC SURVEY November 29, 1971

SITUATION, COMPLAINT & PROBLEM:

This patient was in the Nova Scotia Hospital, Adolescent Program, from 25/8/71 to 25/10/71 with the diagnosis of schizophrenia. He was discharged on Chlorpromazine 200 mg. q.i.d. and referred to a local psychiatrist. He has been doing poorly during the last few days and the family doctor has requested a readmission.

HISTORY OF PRESENT ILLNESS:

It would appear that John has not been taking his medication and not keeping his appointments with Dr. Donovan. He has been having quite a few battles with his mother and it appears that there have also been threats at each other. The situation became rapidly out of control. Mother approached the family doctor who certified him and returned him to the hospital.

PAST HISTORY & FAMILY HISTORY:

This is available in his previous records and will not be repeated.

MENTAL STATUS EXAMINATION:

This shows a very hyperactive, jumpy, jittery male who is walking around rapidly from end to end of the ward. It is difficult to reason with him or carry on an organized conversation with him because he is argumentative and somewhat hostile. He seems to be also putting on quite a dramatic show to impress the staff and the patients. He made statements that he does not need to be in hospital. He uses vulgarities lavishly. He seems to be in good contact with reality. His sensorium appears normal. He shows no disorientation. His thinking seems to be clear. There is no evidence of delusions or hallucinations. He says the main reason why he is in hospital is because of his "mother". He claimed that his mother was calling the police after him. He also admits that he threatened to break the broomstick on her back. He states that his mother has been making similar threats towards him. He says that he has been doing a considerable amount of drinking, mostly rum and wine. He said that the trial of the Indian boy, about which he was worried on his last admission, is over with. The man was apparently sentenced and sent to Dorchester. John himself was a witness at the trial.

DIAGNOSTIC IMPRESSION, INVESTIGATION & TREATMENT PLAN:

This then would appear to be a rather hyperactive and somewhat hostile young man who was previously admitted with a diagnosis

Nova Scotia Hospital
CLINICAL RECORD

PRATICO, John

71-03131

72-03444

Page 2

PSYCHIATRIC SURVEY cont'd....

November 29, 1971

of schizophrenia. He does not appear to be overtly psychotic but more hypomanic at the present time. He needs to be observed further with a large amount of medication. He is accordingly being placed on liquid Largactil 150 mg. q.i.d. If he is unable to function on the open ward S-3, he will be returned to S-4.

[Signature]
P.K. John, M.Sc., F.R.C.P. (C)
M.B.B.S. Senior Psychiatrist.

/30

Nova Scotia Hospital
CLINICAL RECORD

Page 1

72-03449
PRETICO, John L.

71-03131
53

PROGRESS NOTE - NOVEMBER 30, 1971.

This patient arrived as a second admission. He is extremely jumpy, jittery and hyperactive. He is being treated with a large dose of phenothiazines. He is functioning marginally on the adolescent programme at the present time. He does not appear to be psychotic as reported by the family doctor, who referred him.

/s/

Phro
Dr. P.K. John, M.B.B.S., F.R.C.P.(C)
Senior Psychiatrist.

72-0344

Page _____

FRATIGO, John

71-05151

59

JOINT PROGRESS NOTE - FEBRUARY 3, 1972:

There seems to be no reasonable solution in sight for this patient. Community Residence possible? He is on large doses of phenothiazines, Chlorpromazine 300 mgm., q.i.d. and Stelazine, 5 mgm., b.i.d.

/el

K

CLINICAL RECORD

PRATICO, John

#71-03131

Tanna

53

JOINT PROGRESS REPORT:

February 17, 1972

Dr. John's Report: Candidate for community placement.
To be presented at Thursday Conference.

/akh

2

Nova Scotia Hospital
CLINICAL RECORD

Page _____

7203497
PRATICO, John

#71-03131

8207

39

JOINT PROGRESS REPORT

February 24, 1972

Dr. John's Report - Being considered for County
Hospital. Being presented today.

/s/

Ph

Nova Scotia Hospital
CLINICAL RECORD

Page _____

72-63444
PRATICO, John H.

#71-03131

34

JOINT PROGRESS REPORT:

March 2, 1962

Dr. John's Report - Waiting transfer to County
Hospital.

/mth

Ph

72-2344

OCCUPATIONAL THERAPY PROGRESS NOTES

John Pratico
16

54

DATE

Mar. 2/72:

John doesn't attend the department but does have a work placement job he enjoys very much. Before he was on work placement he managed to start at least one argument whenever he came to the department. He constantly asked staff to give or lend him something, or do something for him that he knew we didn't do for the others. He has a habit of forcibly restraining other patients (over nothing), and because of this and his bad language, we are worried about taking him places where he will be with strangers who don't know him and how explosive he can be.

When in the department his concentration and coordination are both so bad that he tries all the time to get others to work for him. He teases the others but the general attitude seems to be that he can do it, but it better not happen to him.

H. Lucas, O.T.A.

72-03444

101

NOVA SCOTIA HOSPITAL
**PRELIMINARY EXAMINATION AND REPORT
BY ADMITTING PHYSICIAN**

(To be made in Physician's own hand-
writing within two hours of admission)
Please answer all questions even when
the answer is in the negative or
appears to be irrelevant in this case.

PRATICO, JOHN L.
29/11/71-03131 DEC. 31/54 HARB
16 R.C. SIM. CERT.
NSI 110-929-841-0) SERVICE
201 BENTINCK ST. SYDNEY N.S.
MRS MARGARET PRATICO MOTHER
SAME ADDRESS
PH. SYD. CITY
#71-02158 F.D. OR A. GAUM

GENERAL PHYSICAL APPEARANCE 63.6
HEIGHT: 165.1 WEIGHT: 165.1 COLOR OF EYES: Brown
COLOR AND CONDITION OF HAIR: D. Brown

Rate and quality of pulse: Regular 70 110/70
If B.P. appears abnormal check by instrument:
CONDITION OF SKIN: (Marks, bruises, scars, bedsores, erythema,
eruptions, infections, subcutaneous edema, etc.)

Dirty
R.I.T. clear

CONDITION OF SKELETAL SYSTEM: (Deformities, dislocations, fractures, etc.)
Normal

EXAMINATION OF ABDOMEN: (Distension, hernia, impactions of the bowel, etc.)
Normal

DISTENSION OF THE BLADDER (Especially important in confused and catatonic
states):
None

OTHER ABNORMALITIES NOTED OR EXAMINATIONS CONSIDERED NECESSARY
Functional Abnormal Psychology

72-63444

BRIEF SURVEY ON MENTAL STATUS

ATTITUDE AND CO-OPERATION (Very important)

Quick. Co-operative.

ORIENTATION AND MEMORY

Good

DELUSIONS, HALLUCINATIONS, HOMICIDAL OR SUICIDAL IDEAS NOTED

None.

ANY UNUSUAL BEHAVIOR NOTED

REMARKS OR RECOMMENDATIONS FOR ATTENDING PHYSICIAN

See admit form

DATE 29/11/71 TIME 1100 SIGNED T. S. [Signature]

72-03444

#32

PHYSICAL EXAMINATION

DATE:

CO-OPERATION

Adoptive

71-03131

John Prater

COMPLAINTS

Nothing particularly
Physically

PREVIOUS HISTORY:

Remission (e)
Psychiatric admission in the past.

GENERAL APPEARANCE

In no acute distress

HEIGHT:

WEIGHT:

Identification Marks or Scars:

Rth - scar.

Skin: N-

Mucous Membranes: Clear

HEAD AND NECK: Supple

Hair: N

Eyes: Vision seems adequate

Nose: no obstruction

Ears: Hearing good

Mouth & Tongue: not coated

Throat & Tonsils: not inflamed

Teeth: Unremovable

Thyroid: not palpable

LYMPHATIC SYSTEM:

no lymphadenopathy

Neck:

Axilla:

Groin:

BREASTS:

RESPIRATORY SYSTEM: Clear to Ippa.

CIRCULATORY SYSTEM:

Pulse: 80 / min - Regular

Capillary Refill: 1/2 sec

Heart: R2 & R

Arteries: Soft

No Significant Abnormal

7-11-61

72-03444

32 (continued)

NEUROLOGICAL EXAMINATION

WOLFEHIMBERG SA 1958

Gait: N
Station: N
Speech: N
Invol. Movements: None

(xx - Normal; x - Hypoactive
xxx - Hyperactive; 0 - Absent)

RIGHT LEFT

Biceps	xx	xx
Triceps	x	x
Knees	xx	xx
Ankles	x	x
Abdomen	x	x
Crem.	x	x
Plantar	flexor	flexor
Hoffman	Negative	Negative

Co-ordination: Good
Pupils: E R/LA
Fundi: Just disc
Other Cranial Nerves: in test
Motor: Power and tone N
Sensory: intact

ABDOMINAL EXAMINATION: no masses palpable

RECTAL EXAMINATION: no masses

G.U. EXAMINATION: N

VAGINAL EXAMINATION:

BACK AND EXTREMITIES: unremarkable

SUMMARY:

Young healthy, very tense boy with mouth breathing. Probably a highly psychotic in nature. Physical Examination is unremarkable.

Examiner

Dr. T. A. W.

MEDICAL PROGRESS NOTES

1

Ward 33

72-03444

PRATICO, JOHN L.
29/11/71-03131 DEC. 31/54 WARD
16 R.C. 81N. CERY.
MS1 110-929-841-01 SERVICE
201 BENTINCK ST. SYDNEY N.S.
MRS MARGARET PRATICO MOTHER
SAME ADDRESS
PH. 871-02158 SYD. CITY
F.D. DR A. GAUM

Nov 28 - *Handwritten notes*
Developed vertebral *fractures*. Probably
due to *osteoporosis*.

June

72-03444

704

LAB. ORDER

WL 5-3.....

