RECEIVED SUPREME COURT STATE OF WASHINGTON

CLERK'S OFFICE

NO. 95346-5 Mar 21, 2018, 11:29 am THE SUPREME COURT

RECEIVED ELECTRONICALLY

OF THE STATE OF WASHINGTON

SUPREME COURT NO. 95346-5 - DEOIDE LEA CUNNINGHAM

v. STATE OF WASHINGTON, DSHS

COA NO. 73713-9-I

DEPT. OF SOCIAL & HEALTH SERVICES

Declaration of service on 3/21/2018 - EMERGENCY MOTIONS RAP 17.4(b)

Date March 21st, 2018

I Karl Ivan Olson, certify that on March 21, 2018, I mailed true copies of the enclosed documents to all

the parties listed below by USPS First Class mail.

Kul Ivan Olson

Soc & Hlth Svc AG office 7141 cleanwater DR SW PO BOX 40124 Olympia WA 98504

Kathryn Krieger AAG 7141 cleanwater DR SW PO BOX 40124 Olympia WA, 98504

FILED AS ATTACHMENT TO EMAIL



Appellant
KARL OLSON
Personal Caregiver of 28 years
2714 J Ave Anacortes, WA
98221
360 420 8065
Karl69olson@hotmail.com

TABLE OF CONTENTS

I.	IDENTITY OF THE MOVING PARTYpg 1
II.	RELEIF SOUGHTpg 1
Ш	BASIS FOR RELIEFpg 1 - 3

A. Without medications Deoid'e could not appear at 9 am on 5/20/2014 by telephone or in person from dangerous withdrawals and seizures. Deoid'e was and still is suffering from a terminal condition and several and life threatening health conditions which are still in the process of being managed by specialty care. Even with specialty care professionals Deoid'e faces invariable, incapacitating, acute, chronic, life threatening, disabling conditions that require 24/7 supervision and care.

Without this motion the lower courts opinions will remain as if they were not harmless beyond a doubt as all were denied this evidence. All lower courts erred in their opinions on remedies due to the evidence not being available until now. This includes records from Mary W. Stone (Exh H) LMHC who was primary counselor for Deoid'e and Karl from 2007 thru 2015 and Seth Cowan ARNP (Exh I) who each knew what happened on 5/20/2014. Deoid'e will face a gross miscarriage of justice if this evidence is not accepted in an emergent motion hearing because she was deprived medications before the hearing (Exh J) and was suffering dangerous withdrawal symptoms due to risk management at Dr Whitehead's office who cut off Deoide's medications before hearing. Fentanyl is 100 times more potent then morphine and oxycodone.

- IV. CONCLUSION..... pg 18, 19

TABLE OF AUTHORITIES WASHINGTON STATE CASES

1. STATE v ASHCRAFT 71 Wn. App. 444, 859 P.2d 60 (1993)pg 9, 10						
2. STATE v DARDEN 145 Wn. 2d 612, 41 P.3d 1189 (2002)pg 9, 10						
3. STATE v EASTER 130 Wn. 2d 228, 922 P.2d 1285 (1996)pg 9, 10						
4. STATE v. HUDLOW 99Wn. 2d 1, 659 P.2d 514 (1983)pg 9, 10						
5. STATE v INIGUEZ 167 Wn.2d 273, 217 P.3d 768 (2009)pg 9, 10						
6. STATE v JONES 168 Wn.2d 713, 230 P.3d 576 (2010)pg 9,10						
7. LAMBORN v. PHILLIPS PAC. CHEM. CO. 89Wn 2d 701, 575 P. 2d 215 (1978)pg 9, 10						
8. STATE v MILLER 131 Wn.2d 78, 929 P.2d 372 (1997)pg 9, 10						
9. STATE v WITTENBAGER 124 Wn.2d 467, 880 P.2d 517 (1994).pg 9.10 FEDERAL CASES						
10. CRANE v. KENTUCKY 476 U.S. 683, 106 S. Ct. 2142, 90 L. Ed. 2d 636 (1986)pg 9 and 10 STATUTES, RULES & OTHER AUTHORITIES						
RAP 17.4(b)pg 1						
RCW 34.05.562(1) – (d)pg,1,2,3,4,5,7,8,9,11,13,14,15,16,17,18						
U.S. CONST. amend. XIVpg 9, 10						
WASH.CONST.ART.1, SEC 2pg 9, 10						
WASH.CONST.ART.1, SEC 3pg 9, 10						
WASH.CONST.ART.1, SEC 29pg 9, 10						
EXHIBITS EXHIBIT Hpg 2, 7, 8, 10, 11, 13, 14,15,16,17,18						
EXHIBIT Ipg. 2, 4, 5, 7, 8, 10, 11,14,15,17						
EXHIBIT Jpg,2, 3, 4, 5, 6,7, 8, 11, 12,15,17,18						
EXHIBIT Kpgs 2, 7, 14						

I. IDENTITY OF MOVING PARTY

The moving party is the petitioner Deoid'e L. Cunningham supported by her Dedicated Assistant Karl Ivan Olson, significant other, caregiver of 28 years.

II. RELIEF SOUGHT

In order to save time for Deoid'e and this court, the grave irreparable harm that has become to Deoid'e from this more than 5 year wrongful action, Deoid'e comes now pursuant to RAP 17.4(b) with her emergency motion to save herself and the court time. We ask this court to exercise its authority under RAP 17.4(b) to approve this emergency motion because the court is due to review these issues on 4/3/2018 and it needs to review this new evidence RCW 34.05.562(1) – (d) before proceeding because the court will avoid wasting Deoide's time and also the time of the good Clerks and Justices. The court may find more fact finding is needed before review, We ask the court accept this review, emergency motion, evidence, vacate court of appeals order, vacate the default and return Deoid'e to school.

III. BASIS FOR RELIEF

A. Without this motion Deoid'e will continue to face grave irreparable harm by appealing action caused by supervisors who intimidated her doctor, who had her on high levels of opioids and anticonvulsants without the proper supervision required by WA State protocols on pain management and Neurological management, removing argument needed to complete exhaustion of administrative remedies. Deoid'e will face a gross miscarriage of justice as she was deprived her medications which made her too ill to appear on 5/20/2014 which took away her ability to safely attend at all.

Deoide's life was placed in jeopardy by multiple opioids and other medications improperly managed and deprived with malice. RCW 34.05.562(1) – (d) Without this motion the lower courts opinions will remain as if they were not harmless beyond a doubt as all were denied this evidence. All lower courts erred in their opinions on remedies due to the evidence not being available until now. This includes records from Mary W. Stone (Exh H) LMHC who was primary counselor for Deoid'e and Karl from 2007 thru 2015 and Seth Cowan ARNP (Exh I) who each knew what happened on 5/20/2014. Deoid'e will face a gross miscarriage of justice if this evidence is not accepted in an emergent motion hearing because she was deprived medications before the hearing (Exh J) and was suffering dangerous withdrawal symptoms due to risk management at Dr Whitehead's office who cut off Deoide's medications before hearing. RCW 34.05.562(1) – (d) Dr Whitehead stressed telephone hearings (Exh K).