No. 03131..... Name of Patient *Castro, John*.....

Hb 15.3 gm% 10.3 %

PCV 45 % SED. RATE (W.L.) m.m. in 1 hr.

WBC 4,700 per cu. m. m.

DIFFERENTIAL:

NEUTROPHILS	%	LYMPHOCYTES	%
BANDS	%	MONOCYTES	%
JUVENILES	%	EOSINOPHILS	%
MYELOCYTES	%	BASOPHILS	%

MICROSCOPIC ASSESSMENT: (Indicated by appropriate check or by 1+ to 4+)

1. RED CELLS:

NO. — ; MICRO — ; MACRO —

POKES — ; ANISO —

Hb content; NORMAL — ; HYPOCHROMIC —

VARIATION — ; DISTORTION —

POIKYLOCYTES — ; KERYTOKYTOSES —

2. WHITE CELLS:

NO. — ; DIFF. — ;

CHANGES —

L.G.S.
MICROSCOPIC

DATE *Oct 11/71*

LAB. NO. 1

72-0344f

PRATICO, JOHN L.
29/11/71-03131 DEC. 31/54 WARD
16 R.C. SIM. CERT.
MSI 110-929-841-01 SERVICE
201 BENTINCK ST. SYDNEY N.S.
MRS MARGARET PRATICO MOTHER
SAME ADDRESS
PH. SYD. CITY
471-02158 F.D. DR A. GAUM

NOVA SCOTIA HOSPITAL
DOCTOR'S ORDER SHEET

WARD: 53
DATE: Nov 29/71

29/11/71 EPZ 100 mgm q.i.d.
J. Steele

- ① Liquid CPZ 150mg QID
- ② Cogentin 1mg Bid
- ③ Dalmane 200mg HS -
Photo

Dec 5/71 - Promazine 75mg IM PRN
cancel DR. Steele / J. Wansley R.N.

Dec 5/71 - Chlorprom 250mg. conc. q.i.d.
Cogentin 1mg t.i.d.
Chlorprom 100mg. I.M. q 4h PRN.
DR. Steele / J. Wansley R.N.

Jan. 10/72
Increase chlorprom to 300mg QID.
DR. Steele / J. Wansley R.N.

Jan 12/72 Increase Cogentin to 2mg tid
DR. Steele / J. Wansley R.N.

Jan 12/72
Stelazine 50mg BID.

Jan. 4 - Promazine 1120 TID
DR. Steele / J. Wansley R.N.

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NOVA SCOTIA HOSPITAL

DOCTOR'S ORDER SHEET

WARD: 53

DATE: Jan 9/72

72-03444

PRATICO, JOHN L.
 29/11/71-05131 DEC. 31/54 WARD
 16 R.C. SIN. CERT.
 NSI 110-929-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS.
 PH. SYD. CITY
 W71-02158 F.D. DR A. GAUM

Feb 9 - Benadryl 25mg TID BY 3 days *Dr. Jones*

Feb-14 -

- 1) Benadryl 50mg TID x 3 days.
- 2) Phenargen. Cream to apply - BID
- 3) Contact Dr. John D. Chouquet from CP2 to our drug
- 4) CBC, Platelet

Feb. 14/72 Discontinue CPZ. *Dr. Jones*
 Start Thellaril 150mg q.i.d.
Dr. John J. Carroll

Feb. 15/72 sed to 5-4 for a few hrs.
 give sed. Anxol q 7 1/2 stat. *Dr. John J. Carroll*

Feb. 16/72. 1 meclizil 200 mg q.d.
Dr. John J. Carroll

Feb 18/72 Xray (L) hand & wrist if deemed necessary
L. Higgins

Feb 21/72 - Trans. to S4 full time.
Dr. John J. Carroll

72-03444

NOVA SCOTIA HOSPITAL

79 DOCTOR'S ORDER SHEET

WARD: 54

DATE: Feb 21/72

PRATICO, JOHN L.
 29/11/71-03131 DEC. 31/54 WARD
 16 R.C. SIN. CERT.
 MS1 110-929-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 PH. SYD. CITY
 #71-02158 F.D. DR A. GAUM

Feb. 21/1972.

Start 230 mg. i-ii q 4h ~~per os~~ *per os*

Feb 21/72

1hr pulse daily. *add*

February 22

1) ~~Hydral~~ Chlorprom. *add*
 2) Benadryl 50 mgm TID x 3 days *in p.m.*

Feb 24/72

Sed Amytal gr 7 1/2 q 4h p.c. Dr John / J. Skinner

Feb 25/72

Benedryl 50mg TID x 2 more days
 Continue mellaril 200mg BID
 and Stelazine 5mg b.i.d.

2 March 72

Mellaril 150 mg. q.i.d. P.O. to John / Skinner

March 10/72

Thioridazine 200 mg. b.i.d. Dr John / Skinner

16-3-72

Trans. to 31 P. Hickey / Dr John

March 20/72

Transferred to 24 Dr John / J. Skinner

March 29/72

Discharged. *Dr John / J. Skinner*

72-03444

PRATICO, JOHN L.
 29/11/71-03181 DEC. 31/54 WARD
 16 R.C. SIN. CERT.
 MS1 110-929-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 PH. SYD. CITY
 #71-02158 F.D. DR A. GAUM

Nov. 21/71 Cert. readmission of a 16 yr. old
 white male a voluntary to the ward &
 diagnosis in previous schizophrenic. States
 he was railroaded into the hospital.
 Says he did not keep his aftercare
 appointments and stopped taking his
 medications about two weeks after
 discharge. Says also that he has been
 drinking and getting into many fights,
 also that he had had arguments
 and fights with his mother. Says he
 is not suspicious or sick. Appetite
 has been good. Appears dehydrated
 but very cheerful and content to be
 back. TPR-36^c-70-20 B/P-11/70

J. Carroll L.D.

Nov. 30/71 2400-0800 hrs This patient slept until 4:00
 @ 0400 hrs complaining of a sore throat. A Red cross

#17

PSYCHIATRIC NURSING NOTES

Page No. 2

72-03444

PRATICO, JOHN L.
29/11/71-03131 DEC. 31/54 WARD
16 R.C. SIN. CERT.
MSI 110-929-841-01 SERVICE
201 BENTINCK ST. SYDNEY N.S.
MRS MARGARET PRATICO MOTHER
SAME ADDRESS
PH. SYD. CITY
#71-02158 F.O. DR A. GAUM

Dec 12/71

Patient remains active & somewhat noisy the first two days. Some periods of inactivity. Talking to himself. quite helpful about ward at times argues great deal with fellows etc on ward. Expressing paranoid feelings towards other pts gets increasingly hostile at interviews. *J. J. J.*

Jan 9/72

Patient becomes quite upset whenever something happens on ward. Quite often uses vulgar language. Patient is always willing to assist in ward routine.

V. Jellus P.N.O.

Jan 16/72

Patient's visitor become sick and could not take him out on pass. Patient becomes very upset and threatened to elope. Left ward and had to be brought back. Told that all the staff are trying to (bribe) him. Chlorpromazine increased 300mg. a.i.d.

Jan. 18/72

V. Jellus P.N.O.

From 45 to 54 for few hrs. due to upset.

V. Jellus

PRATICO, JOHN L.
 29/11/71-03131 DEC. 31/54 WARD
 16 R.C. SIM. CERT.
 MS1 110-929-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 PH. SYD. CITY
 #71-02158 F.O. DR A. GAUM

Jan. 21/72

Patient seemed to have settled down during remainder of the week. Showing signs of paranoia (stating that other patients are talking and laughing at him.) Remains in work placement. Complains of sore chest. Doing on week-end pass on Saturday. Poor appetite.

V. Collins P.N.O.

Feb. 3/72

John's behaviour has been unpredictable for the past couple of weeks. One of his biggest disappointments was the failure of his "possible father phantasy". John was very upset for a couple of days because of this. Several incidents happened afterwards when a few of the younger patients teased John behind his back, and the staff members' attitude towards him. Also on a few occasions the staff put eggs in his beds which to John was very "uncomfortable & sticky". Lately John's behaviour has been erratic unless he is provoked by fellow patients. Ward duties are done extremely well. Appetite good.

PSYCHIATRIC NURSING NOTES

Page No. 4

72-03444

PRATICO, JOHN L.
29/11/71-03131 DEC. 31/54 WARD
16 R.C. 51N. CERT.
NSI 110-929-841-01 SERVICE
201 BENTINCK ST. SYDNEY N.S.
MRS MARGARET PRATICO MOTHER
SAME ADDRESS
PH. SYD. CITY
#71-02158 F.O. DR. A. GAUM

Hygiene needs to be under supervision.
Under the care.

Feb. 13/72

John ^{remains to} ~~is~~ given the picture of a
jumpy, jittery, hyperactive male. Around the
first part of the week, John became quite
upset & hostile. Apparently (two fellow pts (female)
were tormenting John by placing an object
on his bed & then trying to kick it off while
John was sitting. This incident was brought up
at the regular nursing meeting & John became
explosive. First he was going to pick up
a chair & throw it at one of the culpits, who was
involved, but on second thought John put the
chair down, went over to Linda, one of the two,
grabbed her and gave her a whole lot of slaps
etc. John this has proven well, because
he had it been locked by nurse since
apologies were received by both parties and
according to John this the best of friends now.
Seen by medical Dr. this week because
of what was in his body. Signs of allergy unknown.
A patient's hygiene fair.

PRATICO, JOHN L. 72-03444
 29/11/71-03131 DEC. 31/54 VARD
 16 R.C. SIN. CERT.
 NSI 110-929-841-01 SERVICE
 301 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 PH. SYD. CITY
 #71-02150 P.D. DR A. GAUM

(Cont)

... and active movement. Co-operative to staff. The language has been reduced to a certain extent.

Adverse D-type CRA

Feb. 15/72. Pt. became extremely hostile at group therapy. Threatening Dr. Dubinsky. Violent behavior. Restricted by male staff. Dr. John notified. Orders to be sent to S-7 for a few hours and give 100mg. Amphetamine 7 1/2 stat. J. Carroll, R.N.

Feb. 18/72.

John sitted down to a certain extent. Remains to be a bit suspicious; always thinking that somebody is against him. Remains to have what we call his "big" mood by Dr. Behavior, in other words, remains the same. Appetite good. wt: 150 lbs

Adverse D-type CRA

PSYCHIATRIC NURSING NOTESPage No. 61

72-8344

PRATICO, JOHN L.
 29/11/71-03131 DEC. 31/54 WARD
 16 R.C. SIN. CERT.
 NSI 110-929-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 PH. SYD. CITY
 871-02158 P.D. DR A. GAHN

Feb 21/72 - Not getting along well as Dr.
 Disobeying rules of the ward at times. Hyperactive
 and elated at times. Inappropriate suspicious
 nature. The nurse says he has been teased in
 constantly. Very explosive when upset over
 little things. Profane language used frequently.
 Personal hygiene poor. Very helpful & hard dutted.
 Read No 54. (Wasnyka)

Feb 24/72 Appears to be restless. Always
 looking for something to do. Copying
 of work on various and large
 hygiene also to be encouraged. (Wasnyka)

Mar 5/72. Appears to be still restless at times
 always looking for something to do. Very
 helpful & hard dutted. Still has to be encouraged
 about personal hygiene. (Wasnyka)

PSYCHIATRIC NURSING UNIT

Page No. 1

PRATICO, J. M. L.
90/11/71-03131 DEC. 31/54 WARD 12
16 R.C. 5th. CERT.
PSI 110-929-041-01 SERVICE
201 BENTINCK ST. SYDNEY N.S.
MRS MARGARET PRATICO MOTHER
SAME ADDRESS
P.M. SYD. CITY
071-02150 F.D. DR A. GAUM

12.3.72 Remains restless. Finds many things to complain about says the staff misunderstands him, they don't like him, and always picking on him. Easily becomes agitated, cursing and using vulgar language. C. M. Kay

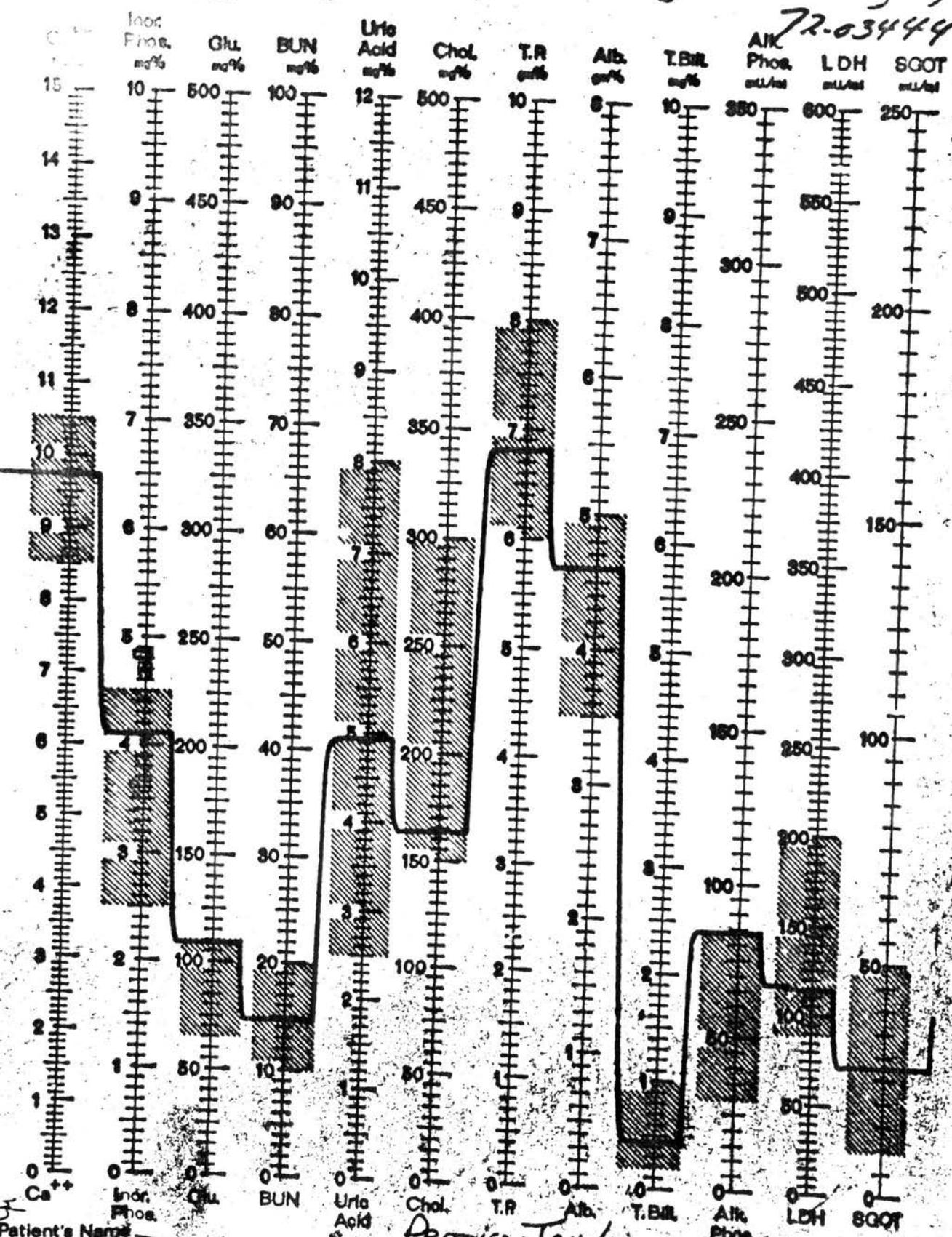
16.3.72. Transfer to 51 C. M. Kay

March 20/72 Transferred to 54
trying to elude from ward

March 26/72 Remains restless. Quite demanding regarding the patient by constantly begging for cigarettes. Likes to do small chores for patients and staff when he can't have his own way. He wants his room and needs sometimes with his vulgar language. It appears he to be encouraged by staff. J. M. L. Pratico

March 29/72
Discharged to CB Hospital & 1000 hrs
D. M. Kay

PART No. 041-348 **5-3**
72-03444



Patient's Name **FRATICO JOHN**
 No **NSH** Rm **S-3** Date **1/2/71**

L-2223

HALIFAX INFIRMARY
DEPARTMENT OF PATHOLOGY
HALIFAX, NOVA SCOTIA

MISCELLANEOUS REPORTS

71-RI 33

Dec 2, 1971

72-03444

Prattice, John

16

Dr. Jones

F S E

Date Dec 2 1971

V.D.R.L. REACTION

Non-Reactive

Reactive

Titre

Jm R.T.

CENTRAL, N.S.

1-20/72

WARD 53

AGE

201 BENTINCK ST. S.E.
MRS MARGARET PRATICCO
SAME ADDRESS
P.M. SYD. CITY
#71-02158 P.O. DR A. GAUM

STAFF
DEPT.

OUT PT.
NO.

AFTER CARE
NO.

DAY CARE
NO.

OTHER
SPECIFY

PHONE NO.

OCCUPATION

EXAMINATION OF

chest PRACTICO

ACCIDENT YES _____ NO _____

PERTINENT HISTORY

Gain in left side of chest
Since am.

REASON FOR EXAMINATION

DR. John J. Agroll
DATE OF EXAM Jan 20/72

PATIENT IS WALKING gm
TECHNICIAN

CHAIR

CARRIAGE

REPORT

PRATICCO, John

71-03131

Jan. 20/72

CHEST - This man is not breathing as deeply as he did before. No evidence of pneumothorax is seen. No pleural changes are demonstrated.
COMMENT: No pathological change is shown.

D.I. Jan. 21/72
D.F. Jan. 24/72

I. M. Nagle
DR. I. M. Nagle
RADIOLOGIST

E-RAY

12-03444

#418 Revised Jan./71

NOVA SCOTIA HOSPITAL
MEDICINE SHEET

PRATICO, JOHN L.
 29/11/71-03151 DEC. 31/54 WARD
 16 R.C. SIM. CERT.
 NSI 110-929-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 PH. SYD. CITY
 071-02150 F.O. DR A. GAUM

DEC.