Fentanyl is 100 times more potent then morphine and oxycodone. Without this appointment on 5/20/2014 we had little chance of getting medications from the other doctor who abandoned Deoid'e. The doctors supervisors dangerously cut Deoid'e down from 75mcg to 50mcg (a 60 morphine equivalent drop while previously and simultaneously undergoing a 120 morphine equivalency drop of oxycodone 40mg to 20 mg) (Exh J) without anti withdrawal medication and supervision from a pain management doctor. RCW 34.05.562(1) – (d) Deoid'e was out 3 days medications (Exh J)

The doctor's supervisors would not allow the medications to be refilled until 5/21/2014 (ExhJ) and she was already and had been in a titration/withdrawal taper down from 40mg oxycodone to 20 mg oxycodone previously. This was deathly dangerous for Deoid'e. Deoid'e was trying to survive a 180 morphine equivalency drop suddenly which is dangerous under any circumstances and exacerbated by other health issues, unaided by any specialty supports of anti-withdrawal medications. RCW 34.05.562(1) – (d)

Deoid'e was on dangerous combinations of medications not managed by Washington State protocols for opioid and benzodiazepine management implemented back in 2011. By 2014 Deoide's doctor then did not get her a pain management doctor who could supervise her care which violated Peace health policy for pain management and Washington state protocols for pain management which the Attorney General (AG) has spearheaded a nationwide call for reforms. However, this does not seem to apply to the appellant who was at one time, just shortly before this issue was on 420 morphine equivalencies along with combined benzodiazepines in the amounts of 30 milligrams (mg) a day. (Exh J)

Deoid'e was in the process of a taper from 420 equivalencies, underwent a lifesaving emergency medical surgery on 8/14/2013 stemming from complications that were undiagnosed, which are still affecting her now, her medications were increased to treat the pain. These issues were worsening in 2014 and at this time are finally being monitored to try and manage them by proper protocol specialists. Prior to the taper Deoid'e was placed on 75 Micrograms (MCG) per hour fentanyl

patch system due to mal absorption syndrome with hopes the patch would bypass the problems. (Exh J) RCW 34.05.562(1) – (d) Deoid'e was denied meds and late.

Deoid'e was also prescribed oxycodone oral in the amounts of 20 mg every 6 hours which was increased to 40 mg every 6 hours post-operative. This was a total of 420 morphine equivalencies which at 120 or above require a pain management doctor. Benzodiazepine (valium) prescribed for status epilepticus seizures and management of epilepsy also requires a Neurologist to prescribe and monitor every 6 months.

Deoid'e was undergoing a managed taper by her doctor who was not a pain management specialist, with no anti withdrawal medications such as clonidine and or doxepin to lower withdrawal symptoms. Deoid'e previously had been allowed a 6 day insurance grace period authorized by her primary care doctor and monitored by the pharmacy to aid this taper. The grace period was allowed to support the taper so that Deoid'e would be safe and not encounter dangerous withdrawals. However, this grace period was deprived (Exh I and J) just before the hearing exposing Deoid'e to a sudden and dangerous gap in coverage, Deoid'e began to encounter dangerous withdrawal, and she was denied care at the emergency room in Bellingham because the supervisors told them to refuse her.

Because the doctor was confronted and had his prescription provisions taken away Deoid'e suddenly went to a 30 or later day refill on all her medications which were dangerous. By late May 18th 2014 Deoid'e went into withdrawals and again was refused care at her doctor's emergency room on the weekend. Her calls for medication refills went unanswered on Monday 5/19/2014, the supervisor

refused to turn back control to the doctor so he could accommodate the 6 day grace period taper for insurance refills; her access to her doctor was cut off.

Insurance companies will allow an early refill with a prior authorization from the primary care doctor but will not otherwise. Deoid'e was already in a delicate and dangerous state because she was not under the care of a specially trained medical team who was licensed by Washington State to keep her safe. Deoid'e had no choice but to reach out for care (Exh I) because her medications were being denied and withheld and they were not released until 3pm on 5/20/2014. (Exh J) Without seeking care which likely was the only reason her medications were released due to pressures from other doctors who demanded that the old doctor fill medications until the transfer of care could be completed which is standard. After her appointment with me, Karl Olson where we addressed the issues of her medications (Exh I) being high jacked (cited in my records Exh I)) we received a call from an employee at doctor whiteheads office who stated that the medications were ready to be picked up, that was nearly 3pm. This still left Deoid'e dangerously ill with opioid withdrawals because the medications were denied refill until 5/21/2014. (Pharmacy records Exh J) RCW 34.05.562(1) – (d)

Fentanyl is a transdermal medication system that requires a patch, the patch once applied/changed every 72 hours must have 15 hours to reach maximum plasma benefits and therapeutic titration to the patient but in Deoide's case now must be changed every 48 hours which we did not know until we established with a pain doctor, some patients require the change at 48 hours for best pain control. Even as the medication was released on 5/20/2014 it was denied to be refilled until

the next day on 5/21/2014 (Exh J) which was 72 hours after her old patch had depleted and that her other taper from oxycodone had been affected simultaneously. Oxycodone was making Deoid'e ill and she may no longer take that medication according to pain management. She has been placed on a safer more beneficial short acting medication which helps her. We again had no idea until pain management and neurology made me aware to this.

The AG who takes great pride is his advocacy against opioid abuse/dangers seems to have discriminated against Deoid'e; apparently she is immune to these dangers and would not suffer the same ill effects as anyone else placed in this dangerous situation by a negligent provider's supervisor. Dr Whitehead would never in my opinion have placed Deoid'e in this potentially lethal position without pressures from his supervisors and the Health Care Authority (HCA). Dr Whitehead is no longer employed at peace health and is no longer a primary care doctor, he opened his own urgent care clinic recently. We are happy he is in charge of his patients.

Lacking proper time to titrate down safely and with the sudden withdrawals from multiple medications Deoid'e was in danger simply due to this situation and I question seriously the timing right before the hearing. How could Deoid'e function? Even if she could have appeared by telephone or in person how could it have been safe for her or how could she participate affectively at a proceeding? Her taper required months of specialty care and going to that hearing was dangerous to because it combined stress and epilepsy on top of numerous other conditions exacerbated by withdrawals that were the responsibility of her former

doctor and his supervisor, her doctor abandoned her right before the hearing and cut off her medications. (Exh, H, I and J) RCW 34.05.562(1) – (d)

Monday, May 19th Deoid'e was very ill and her doctors supervisors refused to reinstate the 6 day grace period so medications could be tapered safely, she was ignored at the Emergency room (ER) again. By May 20th 2014 she was very ill and it was impossible that she could function enough to go anywhere at 9am(Exh H)

It would have been completely possible and reasonable to ask her to appear on the phone or in person, had her medications not been cut off dangerously which is forbidden under State protocols which are argued to be law by the AG. Dr

Whitehead informed (stressed) HCA and Office of administrative hearings (OAH) that Deoid'e could appear by phone, he stressed this (Exh K) and cited in the previously submitted transcript of case 07-2012-HCA-0109 but how could she suddenly cut off her medications and During withdrawal?

Dr Whitehead demanded and stressed that Deoid'e should have been allowed telephone hearings (Exh K) because of stress that triggers seizures and exacerbates other illnesses which recently have been encountered again. In person situations such as hearings are dangerous to Deoid'e, she simply has issues stemming from developmental disabilities which greatly affect her ability to engage in certain social situations to which court hearings are one of the hardest for her. Going to school and taking a test are far different than appearing in person for a hearing that is a different type of stress. Activities enjoyed by Deoid'e reduce seizure activity but they still break through and occur unexpectedly for no reasons.