WARD	DATE 20		DATE 21		DATE 22		DATE 23		DATE 24		DATE 25		DATE 26	
	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.
S-3 Chlorpromazine 250 mg qid	0900	M	0900		0900		0900		0900		0900		0900	
	1300	M	1300		1300		1500		1300		1300		1300	
	1700	SB	1700	SB	1700	SB	1700	M	1700		1700		1700	
	2100	SB	2100	SB	2100	SB	2100	M	2100		2100		2100	
Corgentin 1mg Bid	0900	M	0900		0900		1700	M	1700		0900		1700	
	1700	SB	1700	SB	1700	SB	1700	M	1700		1700		1700	
JAN 29/71 30 31 Jan 1/72 2 3 Jan 4/71 0900 0900 0900 0900 0900 0900 0900 0900 1300 1300 1300 1300 1300 1300 1300 1300 1700 M 1700 SB 1700 SB 2100 M 2100 SB														
Chlorpromazine 250 mg qid	0900		0900		0900		0900		0900		0900		0900	
	1300		1300		1300		1300		1300		1300		1300	
	1700	M	1700	SB										
	2100	M	2100	SB										
Bengtropine 1mg tid	0900		0900		0900		0900		0900		0900		0900	
	1300		1300		1300		1300		1300		1300		1300	
	1700	M	1700	SB										
	JAN 5/72 JAN 6 JAN 7 8 9 10 Jan 12/71													
Chlorpromazine 200mg qid	0900		0900		0900	K	0900	K	0900	K	0900	AM	0900	
	1300		1300		1300	K	1300	K	1300	K	1300	AM	1300	
	1700	SB	1700	SB	1700	SB	1700	M	1700	M	1700	M	1700	M
	2100	SB	2100	SB	2100	SB	2100	M	2100	M	2100	M	2100	M
Bengtropine 1mg tid	0900		0900		0900	K	0900	K	0900	K	0900	AM	0900	
	1300		1300		1300	K	1300	K	1300	K	1300	AM	1300	
	1700	SB	1700	SB	1700	SB	1700	M	1700	M	1700	M	1700	M
	1700 SB 1700 SB 1700 SB 1700 M 1700 M 1700 M 1700 M													

72-03444

418 Revised Jan./72

**NOVA SCOTIA HOSPITAL
MEDICINE SHEET**

PRATICO, JOHN L.
 09/11/71-03181 DEC. 31/50 WARD
 16 R.C. SIN. CERT.
 NSI 110-929-841-01 SERVICE
 201 BENTINCK ST. SYDNEY N.S.
 MRS MARGARET PRATICO MOTHER
 SAME ADDRESS
 P.M. S.V.D. CITY
 071-02158 P.O. DR A. GAUM

JAN

WARD	S-3	DATE		DATE		DATE		DATE		DATE		DATE	
		Nr.	Sig.	Nr.	Sig.	Nr.	Sig.	Nr.	Sig.	Nr.	Sig.	Nr.	Sig.
Chlorpromazine	0900			0900		0900	K	0900	K	0900		0900	
300mg	1300			1300		1300	K	1300	K	1300		1300	
2id	1700	25		1700	25	1700	25	1700	25	1700	25	1700	25
	2100	25		2100	25	2100	25	2100	25	2100	25	2100	25
Rimectopine	0900			0900		0900	K	0900	K	0900		0900	
12mg Tid	1300			1300		1300	K	1300	K	1300		1300	
	1700	25		1700	25	1700	25	1700	25	1700	25	1700	25
Haloperidol	0900			0900		0900	K	0900	K	0900		0900	
5mg Bid	1700	25		1700	25	1700	25	1700	25	1700	25	1700	25
	5AN	19		JAN 20	21		22		23		24		25/72
Meprobamate	0900	50		0900	50	0900	50	0900	50	0900	50	0900	50
300mg 2id	1300	50		1300	50	1300	50	1300	50	1300	50	1300	50
	1700	25		1700	25	1700	25	1700	25	1700	25	1700	25
	2100	25		2100	25	2100	25	2100	25	2100	25	2100	25
Rimectopine	0900	25		0900	25	0900	25	0900	25	0900	25	0900	25
2mg tid	1300	25		1300	25	1300	25	1300	25	1300	25	1300	25
	1700	25		1700	25	1700	25	1700	25	1700	25	1700	25
Haloperidol 5mg	0900	25		0900	25	0900	25	0900	25	0900	25	0900	25
Bid	1700	25		1700	25	1700	25	1700	25	1700	25	1700	25

#418 Revised Jan./71

**NOVA SCOTIA HOSPITAL
MEDICINE SHEET**

72-03444

PRATI JOHN L.
29/11/71-03181 DEC.31/54 WARD
16 P.C. SIM. CERT.
PSI 110-929-841-01 SERVICE
201 BENTINCK ST. SYDNEY N.S.
MRS MARGARET PRATICO MOTHER
SAME ADDRESS
FM. SYD. CITY
71-02158 P.O. DR A. GAUM

Feb.

WARD	DATE		DATE		DATE		DATE		DATE		DATE		DATE	
	16.	17	18	19	20	21	22	23	24	25	26	27	28	29
MEDICATION	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.
Mellairil 200	0900	Am	0900	Am	0900		0900		1900		0900		0900	
mgmc 0.1	1300	Am	1300	Am	1300		1300		1300		1300		1300	
	1700	2.5	1700	2.5	1700	2.5	1700	hds	1700	hds	1700	hds	1700	hds
	2100	2.5	2100	2.5	2100	2.5	2100	hds	2100	hds	2100	hds	2100	hds
Benztropine	0900	Am	0900	Am	0900		0900		0900		0900		0900	
2mg tid	1300	Am	1300	Am	1300		1300		1300		1300		1300	
	1700	2.5	1700	2.5	1700	2.5	1700	hds	1700	hds	1700	hds	1700	hds
Stelazine	0900	Am	0900	Am	0900		0900		0900		0900		0900	
5mg Bid	1300	Am	1300	Am	1300		1700	hds	1700	hds	1700	hds	1700	hds
Benzydol 5mgm qid	0900	Am	0900	Am	0900	23	0900	24	0900	25				
x3 sup	1700	hds	1700	hds	1700	hds	1700	hds	1700	hds				
	2100	hds	2100	hds	2100	hds	2100	hds	2100	hds				
	Feb 23		24		25		26		27		28		29	
Benztropine	0900	Am	0900	Am	0900	Am	0900	Am	0900	Am	0900	Am	0900	Am
2mg tid	1300	Am	1300	Am	1300	Am	1300	Am	1300	Am	1300	Am	1300	Am
	1700	hds	1700	hds	1700	hds	1700	hds	1700	hds	1700	hds	1700	hds
Stelazine	0900	Am	0900	Am	0900	Am	0900	Am	0900	Am	0900	Am	0900	Am
5mg bid	1300	hds	1300	hds	1300	hds	1700	hds	1700	hds	1700	hds	1700	hds
Sod amyl 2 1/2			0900	hds										
2 4h. p.c.			2100	hds										
Mellairil 200mg					0900	Am								
Qid					1300	Am								
					1700	hds								
					2100	hds								

418 Revised Jan./71

**NOVA SCOTIA HOSPITAL
MEDICINE SHEET**

PATIENT JOHN L. ... 72-03444
 9/11/71 ...
 ... SERVICE
 ... SYDNEY N.S.
 ... FATHER
 SAME ADDRESS
 SYD. CITY
 71-02158 F.D. DR. A. GAUM

WARD	DATE 1		DATE 2		DATE 3		DATE 4		DATE 5		DATE 6		DATE 7	
	Hr.	Sig.												
Danzonine 2mg tid	0900	tbl												
	1300	tbl												
	1700	tbl												
Atelazine 5mg bid	0900	tbl												
	1700	tbl												
Mellaril 200mg tid	0900	tbl												
	1300	tbl												
	1700	tbl												
Danzonine 2mg tid	0900	tbl												
	1300	tbl												
	1700	tbl												
Atelazine 5mg bid	0900	tbl												
	1700	tbl												
Mellaril 150mg tid	0900	tbl												
	1300	tbl												
	1700	tbl												

Mar 8 9 10 11 12 13 14

72-63449

PROVINCE OF NOVA SCOTIA
DEPARTMENT OF PUBLIC WELFARE
REHABILITATION SERVICES

DEPT. OF PUBLIC WELFARE
SEP 18 1968
SOCIAL DEVELOPMENT
& REHABILITATION

MEDICAL INFORMATION CONSENT FORM

I hereby authorize the Medical Consultants to the Department of Public Welfare to examine any or all of my medical records.

I also authorize any doctor or hospital who examined or treated me as a patient to release copies of my medical records or reports to the Department of Public Welfare.

It is understood that such records or reports concerning my medical condition will be treated as confidentially as possible and will be used for the purpose of rehabilitation planning determining my eligibility.

John P. Prater
(Signature) *Louis D. Prater*

212 St. Henry Street

(Address)

Mrs. L. Brunette

(Witness)

Date in Hospital *1.8.74*

Name of Hospital, Clinic, or Doctor *M.A. Hospital*

..... *Dr. John*

Date Signed

PLEASE RETURN THIS FORM WITH YOUR APPLICATION FOR REHABILITATION SERVICES.



72-03

NURSING DIVISION
Provincial Building
Prince Street
Sydney, N.S.
December 1, 1971

P. K. John, M.D.
Adolescent Ward
Adolescent Unit
Nova Scotia Hospital
Dartmouth, N.S.

Dear Doctor John:

Re: John Practico
201 Bentinck Street
Sydney, N.S.

On visiting the above patient's residence, which is sub-standard, I learned that his parents are separated and the patient lives with his mother and small sister, age five years. Mrs. Practico appears to be unstable and may tend to be vindictive against John because of past closeness with his father. This closeness apparently ended when his father went to live with another woman, who would not allow John to live with them. This situation was related to me by Family Court case worker, Mr. Stanley Reppa.

John's twin sister lives with Mr. Practico and his common-law wife, out of necessity. John apparently has beaten and threatened her.

Mrs. Practico states that John often sat at the table and cried because of pains in his head and had episodes where he shouted and screamed at her. On one occasion in the past he attempted suicide.

In conclusion, I feel the pressure brought on by an unsatisfactory relationship with his mother plus a recent murder trial, in which John was a key witness, may be more than he could cope with, as he stopped taking his medications and apparently started drinking. This situation may have compounded his frustrations and fears and he threatened his mother's life and was returned to the hospital.

The Family Court case worker, Mr. Stanley Reppa and their family physician, Doctor William Snow, feel that Mrs. Practico is unstable and is unable to give John a home atmosphere which is conducive for

his future mental health. Apparently, Mrs. Practice has refused personal help for herself.

John did attend the Cape Breton Mental Health Clinic and maybe Doctor Donovan can give you more information re John.

Yours sincerely,

Marion Stewart
Marion Stewart, R.N.
Public Health Nurse

MR/MSR
c.c. Miss A. Taylor, R.N.