Dealing with withdrawal is serious and people die from it even in controlled environments, it involves extreme physical and psychological realities that the courts failed to recognize in this case along with many other issues that affect the due process of law. The evidence was in my records (Exh H and I) and I had no Idea that this information had been placed there, I wondered why it was not filed in Deoid'e s records but since Deoid'e was not yet an established patient it would not go into her records because it was my appointment. There it say until now along with another document that supports events from that day, I had no idea that my record revealed such danger as to withhold medications from Deoid'e and at that time I was suffering from post-concussive syndromes and exhaustions of trying to keep Deoid'e alive while she was going through withdrawals of severely life threating medications. Pharmacy records provided from the pharmacy are directly provided from the State website for prescription medications (Exh J) RCW 34.05.562(1) – (d)

Mary W. Stone Licensed mental health counselor (LMHC) wrote a letter (Exh H) which was not filed with OAH or the Court of appeals (COA) but I thought it had been, this was my fault and I have only myself to blame. Counselor Stone was our primary counselor from February 2007 thru December 2015 until she retired, she worked closely with doctor whitehead but she never abandoned us like Dr Whitehead did. Mary helped me to keep Deoid'e alive while all others walked away, she did not prescribe medications but she saw what they did. Deoid'e is a defendant and she must be allowed to defend her life, liberty and property, the next evidence was not in existence until this week which could not

be considered therefore RCW 34.05.562(1) – (d) applies. Deoide's evidence need only be relevant to be admissible, State v. Darden, 145 Wn. 2d 612, 622, 41 P.3d 1189 (2002). "(I) if relevant, the burden is on the state to show the evidence is so prejudicial as to disrupt the fairness of the fact-finding process at trial." Jones, 168 Wn.2d at 720 (quoting Darden, 145 Wn.2d at 622), State v. Hudlow, 99 Wn.2d 1, 15-16, 659 P.2d 514 (1983); Darden, 145 Wn.2d at 621. Relevant evidence is "evidence having a tendency to make the existence of any fact that is of consequence . . . more probable or less probable than it would be without the evidence." ER 401. All facts tending to establish a party's theory are relevant. Lamborn v. Philips Pac. Chem. Co 89 Wn 2d 701, 706, 565. P.2d 215 (1978) the denial of the right to present a complete defense is constitutional error. Crane, 476 U.S. at 690; jones, 168 Wn.2d at 724. Constitutional error is presumed prejudicial and the state bears the burden of proving the error was harmless. State v. Miller, 131 Wn.2d 78,90, 929 P.2d 372 (1997). U.S. CONST. amend. XIV, WASH. CONST. ART. 1, SEC 2, WASH. CONST. ART. 1, SEC 3, WASH. CONST. ART. 1, SEC 29 "The presumption may be overcome if and only if the reviewing court is able to express an abiding conviction, based on its independent review of the record that the error was harmless beyond a reasonable doubt that is, that it cannot possibly have influenced the jury adversely to the defendant and did not contribute to the verdict obtained." State v. Ashcraft, 71 Wn. App. 444, 465, 859, P.2d 60 (1993). Constitutional error is harmless only if this court is convinced beyond a reasonable doubt any reasonable trier of fact would reach the same result absent the error and "the untainted evidence so overwhelming it necessarily

leads to a finding of guilt." State v. Easter, 130 Wn.2d 228, 242, 922 P.2d. 1285 (1996). Constitutional rights, State v. Iniguez, 167 Wn.2d 273, 280, 217 P.3d 768 (2009). A claimed denial of constitutional right, such as the right to present a defense, is reviewed de novo. Iniguez, 167 Wn.2d at 280; State v. Jones, 168 Wn.2d. 713, 719, 230 P.3d 576 (2010). Defendants have the constitutional right to present a complete defense. State v. Wittenbarger, 124 Wn.2d 467, 474, 880 P.2d 517 (1994); Crane v. Kentucky, 476 U.S. 683, 690, 106 S. Ct. 2142, 90 L.Ed. 2d 636 (1986); U.S. CONST. amend. XIV, WASH. CONST. ART. 1, SEC 2, WASH. CONST. ART. 1, SEC 3, WASH. CONST. ART. 1, SEC 29

A. Attending the appointment was the safe action for Deoid'e. Attending the hearing would have been dangerous for Deoid'e. A Court hearing can be reinstated by the court but Deoid'e cannot have her only life reinstated.

Deoid'e was not in any condition that day on 5/20/2014 (Exh H, I) to appear and defend herself because her previous doctor's supervisors were negligent and acted with malice. People die from negligent management of opioids combined with benzodiazepines and I would not let Deoid'e die. Counselor Stone cited that I made the right choice for Deoid'e.(Exh H)

Mary, in her professional opinion as a mental health care professional for over 3 decades who was employed by at one time many years ago at State agencies stated that I did right for Deoid'e, that I made the right decisions to save her which did prevent me from that hearing (Exh H), Mary saw a danger to Deoid'e and she saw the emergency. Have any of you ever been placed in a situation where a doctors supervisor has cut off dangerous opioids at the level Deoid'e was??? It is a

terrible nightmare and I pray that you never experience this, I wish this not even upon the AG who angers me to say that this issue did not caused Deoid'e or myself enough danger to trigger a default on 5/20/2014 and that there was "no good cause shown" RCW 34.05.562(1) – (d)

Mary witnessed what the medication withdrawals were doing to Deoid'e and myself, she knew Deoid'e had been cut off which is why she wrote her letter (Exh H) and that is why it was cited in my records from 5/20/2014 in my appointment with Seth Cowan Advanced registered nurse practitioner (ARNP) (Exh I), who revealed that Deoid'e had had her medications withheld and was running out because she was dismissed by Dr Whiteheads supervisors. Seth was wrong because Deoid'e had run out. RCW 34.05.562(1) – (d) (Exh J)

Pharmacy records reveal dangerous drops in pain medications that were not being monitored by a pain management specialist; Deoid'e encountered early refills as far as 14 days to accommodate her severe pain increases due to undetected and under diagnosed medical conditions. Suddenly and acutely her medications were reduced in January 2014 (Exh J) and she was not provided and anti-withdrawal medications nor was she offered any pain reduction assistance from a specialist who could help an extremely slow reduction to an amount required.

Oxycodone was not a good medication for Deoid'e and she is no longer prescribed that medication, pain management protocols provide now a long acting medication and a short acting medication but she may never take oxycodone again, it was causing additional seizure activity and bowel obstructions. Deoid'e had been

allowed 6 day grace periods and earlier grace periods all authorized by her primary care doctor who authorize our pharmacist to dispense as he directed, Deoid'e followed her doctors medical advice exactly because I handle all her medications for accuracy and safely. (Exh J)

Deoid'e was denied a refill on fentanyl completely for 33 days in 2014 (Exh J) while at the same time being dropped from 40 mg oxycodone to 20 mg oxycodone which was previously allowed a 6 to 14 day grace period for refills. Deoid'e went into shock as she was cut suddenly from these two very safe but dangerous medications when not monitored properly, suffering withdrawals due to the extreme reductions from the prior year of titration.

Deoid'e was not allowed enough time to recover before her hearing on 5/20/2014 and she was not provided with any doctors who could help stabilize before the hearing, in fact Dr Whitehead was forced to abandon her by his supervisors, he just cut Deoid'e off dangerously and walked away leaving her ill and in danger.

The records show the early refills, the denials suddenly and the immediate and hostile reductions and refusals to allow a safe taper which did throw Deoid'e into opioid withdrawals that was not her fault, why this happened right before the hearing on 5/20/2014 was certainly a blessing for the HCA and OAH and AAG who got their default, what would you think was going to happen? I did not abandon Deoid'e and neither did Mary.

Dr Whitehead was kind man and he helped Deoid'e go to school which really is what this attack on Deoid'e is about, he helped establish the proper Americans

with Disabilities Acts of 1974 & 1990 (ADA) accommodations and medical supports so that Deoid'e could go to school and better herself, go to school to keep her focused on something positive so she would not dwell on her deteriorating health. Unfortunately the HCA and AAG did not approve of this and attacked her for going to school even as they were supportive to this activity since 2002.

AG Fergusons administration suddenly attacked Deoid'e in early 2013, right after his administration took over and it was a complete reversal on HCA lifelong education activities that once were supported to Deoid'e with HCA supporting her to return to school as far back as 1994. There is no excuse for Dr Whitehead to endanger Deoid'e and certainly not at a time when she needed to be able to function enough properly to appear to defend herself at a hearing on 5/20/2014.

As a caregiver trained and certified in medication management by Washington State I am shocked by the records that remind me now what was happening in 2014, I was ill myself with concussive syndromes and can now see by records how dangerous that time was for Deoid'e and I am reminded by Mary (Exh H) that thankfully I was still able to make a critical choice to focus on saving Deoid'e from dangerous withdrawals. RCW 34.05.562(1) – (d)

As much as I loathed pain medication management protocols along with others I now praise them, I now support them because it will save lives and reduce and prevent what my beloved Deoid'e went through unnecessarily, that did not and should not ever happen to anyone. I am not sure why it had to happen right before that hearing on 5/20/2014 but it did and there was no way Deoid'e could attend that hearing, even by phone would have been worthless, I was so immersed in

making sure that Deoid'e stayed alive that I was distracted rightfully to her as Mary indicated. The pharmacy records reveal all that needs to told, this explains why along with my records from Dr cowan on 5/20/2014 (Exh I) and Marys Letter (Exh H) this explains why Deoid'e was so ill and so invariable unstable at times which were real dangers. RCW 34.05.562(1) – (d)

I imagine this is why Kelly Clark the HCA representative wanted to scare Dr Whitehead off and gain an in person hearing when she was denied her continuances prior to and the day of the 3/18/2013 hearing under 07-2012-HCA-0109, she knew how vulnerable Deoid'e was as confirmed by her call to Dr Whitehead on 3/15/2013 at 5.19 pm the Friday before the Monday hearing (Exh K). This is why she lied under oath multiple times, throughout the official proceeding, months after and concealed our hearing request that was filed properly, she needed more time for discovery but could only gain that with a continuance that she never was granted, her only hope was to lie and conceal the appeal so she could theatrically claim "lack of jurisdiction" from ALJ Wagner who colluded with her, the AG concealed it then through judicial review.

Deoid'e was very ill before the hearing and the day of the hearing but without these new documents and additional information deprived to us and the lower courts there was simply no way to properly judge the situation, it was impossible to do without fact finding enabling the entire record to be reviewed and especially with the concealment activities and violations of due process by the HCA, OAH, ALJ and AAG/AG, there was no due process for Deoid'e and that was certainly no fault of hers. Deoid'e was in more danger at that time than we knew and I cannot

see why the AG refuses to acknowledge his own protocols on opioids are relevant to all humans including Deoid'e who also suffers numerous and at times life threatening disabilities and chronic health issues.

Even as the AG and the HCA make the case nationally, internationally and spends millions of tax dollars to implement safer protocols for medication management(which I am well educated in now) on opioids and all potentially dangerous medications they discriminate against a person they say they are trying to help. They simply turn their back upon Deoid'e who was in danger because the very warnings they make publically known are simply segregated from Deoid'e so that her default will stand. I find this inappropriate and somewhat discriminatory because Deoid'e is isolated by the HCA and AG who by their actions conclude that Deoid'e is immune to any side effects from opioids and that she is not at risk just as anyone in the community. (Exh H, I, J) RCW 34.05.562(1) – (d)

The lower courts fail along with the AG and HCA to recognize that Deoid'e is human, that she is vulnerable to the same risks the public is vulnerable to such as chemicals, environmental hazards, speeding intoxicated drivers, violence, influenza, and international terrorism. However when it comes to the matter of this alleged default on issues of failing to show "good cause" involving dangerous medications that were not supervised under the required laws of Washington State protocols for medication management, withholding dangerously 75mcg Fentanyl which was dropped to 50mcg and denied filling until 5/21/2014, 40 MG Oxycodone dropped to 20 mg, Benzodiazepines, and other anti convulsants, it wrongfully does not apply for Deoid'e. It is simply used as an excuse to say it

could not and did not affect her so her hearing would not be reinstated, that

Deoid'e is somehow immune to the dangers of opioid medications mismanaged by
a doctor when he allowed a supervisor, who is not a doctor, to deprive his control
over those medications while she was already tapering down dangerously.

According the Food and drug administration (FDA), AG and HCA, even our past and current presidents these medications are dangerous to persons who are very healthy with proper supervision of specialists trained in Washington State protocols for the management of opioids and other medications, even the public who does not take medications are at risk, everyone is at risk, except for Deoid'e according to the lower courts and the AG. RCW 34.05.562(1) – (d)

Mary was in our lives weekly and bi weekly for a decade, no other person saw what was happening to us and more in Deoid'e, she wrote her letter which indicated that the right decision was made; I did what was in the best interest of Deoid'e. A hearing can be continued, reinstated but Deoid'e and her life, liberty and property which are her constitutional rights are not so easily reinstated and I would not or could not risk that under any circumstances. (Exh H)

I could not leave her unattended that day nor would I but there still would have been a chance had her medications not been deprived just before the hearing, In the state of withdrawal she was in now revealed by my education in opioid protocols established in part by the AG, Deoid'e would not have been in any safe condition to participate with fairness to her or the proceedings if she could have made it. The hearing would have been worthless because she would not have been able to properly represent herself with her dangerous illness of opioid withdrawals

directly triggered by supervisors who interrupted an unsupervised taper which was dangerous and lacked the supervision of a pain management doctor.

Deoid'e only has one life and that is the most important issue in this matter, she was in danger that day, her counselor knew it and so did I which is why she nor I could appear at 9am on 5/20/2014. I took her as soon as I could to try and get her the medications she should have had that would have prevented such dangerous illness, since the medications were not filled until the 21st and that they require 15 to 24 hours to properly work, it was not fair to think she could appear on 5/20/2014 at 9am. RCW 34.05.562(1) – (d) (Exh H, I, J)

I believe that someone contacted the doctor and told him he needed to provide Deoid'e with those medications but it was too late. The appointment was the right thing to do but it cost us a hearing on this issue which I will always defend came to an end on 3/18/2013. Cutting a person off abruptly or too quickly from these types of medications can kill someone and this is part of our opioid epidemic, the epidemic is not just isolated to drug abusers and it also finds its way to good and deserving persons who cannot have any quality of life without them such as Deoid'e who is under care from the best pain management doctor in the State of Washington. Deoid'e has also established with the best Neurologists, nephrologists in the State of Washington while establishing with the best primary care in Washington State.