NOVA SCOTIA HOSPITAL
DARTMOUTH, N.S.
---DISCHARGE REPORT---

72-03444

October 25, 1971

148

NAME: **FRACTON, John**
ADDRESS: **202 Bentinck Street,
Sydney, N.S.**
AGE: **26**
HUSBAND'S NAME: **N/A**

SERVICE **In Patient**
CASE NUMBER: **72-02198**
DATE OF ADMISSION: **August 25, 1971**
DATE OF DISCHARGE: **October 25, 1971**
~~XXXXXXXXXXXX~~ FULL DISCHARGE
STATUS: **VOLUNTARY**

This young man was admitted from the Cape Breton area with a history of anxiety and paranoid ideation, along with occasional hallucinations. He participated well on the Adolescent Program and he was treated with psychotherapy and all other modalities of therapy on the 5-3 Program. He is stabilized well and he has requested a prolonged visit with his mother. This has been granted and it is felt that he should be referred to the Cape Breton Mental Health Centre for further follow-up at this time. Patient is being formally discharged. He should continue on a course of Largactil and Avil, in appropriate dosages considered by the local physician.

SIGNED: *John*
J. L. [unclear], M.D., F.R.C.P.(C),
Senior Psychiatrist.

cc - Dr. A. [unclear], family doctor,
Dr. C. [unclear], Cape Breton Mental Health Centre,
Cape Breton Mental Health Unit.

396

NOVA SCOTIA HOSPITAL

DISCHARGE SHEET

WARD: _____

DATE: _____

ORDERED

72-03444

PRATICO, JOHN L
 28/0/71-02188 DEC. 31/54 WARD
 16 N.C. 310. VOL.
 NSI 110-929-041-01 SERVICE
 201 BENTINCH ST., SYDNEY, N.S.
 MRS MARGARET PRATICO-MOTHER
 SAME ADDRESS
 STONEY CITY
 DR. ABE GAUM

DATE	DISCHARGE DATE:
	TYPE OF DISCHARGE: <u>FULL</u>
	ON TRIAL: _____ NO. OF MONTHS: _____
	Form I. _____
	Form II. _____
	DIAGNOSIS: <i>acute tuberculous reaction Adolescent</i> <i>schiz</i>
	TREATMENT HAS BEEN: <i>Chlorpromazine 200 mg qid</i> <i>Ss program</i>
	RECOMMENDATIONS:
	1. Medication
	2. Discharged in care of - <i>Family</i>
	3. Aftercare: <i>Local MHC</i>

SIGNED: _____

[Signature]

72-03444

#382

NOVA SCOTIA HOSPITAL

Authorisation for Medical and/or Surgical Treatment

I hereby authorize the physician or physicians in charge of John Pratico (Patient's Name) to administer any treatment or to administer such anaesthetic or to perform such operations as may be deemed necessary or advisable in the diagnosis and treatment of this patient.

DATE: Aug. 25, 1971 SIGNED: _____ (Patient)

WITNESS: A. McDow OR: X Mrs M. Pratico (Nearest Relative)

RELATIONSHIP TO PATIENT: Mother

Both authorisations must be signed by the patient, or by the nearest relative in the case of a minor, or when patient is mentally incompetent.

Authorisation for Release of Information

Authorisation is hereby granted to release to my family doctor and/or appropriate agencies such information as may be deemed necessary, subject to the discretion of the Responsible Medical Officer.

DATE: Aug. 25, 1971 SIGNED: _____ (Patient)

OR: X Mrs M. Pratico (Nearest Relative)

RELATIONSHIP TO PATIENT: _____

NOVA SCOTIA HOSPITAL
ADMISSION FORM

72-03444

(53)

Escort: Mrs. Margaret Pratico - Mother

Time of Admission: 1030 hrs.

First Admission (X)

Re-Admission ()

Ret. from Trial ()

Family Physician: Dr. Abe Gawn

Referring Physician: Same

Dentures: Upper (), Lower (), Partial (), Glasses (), Hearing Aid ()

PRATICO, JOHN L
25/8/71-07158 DEC. 31/54 WARD
16 P.C. SIN. VOL.
MSI 110-929-841-01 SERVICE
201 BENTINCK ST., SYDNEY, N.S.
MRS MARGARET PRATICO-MOTHER
SAME ADDRESS
DR. ABE GAWN STONEY CITY

Clinical Condition (including H.P.I., Drug and food allergies)

16 year old who has come from a broken home and his mother took custody of him in March 71. He has been a behaviour problem (slamming doors, Threatening mother, temper tantrums). She had to take him to family court 3 months ago and he was placed on her bond. He tends to fly off the handle for no reason.

He was witness to a murder (manslaughter) in May 1971 which made his behaviour worse. Last Monday he locked her bedroom door and she had to call the police to get him to open it.

P.P.H. Inguinal Hernia repair. Insect bite.

Provisional Diagnosis: F.H. Gawn was here. Mother had diabetes. Behaviour disorder.

Has a Caution Card been issued?

Admission Orders (valid for 24 hours only, over a weekend until next regular working day.)

Sleeping draught h.o. p.m.

M.A. The father & mother separated in 1966 - the father took the boy. The boy left his father this last March following a beating. He took an overdose of pills a month ago.

Admitted by: J. Smith



DARTMOUTH, N. S.

I, the undersigned, make application for admission to the Nova Scotia Hospital as a Voluntary Patient. I agree to abide by the rules and regulations of the Institution.

I also agree to give the Medical Officer in charge three days notice in writing of my desire or intention to leave the Hospital.

Mrs Margaret Pratico

SIGNED... *Mr. John L. Pratico*

WITNESS... *A. Newell*.....

DATE... *Aug. 25/71*.....

NOVA SCOTIA HOSPITAL INSURANCE COMMISSION PSYCHIATRIC ADMISSION

72-03444



NAME OF HOSPITAL N.S. Hospital		ADM. NO. -02158	DATE OF ADMISSION DAY 25 MO. 8 YEAR 71	WARD 8	RESPONSIBILITY N.S.H.I.C.
SURNAME PRATICO, John Louis			MARRIAGE NO. 110-929-841-01		SOCIAL INSURANCE NO.
RESIDENTIAL ADDRESS 201 Bentinck St., Sydney, N.S.			CITY/TOWNSHIP Sydney City		COUNTRY OF BIRTH Canada
SEX M	DATE OF BIRTH DAY 31 MO. 12 YEAR 54	AGE 16	PATIENT A TRINITY Y	MARITAL STATUS Single	EDUCATION Gr. 7
MOTHER'S NAME Mrs. Margaret Pratico		RELATIONSHIP Same	RELIGION R.C.		
DOCTOR/AGENCY Dr. Abe Gaum - Fam. Dr.			REFERRED BY DOCTOR/AGENCY Mother		

COL. 49 METHOD OF ADMISSION COL. 50-51	<input type="checkbox"/> INFORMAL <input checked="" type="checkbox"/> VOLUNTARY <input type="checkbox"/> CERTIFIED <input type="checkbox"/> WARRANT <input type="checkbox"/> OTHER - COURT				
	ADMITTED FROM		<input type="checkbox"/> NOVA SCOTIA HOSPITAL <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> MUNICIPAL MENTAL HOSPITAL <input type="checkbox"/> FOSTER HOME <input type="checkbox"/> GENERAL HOSPITAL <input type="checkbox"/> WELFARE INSTITUTIONS <input type="checkbox"/> OUT-OF-PROVINCE HOSPITAL <input type="checkbox"/> PRIVATE INSTITUTIONS		

COL. 52-53 OCCUPATION OF PATIENT	IF PATIENT IS STUDENT OR HOUSEWIFE, COMPLETE FOR HEAD OF FAMILY				
	<input type="checkbox"/> MANAGERIAL - PROFESSIONAL <input type="checkbox"/> CLERICAL - SALES <input type="checkbox"/> SERVICE - RECREATION <input type="checkbox"/> TRANSPORT - COMMUNICATION		<input type="checkbox"/> FARMER <input type="checkbox"/> LUMBERMAN <input type="checkbox"/> FISHERMAN <input type="checkbox"/> MINER		<input type="checkbox"/> CRAFTSMAN - PRODUCTION WORKER <input type="checkbox"/> LABOURER - OTHER <input type="checkbox"/> NONE <input type="checkbox"/> UNKNOWN

COL. 54 EMPLOYMENT STATUS OF PATIENT	<input type="checkbox"/> SELF-EMPLOYED <input type="checkbox"/> OTHER EMPLOYED <input checked="" type="checkbox"/> UNEMPLOYED		<input type="checkbox"/> NEVER EMPLOYED <input type="checkbox"/> PRE-SCHOOL <input type="checkbox"/> STUDENT		<input type="checkbox"/> HOUSEWIFE <input type="checkbox"/> UNKNOWN
---	---	--	--	--	--

COL. 55-59 PSYCHIATRIC HISTORY	52-57 PREVIOUS TREATMENT (UP TO 3 ITEMS MAY BE CHECKED)				
	<input type="checkbox"/> MENTAL HOSPITAL <input type="checkbox"/> GEN. HOSP. - PSYCHIATRIC UNIT		<input type="checkbox"/> MENTAL HEALTH CLINIC <input checked="" type="checkbox"/> PRIVATE PSYCHIATRIST		<input type="checkbox"/> NONE <input type="checkbox"/> UNKNOWN

COL. 60-64 PREVIOUS ADMISSIONS	LAST EPISODE		ADMISSION DATE		FACILITY OR DOCTOR	
	Winter 1970 Dr. Binnie		Winter 1970		Dr. Binnie	

COL. 65-69 PSYCHIATRIC DISORDERS	TO ANY PSYCHIATRIC FACILITY				
	<input checked="" type="checkbox"/> NONE <input type="checkbox"/> ONE <input type="checkbox"/> MORE THAN ONE <input type="checkbox"/> UNKNOWN				
COL. 70-74 PSYCHIATRIC DISORDERS	TO THIS HOSPITAL				
	<input type="checkbox"/> NONE <input type="checkbox"/> ONE <input type="checkbox"/> MORE THAN ONE <input type="checkbox"/> UNKNOWN				

COL. 61-67 AREA AND DEGREE OF IMPAIRMENT	PSYCHIATRIC DISORDERS	1 2 3 4			
		NONE	MILD	MODERATE	SEVERE
61	INTRAPSYCHIC FUNCTION			X	
62	BEHAVIOR			X	
63	SOCIAL RELATIONS			X	
64	SCHOOL PERFORMANCE			X	
65	WORK PERFORMANCE			X	
66	PHYSICAL FUNCTION	✓			
67	INTELLECTUAL DEVELOPMENT	✓			

COL. 68-71 DIAGNOSIS	Schizophrenia				
COL. 72-79 OTHER SIGNIFICANT CONDITIONS					

COPY NO. 295.9

NAME OF HOSPITAL		2-3		4-6		7-9		10-12	
N.S. Hospital		00000		DAY	MONTH	YEAR	SURNAME		
				25	Aug.	1971	PRATICO, John L.		

COL. 23-30 TREATMENT SERVICES	CHECK ALL APPLICABLE ITEMS		
1 <input type="checkbox"/> INVESTIGATION ONLY	4 <input checked="" type="checkbox"/> FAMILY THERAPY	7 <input type="checkbox"/> E.C.T.	
2 <input checked="" type="checkbox"/> INDIVIDUAL THERAPY	5 <input checked="" type="checkbox"/> BEHAVIOR THERAPY	8 <input type="checkbox"/> SUBCUTAN INSULIN	
3 <input checked="" type="checkbox"/> GROUP THERAPY	6 <input checked="" type="checkbox"/> CHEMOTHERAPY	9 <input type="checkbox"/> OTHER _____ SPECIFY	

COL. 31 CONDITION ON SEPARATION	1 <input checked="" type="checkbox"/> IMPROVED	3 <input type="checkbox"/> UNDETERMINED
	2 <input type="checkbox"/> UNIMPROVED	4 <input type="checkbox"/> DIED

COL. 32-33 SEPARATED IN:	INSTITUTION	COMMUNITY
	1 <input type="checkbox"/> NOVA SCOTIA HOSPITAL	10 <input checked="" type="checkbox"/> PRIVATE PSYCHIATRIST
	2 <input type="checkbox"/> MUNICIPAL MENTAL HOSPITAL	11 <input type="checkbox"/> PSYCHIATRIC-OUTPATIENT
	3 <input type="checkbox"/> GENERAL HOSPITAL	12 <input type="checkbox"/> PUBLIC HEALTH
	4 <input type="checkbox"/> OUT-OF-PROVINCE HOSPITAL	13 <input type="checkbox"/> OTHER MEDICAL
	5 <input type="checkbox"/> FOSTER HOME	14 <input type="checkbox"/> NON-MEDICAL
	6 <input type="checkbox"/> WELFARE INSTITUTION	15 <input type="checkbox"/> SELF CARE
	7 <input type="checkbox"/> PRIVATE INSTITUTION	
	8 <input type="checkbox"/> PENAL INSTITUTION	
	9 <input type="checkbox"/> OTHER INSTITUTION (SPECIFY)	
		16 <input type="checkbox"/> DIED
		17 <input type="checkbox"/> UNKNOWN

COL. 34 NATURE OF SEPARATION	1 <input checked="" type="checkbox"/> ON MEDICAL ADVICE	2 <input type="checkbox"/> AGAINST MEDICAL ADVICE	3 <input type="checkbox"/> DEATH
--	---	---	----------------------------------

COL. 35-38 FINAL DIAGNOSIS	Acute Adolescent situational reaction.	CODE NO. 307X
--------------------------------------	--	------------------

COL. 39-46 OTHER SIGNIFICANT CONDITIONS	Schizophrenia.	295.9
---	----------------	-------

COL. 47-50 CAUSE OF DEATH		CODE NO.	COL. 51 <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------------------------	--	----------	---

COL. 52-57 DATE OF SEPARATION	DAY: 25	MONTH: October	YEAR: 1971	58-62 TOTAL DAYS 61
---	---------	----------------	------------	------------------------

ACCOUNTING RECORD				
COL. 63-74 NON-MEDIC RESPONSIBILITY	RESPONSIBILITY OF:	TOTAL DAYS	RATE	AMOUNT
1				
2				
3				
	TOTAL	61	04-57	00-74

PSYCHIATRIC SURVEY - AUGUST 31, 1971:

SITUATION, COMPLAINT & PROBLEM:

This 16 year old boy was admitted from Sydney as a voluntary patient on a referral from Dr. Gaum. Information was meagre. However, the situation was clarified by an interview with John and his mother. It would appear that this boy was nervous and high strung for several months prior to his arrival here. He was looked after by a local psychiatrist in Sydney Mental Health Centre. He was treated essentially with medication. More recently the situation became unmanageable and the family approached Dr. Gaum who referred him here. However, I note that no previous arrangement was made for his admission and he came as a surprise to us when the family arrived here.

HISTORY OF PRESENT ILLNESS:

The boy comes from a very disturbed family. Parents have been split up. Mother has a serious drinking problem. Father has been known to be violent towards his wife and children. He is living or going with another woman now. John is one of a pair of twins. The other one is a girl. She lives with her father now. John has a great deal of difficulty getting along with this twin sister. He also gets into quite difficult situations with his own mother. Mother claims that John has been violent physically at times towards her but he states that this is because of her drinking and inability to keep the house and inability to provide meals.

PAST HISTORY & FAMILY HISTORY:

The father left about 5 years ago. There were repeated arguments between the parents. The twin girl lives with the father in Whitney and there is a young child in the family who John claims is from another man with whom his mother was going.

MENTAL STATUS EXAMINATION:

This shows a very anxious, jumpy, jittery 16 year old boy. He seems to be quite frightened and scared and quite happy to be in the hospital. He stated that on top of all his problems he has got himself into a tight spot by witnessing a murder in the park not too long ago. He is one of the only 2 witnesses in this murder trial and there have been some threats on his life. This has not made matters easy for him. He has also stated that there are some racial overtones in this murder trial because the boy who was murdered was a negro lad and the murderer (alleged) was an Indian boy. It seems that the whole Indian Tribe in the local area considers him as an enemy and

PRATICO, John L.

71-02158

would like to liquidate him. John, in addition, seems to have had hallucinatory experiences. He hears voices and he sees flashes of light. He denies a history of drug abuse. There is no other overt dysfunction of thinking or thought processes other than hallucinations. Whether he is somewhat paranoid about his fears of his own life is not quite clear at the present time. Judgement and reality testing are impaired at an operational level.

DIAGNOSTIC IMPRESSION, INVESTIGATION & TREATMENT PLAN:

This would appear to be a 16 year old boy who seems to have some kind of an acute situational reaction. However, the presence of vague bizarre symptoms for a number of months, the presence of hallucinations, and the possibility of paranoid ideation, also points the finger towards a diagnosis of adolescent schizophrenia. Diagnosis will be clarified by further observation on S-3. In the meantime he will take part in all treatment on this ward and he will also be treated with a heavy dose of phenothiazines.

/el

P. K. John
P. K. John, M.B.B.S., M.Sc.,
F.R.C.P. (C)
Senior Psychiatrist.

New Scotia Hospital
CLINICAL RECORD

Page _____

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72-03444
FRATICO, John L.
71-02158

PROGRESS NOTE

SEPT. /71

This boy has stabilized remarkably well on medication. He is participating very well in group programs, and he can be discharged except for the strain in his home situation. The possibility of placing him in a group home will be explored with the help of a social worker.

/sh

John L. Fratico
P. K. John, M.D.

72-03444

No. 71-02158

FRATICO, John

Worker: (Mrs.) W.N. Milne, M.S.W.

Social Service Note, September 23, 1971:

This young man has improved considerably since coming to hospital. He has settled down to the point where we can now consider making some discharge plan for him. Accordingly, we arranged to send him on a two week pass home.

John became anxious, nervous and irritable, and finally decided he was not ready to try a pass home as yet. We have had several contacts with Mrs. Fratico and it appears that she is not prepared to consider the possibility of placement of this boy outside the home. She is receiving financial assistance from her husband on behalf of John and is somewhat concerned that her financial circumstances will change if John were removed from the home.

John, himself, appears not to be able to cope very well with the pressures of home, but, when confronted by his mother, relented and agreed to stay with her. However, as mentioned, when he was offered a two week pass home, he decided that he couldn't cope and elected to remain in hospital.

Mrs. Fratico is quite depressed, anxious, and quick to react to John's moods. In short, I think we have a cause-effect type of relationship here which probably will not make for a good adjustment for the patient if he returns home.

Moreover, the impending pressures of the Court Hearing (scheduled for sometime in October) seem to be causing John some increasing anxiety. I have discussed this case with Peter MacDonald of the Family Court in Sydney (telephone 539-4070) and he is to investigate the possibility of firming up some discharge plan for John back into the community. He will advise us what supportive community resources are available there if John should return home. He is to contact Doctor John regarding this situation.

*J. Power
for Mrs. Milne*

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PRATICO, JOHN L. 72-03444
25/8/71-02158 DEC. 31/54 WARD
16 R.C. SIM. VOL.
MSI 110-929-841-01 SERVICE
201 BENTINCK ST., SYDNEY, N.S.W.
MRS MARGARET PRATICO-MOTHER
SAME ADDRESS
SYDNEY CITY
DR. ABE GAUM

NOVA SCOTIA HOSPITAL
PRELIMINARY EXAMINATION AND REPORT
BY ADMITTING PHYSICIAN

(To be made in Physician's own hand-writing within two hours of admission)
Please answer all questions even when the answer is in the negative or appears to be irrelevant in this case.