Deoid'e deserves the best life can offer, she deserves the best liberty can offer and she deserves the best property can offer and I feel that the best of all is that she is still alive to try and obtain and reclaim the liberty and property she has been

deprived. It is very hard if not impossible to reclaim your life once it is lost. Mary Stone also agreed that Deoid'e should have life preserved before any other consideration, Counselor Stone knew us better than any which is why she had a direct link to say more than any other involved that I did the right things for Deoid'e on 5/20/2014 which is why we missed that hearing, Deoide's life was simply more important. Mary reveals more than any that there was good cause to miss that hearing because Deoid'e was indeed suffering an emergency and that I stood by her side to save her. (Exh H and J) RCW 34.05.562(1) – (d)

What is the point of liberty and property if one has not life to enable them to pursue it? Without life there is no chance to pursue anything, obtain property of liberty. The hearing was secondary to the safety of Deoid'e, the hearing can be reinstated with the signature of an order, a ruling along with all issues deprived before that and as a result of this action. By looking out for Deoid'e on 5/20/2014 I provided myself with the most important thing in my pursuit in life which is to spend as much time as I am given here to care for Deoid'e and love her.

IV. CONCLUSION

This Emergency motion will stop a gross miscarriage of justice, save time for Deoid'e, the good clerks and Justices. This motion reveals truth hidden for 6 years which relief may finally be provided to Deoid'e. This motion will restore constitutional rights, give back life, liberty and property in which life is most precious and important to her and myself and that part of the constitution. Please grant her motions so she can go back to school, Deoid'e cannot go to school without a caregiver nor can she do it without her life and doctors. Deoid'e was

dangerously ill on 5/20/2014 and we would never have known how dangerous that situation was without our new doctors who are specially trained in protocols required by the AG and State. Deoid'e was nearly deprived life over medications and a hearing but thankfully, according to Mary who saw us weekly and bi weekly for nearly a decade, I had the good sense and mental health that day to make the best decision of my life which was to take care of Deoid'e. Please grant Deoide's emergency motion and it's very important evidence, accept this case for review and reinstate her hearing because she is still alive in which she now has the health to attend either by phone or in person. Deoid'e followed her doctor's orders exactly as he provided which was monitored by me and our pharmacy. Deoide's doctor lost medical control of his patient, Deoid'e became ill which rendered her dangerously ill before the hearing. This was not her fault and this matter should be accepted and reversed. Please accept her motions, evidence and grant her review, reinstate her hearing and benefits.

Thank you,

As always, RESPECTFULLY SUBMITTED this 21th day of March, 2018

Deoid'e L. Cunningham, appellant Deoide L. Cunningham

Karl Ivan Olson caregiver 28 yrs

Kul Lown Olm

EXHIBT H (1 PAGE)

LETTER FROM MARY W. STONE LMHC WHO WAS OUR PRIMARY
COUNSELOR FOR NEARLY A DECADE. MARY SAW US WEEKLY AND
SOMETIMES BI WEEKLY AND SHE WORKED CLOSLEY WITH OUR
SITUATION AND SHE DID NOT ABANDON Deoid'e AS DR WHITHEAD DID.
MARY SAW WHAT WAS HAPPENING AND WROTE HER LETTER DATED
12/14/2015. SHE WORKED CLOSLEY WITH DR WHIEHEAD AND DISAGREED
WITH HIM, HOWEVER MARY WAS NOT INTIMIDATED BY A SUPERVISOR
NOR DID SHE HAVE A SUPERVISOR, NOR DID SHE VIOLATE ANY STATE
PROTOCOLS OR LAWS

Exh H

Mary W. Stone, LMHC 2510 Williams Street Bellingham, WA 98225

Commissioner Mary S. Neel Division 1 Court of Appeals 600 University Street Seattle, WA

December 14, 2015

Dear Commissioner Neel,

I'm a mental health counselor who has been seeing Deoide Cunningham and Karl Olson for therapy since 2007.

Now, I am writing on behalf of Deoide Cunningham to ask that you please consider reinstating her hearing that had been scheduled on May 20, 2014. She missed that hearing due illness on that day. Further, because Karl Olson necessarily and rightly chose to take care of her, he also was unable to appear at the hearing.

Thank you.

Sincerely yours,

Mary W. Stone LMHC

Mary Stone

EXHIBIT I (1 PAGE)

LETTER OF MEDICAL RECORD FROM MY (KARL OLSON) PERSONAL MEDICAL RECORDS ON 5/20/2014. SETH COWAN DICTATED THAT MEDICATIONS WERE BEING DENIED AND THAT THEY WERE GOING TO RUN OUT AND THAT I HAD BROUGH Deoid'e IN TO TRY AND ESTABLISH/SECURE MEDICATIONS BUT THAT WE WERE UNABLE TO GET AN APPOINTMENT UNTIL JUNE. I THOUGHT THESE RECORDS WERE NON EXISTANT AND THAT THEY WERE IN DEOIDES FILES BUT THEY WERE IN MINE SINCE THE APPOINTMENT WAS FOR ME, I HAD NO IDEA. HOWEVER Deoid'e HAD RUN OUT AND WAS OVERDUE WHILE BEING DROPPED TO QUICKLY

History and Physical

ExhI

Patient Name:

Karl Olson

Visit Date:

Location:

May 20, 2014

Patient ID:

5654

Provider: Seth P. Cowan - ARNP, ARNP

Sex:

Male

Skagit Family Health Clinic

SEA.

Male

Skagit Family Flediti

Birthdate:

June 23, 1970

916 S 3rd Street

Mount Vernon, WA 982734324

Location Phone:

Location Address:

3603365658

Chief Complaint

discussion

History Of Present Illness

Karl is a 43 year old male who very recently established care at our office. He has a significant history of multiple MVAs resulting in chronic pain (see previous note for detail), which is currently treated with home exercises and narcotic medication. He has already been seen twice in the past two week and admits that today he schedule to talk about his partner's health. She is scheduled with me in two weeks, but is due to run-out of her pain and antiseizure medication. Apparently, she was discharged from her previous provider's care. Karl also states that he would like an open communication between me and his team of providers.

Past Medical History

Back Pain; Concussion; Motor Vehicle Accident

Past Surgical History

Wisdom teeth removal

Medication List

alpha lipoic acid oral; biotin oral; Ester C 1,500mg; Glucosamine Chondroitin oral 1,500/1,200; Hyaluronic Acid oral 100mg; Kyolic lethicin 1,000mg; oxycodone oral tablet 10 mg; Probiotic oral 15 billion cell oral capsule; Sea Aloe 60cc; Super Fruit 60cc; turmeric (bulk) miscellaneous powder 100 %; Vitamin B Complex oral

Allergy List

codeine sulfate; NSAIDS; Tylenol

Family Medical History

Prostate Neoplasm, Malignant

Social History

Active but no formal exercise; Alcohol (Never); Caregiver; Single; Tobacco (Former)

Review of Systems

Constitutional

o Admits: fatigue, sleeping problems

o Denies: change in appetite

Eyes

o Denies: double vision, impaired vision, blurred vision, changes in vision

HENT

Admits : headaches

o Denies: dizziness, nasal discharge, postnasal drip

Cardiovascular

EXHIBIT J (3 PAGES)