GENERAL PHYSICAL APPEARANCE *Healthy*

HEIGHT: 168.1 WEIGHT: 61.7 COLOR OF EYES: Brown

COLOR AND CONDITION OF HAIR: D. Brown

Rate and quality of pulse: Regular 80

If B.P. appears abnormal check by instrument:

CONDITION OF SKIN: (Marks, bruises, scars, bedsores, erythema, eruptions, infections, subcutaneous edema, etc.)

Normal

CONDITION OF SKELETAL SYSTEM: (Deformities, dislocations, fractures, etc.)

Normal

EXAMINATION OF ABDOMEN: (Distension, hernia, impactions of the bowel, etc.)

Normal

DISTENSION OF THE BLADDER (Especially important in confused and catatonic states):

OTHER ABNORMALITIES NOTED OR EXAMINATIONS CONSIDERED NECESSARY

p.t.o.

72-03444

BRW 28113.030 82150-110125
JOY .MIS .S. 3 81
331V822 10-100-400000 824
2.4.13072.12 40111 105
82104-031789 100000 244

BRIEF SURVEY OF MENTAL STATUS

ATTITUDE AND CO-OPERATION (Very important)

Good. Co-operative.

ORIENTATION AND MEMORY

O.K.

DELUSIONS, HALLUCINATIONS, HOMICIDAL OR SUICIDAL IDEAS NOTED

ANY UNUSUAL BEHAVIOR NOTED

REMARKS OR RECOMMENDATIONS FOR ATTENDING PHYSICIAN

See admit form

DATE 25/8/71

TIME 10.50

SIGNED T. J. ...

72-03444

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PHYSICAL EXAMINATION

DATE: Sept 18/71

CO-OPERATION

Good

John Paterno

COMPLAINTS

Bad knees

First admission Swell of Rt foot at times, None at present

PREVIOUS HISTORY:

Rt. ing. hernia repair - 1 month a year & half ago. Fr. H. clavicle

GENERAL APPEARANCE

Well nourished boy

HEIGHT: 165.1 cms. WEIGHT: 47.7 kg

Identification Marks or Scars:

Skin: Normal

Mucous Membranes: normal

HEAD AND NECK:

Hair: Brown

Eyes: Brown. Vision 2/10 with the weaker eye

Ears: Normal

Ears: hearing good

Mouth & Tongue: no ST - clear

Throat & Tonsils: normal

Teeth: good condition

Thyroid: NOT enlarged

LYMPHATIC SYSTEM:

Neck: 0

Arilla: 0

Cervix: 0

PLEURAE: NAD on palpation

RESPIRATORY SYSTEM: NAD

CIRCULATORY SYSTEM: J.V prot 11

Pulse: S/pulse regular RR: 110/78

Heart: Arteries: adequate flow

Not enlarged no murmur

72-03444

32 (continued)

NEUROLOGICAL EXAMINATION

WOTTAMINAXE JACOBINA PAGE 2

Gait: Normal

Station: Good

Speech: good

Invol. Movements: None

Co-ordination: good (F.N. Test)

Pupils: Round equal reactive

Fundi: clear

Other Cranial Nerves: intact

Motor: } intact
Sensory: }

(xx - Normal; x - Hypoactive; xxx - Hyperactive; 0 - Absent)

RIGHT LEFT

	RIGHT	LEFT
Biceps	xx	xx
Triceps	xx	xx
Knees	xx	xx
Ankles	xx	xx
Abdomen	xx	xx
Crem.		
Plantar	flexion	flexion
Hoffman	-	-

ABDOMINAL EXAMINATION: No mass. No Tenderness.

RECTAL EXAMINATION: Defecated.

G.U. EXAMINATION: Normal

VAGINAL EXAMINATION:

BACK AND EXTREMITIES: No deformities

SUMMARY: 16 yrs old well nourished boy
physical examination essentially negative

Examiner: Dr. [Signature]

For refractive to Dr. H.L.

137

MEDICAL
CONSULTATION

53

TO Dr. Had.
DATE Sept 10/71
WARD 93

72-03444
PRATICO, JOHN L
25/8/71-02158 DEC.31/54 WARD
16 R.C. SIN. VOL.
MSI 110-929-841-01 SERVICE
201 BENTINCK ST., SYDNEY, N.S.
MRS MARGARET PRATICO-MOTHER
SAME ADDRESS
DR. ABE GAUM SYDNEY CITY

TREATMENT:

MEDICAL INFORMATION REQUIRED:

Head aches and c/o
diminished vision

for refractive please
Thank
S. J. Norman

SIGNED

TO _____
DATE 7/5/71

Used to weight

FINDINGS AND RECOMMENDATIONS:

VA. 50 2/30 a 2/100.
External Exam: lids conjunctiva & cornea normal
Pupils Equal round & normally reactive
Ophthalmoscopy: Media clear. Fundi including chiasm appear normal

Re. Aphakia advised

SIGNED

No. *72-22440* 17
 Name of Patient *Pratica, John*
 Hb. *10.4* %
 WBC *10,400* per cu. m.

DIFFERENTIAL:

NEUTROPHILS %	LYMPHOCYTES %
BANDS %	MONOCYTES %
JUVENILES %	EOSINOPHILS %
MYELOCYTES %	BASOPHILS %

MICROSCOPIC ASSESSMENT: (Indicated by appropriate check or by 1+ to 4+)

1. RED CELLS:

NORMAL- ; MICRO- ; MACRO-
 POLY- ; ANISO-
 HYPOCHROMIC
 ERITROBLASTOSIS-

2. WHITE CELLS:

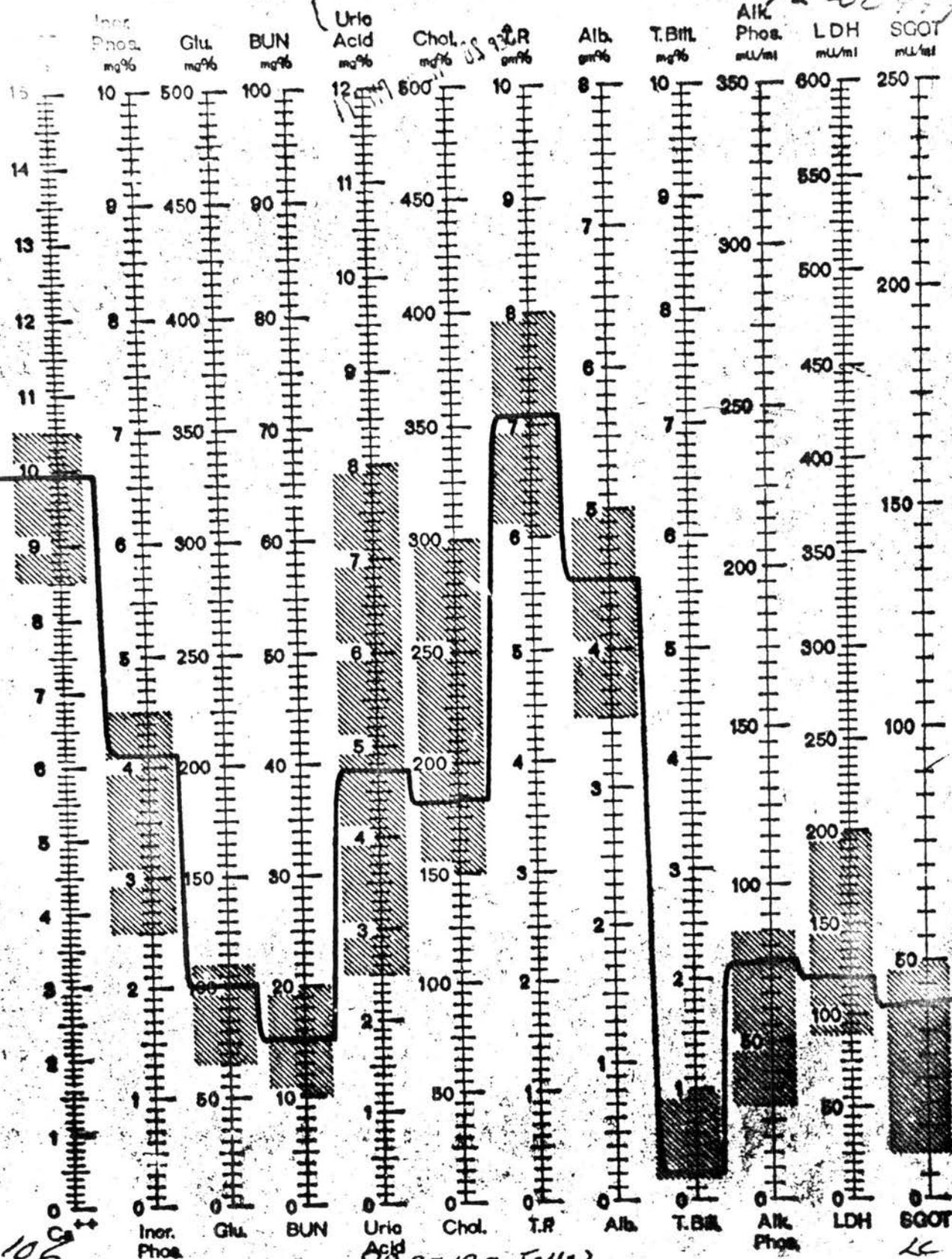
NORMAL- ; INCREASED- ; DECREASED-
 OTHER -

MB
 TECHNICIAN

DATE *Sept 24/71*
 LAB. NO. *1*

1100

72-02-1971



106
Patient's Name

PRATICA, JOHN

No. WSH-02157 Rm.