PHARMACY RECORDS FROM 2013 THROUGH 2016 FOR Deoid'e WHICH INDICATE AND REVEAL DANGEROUS DENIALS AND REDUCTIONS RIGHT BEFORE THE 5/20/2014 HEARING. DANGEROUS DROPS IN MORPHINE EQUIVALENCIES NOT SUPPORTED BY WA STATE PAIN MANAGEMENT PROTOCOLS. 15, 20 AND 6 DAY GRACE PERIOD REFILLS ALLOTTED BY THE DOCTOR TO ACCOMMODATE PAINS AND AUTHORIZED AND MONITORED BY THE PAHARMACY WHO VERIFIED THIS FROM DR WHITEHEAD. JANUARY 2014 EXPOSES DANGEROUS DROPS IN MEDICATIONS, COMPLETE DEPLETETIONS AND SUDDEN CHANGES TO THE EARLY GRANCE PERIOD RIGHT BEFORE THE 5/20/2014 HEARING EXPOSING Deoid'e TO DANGEROUS WITHDRAWALS AND ACUTE PAINS. Deoid'e WAS DAYS LATE ON MEDICATIONS BY NEARLY 3 DAYS THE DAY OF HEARING ON 5/20/2014 AND IN SHOCK FROM THE DOUBLE LEVELS AND EARLY DROPS THAT WERE SUDDENLY DENIED BY THE SUPERVISORS AT DR WHITEHEADS. ONCE DR WHITEHEAD LOST CONTROL OF HIS PATIENT Deoid'e BECAME ACUTE AND ILL

FAMILY PHARMACY 1213 24th Street, #400 Anacortes, WA 98221

grace + Late -

Rx PROFILES - ABBREVIATED Period 01/01/13 to 09/20/16 Tue Sep 20, 2016

Page PID: 4901890 NPI: 1013922657

(360) 293-2124 Fax: (360) 293-0419

CUNNINGHAM, DEOIDE

Birthdate: 09/08/74

2714 J AVE Anacortes, WA 98221

* Oxy codone DROP NOT pain management specialist. *

(360) 293-4392 grace 6 to 20 DAYS at times. until January 2014 Last Act. Rf OrigDate Drug RL TotQty LstQ Otyl S In Period Doctor (t2367130 01/04/13 OXYCODONE HCL 5 MG/5 ML SOL n 2000 2000 0 S 01/04/13 WHITEHEAD MD, BRENT 2367313 01/24/13 OXYCODONE HCL 5 MG/5 ML SOL 2000 0 S 01/24/13 WHITEHEAD MD, BRENT 02/13/13 OXYCODONE HCL 5 MG/5 ML SOL 2000 0 5 02/13/13 WHITEHEAD MD. BRENT 2367528 2000 OXYCODONE HCL 5 MG/5 ML SOL 0 S 03/05/13 WHITEHEAD MD. BRENT 2367611 03/05/13 2000 2000 OXYCODONE HCL 5 MG/5 ML SOL 0 S 03/26/13 WHITEHEAD MD, BRENT 2367836 03/26/13 2000 FENTANYL 25 MCG/HR PATCH 0 S 04/09/13 WHITEHEAD MD, BRENT 04/09/13 0 2367991 1.0 10 120 WHITEHEAD MD. BRENT 2368032 04/15/13 OXYCODONE HCL 20 MG TABLET 120 0 R 04/15/13 WHITEHEAD MD, BRENT 2368229 05/07/13 FENTANYL 25 MCG/HR PATCH MY 0 R 05/07/13 10 WHITEHEAD MD, BRENT 05/13/13 OXYCODONE HCL 20 MG TABLET 0 R 05/13/13 2368279 120 120 05/13/13 FENTANYL 50 MCG/HR PATCH MY 0 R 05/13/13 WHITEHEAD MD. BRENT 2368280 10 10 2368493 WHITEHEAD MD, BRENT 06/07/13 OXYCODONE HCL 20 MG TABLET 120 0 S 06/07/13 120 WHITEHEAD MD, BRENT FENTANYL 50 MCG/HR PATCH MY 0 S 06/07/13 2368494 06/07/13 10 10 WHITEHEAD MD. BRENT 2368621 06/20/13 FENTANYL 75 MCG/HR PATCH MY 10 0 S 06/20/13 2368768 07/08/13 OXYCODONE HCL 20 MG TARLET 120 120 0 S 07/08/13 WHITEHEAD MD. BRENT 2368797 07/10/13 FENTANYI, SO MCG/HR PATCH MY 10 10 0 R 07/10/13 WHITEHEAD MD. BRENT 2369048 08/08/13 OXYCODONE HCL 20 MG TABLET 120 120 0 S 08/08/13 WHITEHEAD MD, BRENT 2369049 08/08/13 FENTANYL 75 MCG/HR PATCH MY 10 10 0 R 08/08/13 WHITEHEAD MD, BRENT 08/16/13 OXYCODONE HCL 5 MG/5 ML SOL 0 R 08/16/13 WHITEHEAD MD. BRENT 2369120 2000 2000 2369201 09/09/13 FENTANYL 75 MCG/HR PATCH 0 S 09/09/13 WHITEHEAD MD. BRENT 2369361 09/12/13 OXYCODONE HCL 20 MG TABLET 0 S 09/12/13 WHITEHEAD MD. BRENT 120 120 FENTANYL 75 MCG/HR PATCH MY WHITEHEAD MD. BRENT 10/04/13 0 S 10/04/13 2369601 10 7.0 2369600 10/07/13 OXYCODONE HCL 20 MG TABLET 0 S 10/07/13 WHITEHEAD MD, BRENT 120 120 2369795 10/25/13 OXYCODONE HCL 20 MG TABLET 0 S 10/25/13 WHITEHEAD MD. BRENT 120 120 10/28/13 FENTANYL 75 MCG/HR PATCH MY WHITEHEAD MD. BRENT 2369796 0 S 10/28/13 10 10 WHITEHEAD MD, BRENT OXYCODONE HCL 20 MG TABLET 2370019 11/18/13 n 120 120 0 S 11/18/13 11/21/13 FENTANYL 75 MCG/HR PATCH MY 0 S 11/21/13 WHITEHEAD MD, BRENT 2370020 12/10/13 OXYCODONE HCL 20 MG TABLET 0 S 12/10/13 WHITEHEAD MD, BRENT 2370166 120 120 2014 WHITEHEAD MD, BRENT JOINING VI OXYCODONE HCL 20 MG TABLET 2370443 12/26/13 120 120 0 S 12/26/13 W WHITEHEAD MD, BRENT Sudolen 2370666 01/16/14 FENTANYL 75 MCG/HR PATCH MY 0 S 01/16/14 10 10 WHITEHEAD MD, BRENT DIZO! 2370665 01/16/14 OXYCODONE HCL 20 MG TABLET 120 120 0 S 01/16/14 0 S 02/19/14 WHITEHEAD MD, BRENT 2371038 02/19/14 OXYCODONE HCL 20 MG TABLET 120 120 WHITEHEAD MD, BRENT _ 3 2371345 03/19/14 OXYCODONE HCL 20 MG TABLET 0 S 03/19/14 WHITEHEAD MD, BRENT DAYS 2371347 03/19/14 FENTANYL 75 MCG/HR PATCH MY 0 S 03/19/14 1.0 10 WHITEHEAD MD, BRENT OXY caclone 04/18/14 OXYCODONE HCL 20 MG TABLET 0 S 04/18/14 2371691 120 120 WHITEHEAD MD, BRENT 5/20/14 FENTANYL 75 MCG/HR PATCH MY 2371692 04/18/14 10 10 0 R 04/18/14 OXYCODONE HCL 5 MG TABLET M 0 R 05/14/14 SILVER DDS PS, DAVID B 2371965 05/14/14 16 16 Heaving FENTANYL 50 MCG/HR PATCH MY 0 S 05/21/14 WHITEHEAD MD, BRENT 2372059 10 05/21/14 10 WHITEHEAD MD. BRENT 0 R 05/21/14 05/21/14 OXYCODONE HCL 20 MG TABLET 120 120 0 S 06/20/14 COWAN (ARNP), SETH P. 2372413 06/20/14 FENTANYL 50 MCG/HR PATCH MY 0 R 06/20/14 COWAN (ARNP), SETH P. OXYCODONE HCL 20 MG TABLET 120 120 2372414 06/20/14 COWAN (ARNP), SETH P. 07/21/14 FENTANYL 50 MCG/HR PATCH MY 10 10 0 S 07/21/14 2372762 2372763 07/21/14 OXYCODONE HCL 20 MG TABLET 120 120 0 S 07/21/14 COWAN (ARNP), SETH P. COWAN (ARNP), SETH P. 08/22/14 FENTANYL 50 MCG/HR PATCH MY 0 S 08/22/14 2373135 COWAN (ARNP), SETH P. 0 S 08/22/14 2373136 08/22/14 OXYCODONE HCL 20 MG TABLET 120 120 * During Heaving time on 5/20/14* On top ...