Date 28/9/71

Sept 15/71 WARD 53

16
MSI
201
MRS MARGARET PRATICO-KOTNER
SAME ADDRESS
DR. AGE GAUR
STONEY CITY

NAME _____ AGE _____
ADDRESS _____

STAFF OUT PT. NO. 53
DEPT. _____

AFTER CARE DAY CARE OTHER
NO. _____ NO. _____ SPECIFY _____
PHONE NO. _____ OCCUPATION _____

EXAMINATION OF
right wrist.

PERTINENT HISTORY ACCIDENT YES NO

pt free last week.

REASON FOR EXAMINATION

PATIENT IS WALKING CHAIR _____ CARRIAGE _____
TECHNICIAN *jm* DR. *John J. Wasany* DATE OF EX. *Sept 15/71*

REPORT

Sept. 22/71
FRATINO, JOHN L. 71-02198
RIGHT WRIST - No evidence of fracture is shown.

Sept. 23/71

[Signature]
RADIOLOGIST

RADIOLOGIST

VA SCOTIA HOSPITAL
DARTMOUTH, N.S.

72-23444

DATE _____ WARD 53

NAME _____ AGE _____

ADDRESS _____

STAFF OUT PT.
DEPT. _____ NO. _____

AFTER CARE DAY CARE OTHER
NO. _____ NO. _____ SPECIFY _____

PHONE NO. _____ OCCUPATION _____

EXAMINATION OF chest X ray w/ attention to left clavicle, left upper ribs

PRATICO, JOHN L.
25/9/71-02158 DEC. 31/54 HARB
16 R.C. 514 VOL.
NSI 110-929-041-01 SERVICE
201 BENTINCK ST., SYDNEY, N.S.
MRS MARGARET PRATICO-MOTHER
HOME ADDRESS
DR. ADE CAHN SYDNEY CITY

53

PERTINENT HISTORY ACCIDENT YES _____ NO _____

patient complaining of severe pain in left upper chest - it was injured when steering wheel of car he was driving a month ago hit into his chest as a result of an auto accident. The left clavicle appears displaced anteriorly somewhat

REASON FOR EXAMINATION investigation

DR. B.M. Cohen

PATIENT IS WALKING CHAIR _____ CARRIAGE _____ DATE OF EXAM. Sept 1/71
TECHNICIAN ES

REPORT
Sept. 1/71

PRATICO, JOHN L. 71-02158 Aug. 28/71

- CHEST - A few calcifications around the hilar areas but otherwise nil.
- LEFT CLAVICLE - No evidence of fracture is seen.
- LEFT RIBS - No abnormality is demonstrated.

1/21
Sept. 1/71

[Signature]
DR. I. K. MacLeod

RADIOLOGIST

NOVA SCOTIA HOSPITAL

Department of
**ELECTRO-
ENCEPHALOGRAPHY**

PRATICO, John
18 8-3

72-03444

EEG NO. 71-1469

Attending Physician Dr. P.K. John

53

DATE: _____
TIME: _____
PATIENT: _____
REF: _____
CLIN. CORR. _____
PHYS. SPECIALS: _____

DATE Sept. 14/71

RECORD DESCRIPTION: The resting record is symmetrical. There is quite well regulated 9-10/second alpha activity. There is slight 5-7/second fronto-temporal dysrhythmic activity which is increased during hyperventilation. There are no focal or paroxysmal discharges. No further abnormalities develop with photic stimulation.

CONCLUSION: The EEG shows non-specific and non-diagnostic fronto-temporal dysrhythmia but this is not uncommon in schizophrenia. There is no evidence of any focal cerebral pathology.

/po

Rec'd 15/9/71
Typed " " "

Hugh N. A. Macdonald
HUGH N. A. MacDONALD, M.D.
Neurophysiologist

3-79

NOVA SCOTIA HOSPITAL

DOCTOR'S ORDER SHEET

WARD:

53

DATE:

72-03444

PRATICO, JOHN L.
25/9/71-02150 DEC. 31/54 WARD
16 R.C. SIN. VOL.
MSI 110-929-841-01 SERVICE
201 BENTINCK ST., SYDNEY, N.S.
MRS MARGARET PRATICO-MOTHER
SAME ADDRESS

DR. ABE GAUM

SYDNEY CITY

25/8/71 Sleeping draught- h.o. p.n.

T Blay

Aug 25/71 Chlorprom 50 mg qid
P.K.A.

Aug 30/71 Increase chlorprom to 150mg 2id
Dr John / Miller

#17

72-03444

PSYCHIATRIC NURSING NOTESPage No. 1

PRATICO, JOHN L
 25/8/71-02150 DEC. 31/54 WARD
 16 R.C. 5th. VOL.
 MSI 110-929-841-01 SERVICE
 201 BENTINCK ST., SYDNEY, N.S.
 MRS MARGARET PRATICO-MOTHER
 SAME ADDRESS

SYDNEY CITY

DR. ABE GAUM

Voluntary First Admission: of a 16 yr. old single white male admitted walking to S-3 C.O.A. T 37 P 80 R 20 B/P 40/60 HT 165 WT 61.7, no physical complaints voiced on admission.

John comes from a unfavorable family situation. Mother is a very heavy drinker and lives on Social Assistance and lives with a "Alcoholic" boy friend. Father has departed and lives with another woman. John describes himself as a nervous high strung "nail biting" individual, not too bright in school, he has repeated grade 5, 6 & 7 not being able to study in the home situation. John and his mother fight and argue often, mostly about the mother's drinking. He has temper tantrums, slams doors, threatens mother and such. He was also picked up for shop lifting, but was not charged. He was a witness to a murder (Thomson) in May 1971 and since then he admitted to be getting worse.

He admitted to visual and auditory hallucinations, hearing voices talking

#17

72-03444

PSYCHIATRIC NURSING NOTES

Page No. _____

PRATICO, JOHN L
25/8/71-02150 DEC. 31/54 WARD
16 R.C. SIN. VOL.
NSI 110-929-041-01 SERVICE
201 BENTINCH ST., SYDNEY, N.S.
MRS MARGARET PRATICO-MOTHER
SAME ADDRESS
SYDNEY CITY
DR. ABE GAUM

cont.

John Helms going to be killed, also
bright lights spinning in the alleyway
and also in his bed room.

Went on P. & C. procedure to adm procedure
out on W.D. socializing some
Sept 9/71 (0600-2400) S. Hillis

John's first few days on the ward
were quite upsetting to himself but slowly
adjusted to the surroundings and then fairly
well on the token system. Has had
moments when he gets quite verbally
hostile but this only lasts for a few
moments. Likes to help around ward
esp. staff and seems to seek gratitude for
this. No management problems. Personal
hygiene and appetite fair.

S. Readell P.M.D

Left ward on parade at 5pm + transport
Call from HFA Lib John's John wants 2000
and they would return him to the ward
ward at 2120 hrs

L. J. E. C. P.

#17

72-03444

PSYCHIATRIC NURSING NOTES

Page No. _____

PRATICO, JOHN L
 29/8/71-02150 DEC. 31/54 WARD
 16 R.C. 51N. VOL.
 MSI 110-929-841-01 SERVICE
 201 BENTINCK ST., SYDNEY, N.S.
 MRS MARGARET PRATICO-MOTHER
 SAME ADDRESS
 SYDNEY CITY
 DR. ABE GAUM

Sept 27/71. Pt gets along well on ward he
 does his ward duties well and he likes to
 be in the gal in the kitchen. He gets a little
 overactive at times. He likes to help the staff
 on the ward. Personal hygiene and eating.
 habits good.

R. Doucette

Oct 9/71 Behavior remains good
 Ward duties handled well. attends all ward
 functions punctually. appetite good hygiene
 fair. Appears somewhat slow in actions.
 dull facial.

C. Ford

Oct 25/71 on pass since Oct 10/71.

Discharged as of 1600 hrs Oct 25/71.

Schultz 69.2

428 Revised Jan./71

NOVA SCOTIA HOSPITAL
MEDICINE SHEET

72-03444
 PRATICO JOHN L
 85/8/71-02158 DEC. 31/54 WARD
 16 R.C. SIN. VOL.
 PSI 110-924-041-01 SERVICE
 201 BENTINCA ST. SYDNEY, N.S.
 PMS MARGARET PRATICO-MOTHER
 SAME ADDRESS
 SYDNEY CITY
 T. ABE GAUM

left

WARD S-3	DATE 29		DATE 30		DATE 31		DATE 1		DATE 2		DATE 3		DATE 4	
MEDICATION	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.	Hr.	Sig.
<i>Chlorpromazine</i>	0900	LS	0900	LS	0900	LS	0900	K	0900		0900		0900	K
<i>Qid</i>	1300	LS	1300	LS	1200	LS	1300	K	1300		1300		1300	
	1700	2B	1700	LS	1700	LS	1700	2B	1700	2B	1700	2B	1700	2B
	2100	2B	2100	LS	2100	LS	2100	2B	2100	2B	2100	2B	2100	2B
	29		30		01/31		2		3		4		5	
<i>Chlorpromazine 200</i>	0900	LS	0900	LS	0900	LS	0900	AM	0900	AM	0900	AM	0900	AM
<i>Qid</i>	1300	LS	1300	LS	1200	LS	1300	AM	1300	AM	1300	AM	1300	AM
	1700	2B	1700	2B	1700	2B	1700	M	1700	M	1700	M	1700	M
	2100	2B	2100	2B	2100	2B	2100	M	2100	M	2100	M	2100	M
	6/11		7		8		9		10		11		12/71	
<i>Chlorpromazine</i>	0900	LS	0900	LS	0900	LS	0900	K	0900		0900		0900	
<i>200mg qid</i>	1300	AM	1300	LS	1300	LS	1300	K	1300		1300		1300	
	1700	M	1700	2B	1700	2B	1700	2B	1700		1700		1700	
	2100	K	2100	2B	2100	2B	2100	2B	2100		2100		2100	