**Allring Heaving time on 5/20/14*

**Allring Heaving ti * Sudden DROP and No Med S* 5/21/14= 2013 XZ DAYS out of meds on DATE of Hearing X

+ grace

- Late FAMILY PHARMACY

1213 24th Street, #400 + grace Anacortes, WA 98221

(360) 293-2124 Fax: (360) 293-0419

Rx PROFILES - ABBREVIATED Period 01/01/13 to 09/20/16 Tue Sep 20, 2016

Page 1 PID: 4901890 NPI: 1013922657

CUNNINGHAM, DEOIDE

Birthdate: 09/08/74 ...

2714 J AVE

Anacortes, WA 98221

* Fentany L DROP, NO pain management specialist *

(D.CA) DOD 47		71 - 611 1961.94	-		- ' /		,		Specialist 7.
(360) 293-43	P 6-1	2 DAYS until Jami	10.10	10	2016	1	7.	ast Act.	,
7 .)			-	_					Dantow
RX Nbr		Drug	RE	_	TotQty	LstQ		n Period	
2367130	01/04/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000		1/04/13	WHITEHEAD MD, BRENT
2367313	01/24/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000		1/24/13	WHITEHEAD MD, BRENT
2367528	02/13/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000		2/13/13	WHITEHRAD MD, BRENT
2367611	03/05/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000		3/05/13	WHITEHEAD MD, BRENT
2367836	03/26/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000			WHITEHEAD MD, BRENT
2367991	04/09/13	FENTANYL 25 MCG/HR PATCH	0	0	10	10		4/09/13	WHITEHEAD MD, BRENT
2368032	04/15/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120		4/15/13	WHITEHEAD MD, BRENT
2368229	05/07/13	FENTANYL 25 MCG/HR PATCH MY	0	0	10	10			WHITEHEAD MD, BRENT
2368279	05/13/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	0 R 0	5/13/13	WHITEHEAD MD, BRENT
2368280	05/13/13	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	0 R 0	5/13/13	WHITEHEAD MD, BRENT
2368493	06/07/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	0 8 0	6/07/13	WHITEHEAD MD, BRENT
2368494	06/07/13	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	0 8 0	6/07/13	WHITEHEAD MD, BRENT
2368621	06/20/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	0 5 0	6/20/13	WHITEHEAD MD, BRENT
2368768	07/08/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	0 8 0	7/08/13	WHITEHEAD MD, BRENT
2368797	07/10/13	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	0 R 0	7/10/13	WHITEHEAD MD, BRENT
2369048	08/08/13	OXYCODONE HCL 20 MG TABLET	0	0.	120	120	080	8/08/13	WHITEHEAD MD, BRENT
2369049	08/08/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	0 R 0	8/08/13	WHITEHBAD MD, BRENT
2369120	08/16/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000	0 R 0	8/16/13	WHITEHEAD MD, BRENT
2369201	09/09/13	FENTANYL (75) MCG/HR PATCH	0	0	10	10	0 S 0	9/09/13	WHITEHEAD MD, BRENT
2369361	09/12/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	0 S 0	9/12/13	WHITEHEAD MD, BRENT
2369601	10/04/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	0 S 1	0/04/13	WHITEHEAD MD, BRENT
2369600	10/07/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	0 S 1	0/07/13	WHITEHEAD MD, BRENT
2369795	10/25/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	0 \$ 1	.0/25/13	WHITEHEAD MD, BRENT
2369796	10/28/13	FENTANYL (75) MCG/HR PATCH MY	0	0	10	10	0 S 1	0/28/13	WHITEHEAD MD, BRENT
+ 2370019	11/18/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	0 S 1	1/18/13	WHITEHEAD MD, BRENT January
2370020	11/21/13	FENTANYL (75) MCG/HR PATCH MY	0	٥	10	10		1/21/13	WHITEHEAD MD, BRENT Sudden
2370166	12/10/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120		2/10/13	WHITEHEAD MD, BRENT DOOP
2370443	12/26/13	OXYCODONE HCL 20 MG TABLET	0	. 0	120	120			WHITEHEAD MD, BRENT /
. 2370666	01/16/14	FENTANYL (75) MCG/HR PATCH MY	٥	0	10	10			WHITEHEAD MD, BRENT
2370665	01/16/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120		1/16/14	WHITEHEAD MD, BRENT
332371038	02/19/14	OXYCODONE HCL 20 MG TABLET	0	٥	120	120		2/19/14	WHITEHEAD MD, BRENT
} 2371345	03/19/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120		3/19/14	WHITEHEAD MD, BRENT
2371347	03/19/14	FENTANYL (75) MCG/HR PATCH MY	0	0	10	10		3/19/14	WHITEHEAD MD, BRENT
2371691	04/18/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120		4/18/14	WHITEHEAD MD, BRENT
2371692	04/18/14	FENTANYL (75) MCG/HR PATCH MY	0	٥	10	10		4/18/14	WHITEHEAD MD, BRENT
2371965	05/14/14	OXYCODONE HCL 5 MG TABLET M	0	0	16	16	• .	• •	SILVER DDS PS, DAVID B. HERVIN
·3		PENTANYL (50) MCG/HR PATCH MY		-	10	10			
2372060		OXYCODONE HCL 20 MG TABLET	0	٥	120	120			51-5117
2372413		FENTANYL 50 MCG/HR PATCH MY	a	0	10	10			COWAN (ARNP), SETH P. DIZOP
2372414		OXYCODONE HCL 20 MG TABLET	0	0	120	120			COWAN (ARNP), SETH P. 75 to 50
1		FENTANYL 50 MCG/HR PATCH MY	0	0	120	10		7/21/14	
2372762									COWAN (ARNP), SETH P.
2372763	-	OXYCODONE HCL 20 MG TABLET	0	0	120	120		8/22/14	COWAN (ARNP), SETH P.
2373135	• •	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10 120			COWAN (ARNP), SETH P.
2373136	. ,	OXYCODONE HCL 20 MG TABLET	0	a	120				
	XNO	s Fentany L 2/16/14	thro	<i>u</i> :	3/19,	144	-33	days	·

-54den Halt Eday grace X. NO Fentany L 5/18-5/21/

FAMILY PHARMACY Rx PROFILES - ABBREVIATED 1213 24th Street, #400 Period 01/01/13 to 09/20/16 Anacortes, WA 98221 Tue Sep 20, 2016 (360) 293-2124 Fax: (360) 293-0419

Page 1 PID: 4901890 NPI: 1013922657

CUNNINGHAM, DEOIDE

Birthdate: 09/08/74

2714 J AVE Anacortes, WA 98221

(360) 293-4392

		•					Last Act.
Rx Nbr	OrigDate	Drug_	Rf	RL	TotQty	LstQ	Q QtyL S In Period Doctor
2367130	01/04/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000	
2367313	01/24/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000	0 0 S 01/24/13 WHITEHEAD MD, BRENT
2367528	02/13/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000	0 0 S 02/13/13 WHITEHBAD MD, BRENT
2367611	03/05/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000	0 0 S 03/05/13 WHITEHEAD MD, BRENT
2367836	03/26/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000	
2367991	04/09/13	FENTANYL 25 MCG/HR PATCH	0	0	10	10	
2368032	04/15/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2368229	05/07/13	FENTANYL 25 MCG/HR PATCH MY	0	0	10	10	
2368279	05/13/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2368280	05/13/13	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	
2368493	06/07/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2368494	06/07/13	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	
2368621	06/20/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	
2368768	07/08/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2368797	07/10/13	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	
2369048	08/08/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2369049	08/08/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	
2369120	08/16/13	OXYCODONE HCL 5 MG/5 ML SOL	0	0	2000	2000	
2369201	09/09/13	FENTANYL 75 MCG/HR PATCH	0	0	10	10	
2369361	09/12/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2369601	10/04/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	
2369600	10/07/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2369795	10/25/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2369796	10/28/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	
2370019	11/18/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2370020	11/21/13	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	
2370166	12/10/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2370443	12/26/13	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2370666	01/16/14	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	
2370665	01/16/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2371038	02/19/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2371345	03/19/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2371347	03/19/14	FENTANYL 75 MCG/HR PATCH MY	٥	0	10	10	
2371691	04/18/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2371692	04/18/14	FENTANYL 75 MCG/HR PATCH MY	0	0	10	10	
2371965	05/14/14	OXYCODONE HCL 5 MG TABLET M	0	0	16	16	
2372059	05/21/14	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	
2372060	05/21/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2372413	06/20/14	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	
2372414	06/20/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2372762	07/21/14	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	
2372763	07/21/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
2373135	08/22/14	FENTANYL 50 MCG/HR PATCH MY	0	0	10	10	
2373136	08/22/14	OXYCODONE HCL 20 MG TABLET	0	0	120	120	
	-,,		•	•			

EXHIBIT K (4 PAGES)

- 1. HCA REPRESENTATIVE KELLY CLARK EMAIL DATED 3/15/2013 @ 5:29

 PM TO THE AG AND OTHERS ATTENDING THE HEARING ON 3/18/2013

 ON THIS MATTER WITH HER FAILED ATTACK UPON DR WHITEHEAD

 TO ALLOW AN IN PERSON HEARING APPEARANCE BY Deoid'e.
- 2. HIS CONFIRMATION THAT HE WAS AWARE AND IN SUPPORT OF
 Deoid'e AND HER MEDICAL AND EDUCATIONAL TIME OUT OF STATE
 AND THAT HE STRESSED ANY HEARINGS BY TELEPHONE, THAT
 KARL HAS THE BEST INTEREST AT HEART FOR Deoid'e. 3. THAT HCA
 WAS BEING EXCESSIVE IN THEIR DEMANDS UPON Deoid'e AND THAT
 STRESS WAS DANGEROUS TO Deoid'e.
- 3. THAT GOING FORWARD Deoid'e SHOULD BE ALLOWED TO
 TELEPHONICALLY PARTICIPATE/TESTIFY IN HER HEARINGS ONLY
 BY TELEPHONE AND ATTEND SOME ASSESSMENTS BY TELEPHONE.
 THE EMAILS EXPOSES KELLY CLARKS ERROR THAT SHE WAS NOT
 PREPARED FOR THE HEARING ON 3/18/2013 AND THAT SHE WAS
 SIMPLY GOING TO AVAOID IT BUT COULD NOT DUE TO HER
 PREMATURE FILING OF HER EVIDENCE AND HER ORIGINAL PAN
 DATED 3/4/2013 ON DD CLIENT ELIGIBILITY UNDER CASE 07-2012HCA-0109 WHAT WAS NOT CONTINUED. EXPOSING

- 4. THAT THE ISSUES FOR HEARING ON 3/18/2013 WERE INDEED ABOUT RESIDENCY AND THAT MS CLARK HAD NO CHOICE BUT TO GAIN A CONTINUANCE BEFORE OR AT THE HEARING IN ORDER TO SAVE HER ORIGINAL FILED ACTION WHICE SHE DID NOT. OTHERWISE SHE WOULD HAVE TO LIE AND CONCEAL THE APPEAL.SHE WAS PROVIDED BY OAH ON 3/8/2013 THAT WAS PROPERLY FILED WITH OAH BY NSA NANCY L OLSON ON 3/8/2013 WHO GAVE HER A COPY WITHIN 4 DAYS WAC 388-02-0250(1).
- 5. KELLY AND THE ALJ CONCEALED THE APPEAL IN ORDER TO BUY
 MORE TIME AND FALSELY CLAIM LACK OF JURISTICTION. KELLY
 KNEW SHE HAD FAILED AND THAT THERE WAS NO OTHER WAY
 THAN TO CONCEAL THE APPEAL UNDER OATH.

EXh K pg 1 Hearsay/But Confirms teléphone Havings, stressel.

Original Message	っ	/
From: Clark, Kelly (DSHS/DDD) Sent: Friday, March 15, 2013 5:29	\supset	1151
Sent: Friday, March 15, 2013 5:29	PM /	// 2/

To: Bashford, Jonathon (ATG); Osborn, Christopher (DSHS/DDD); Garza, Norma E (DSHS/DDD)

Cc: Manion, Shannon (DSHS/DDD); Lunsford, Linda (DSHS/DDD); Work, Bruce (ATG); McMillin, Ellen

(DSHS/DDD)

Subject: RE: Cunningham document

Hi all,

My quick notes from my 10 minute conversation with Dr. Whitehead late this afternoon:

I explained to him and his assistant that I took him up on the March 8, 2013 letter's offer to contact him, and had to do so this afternoon because the release expired on Monday, the day of the hearing. Both understood, and he made himself available quite quickly. I explained who I was, and the nature of the hearing on Monday, and he seemed to be aware of it. I also stated that there may be another hearing regarding Deoide's DDD eligibility, that we all were concerned about her losing services or eligibility for the wrong reasons, and that we may need to talk to him further in the future. The two areas I was interested in were what information he had been provided that prompted his letters re Deoide's stress, and what his understanding was about Deoide's Argosy University San Diego situation.

AREAS

He was not sure of how often we need to meet with Deoide; but he thought—and has apparently recently stressed to Karl—than annual assessments in which she was conscious and actively participated in were reasonable. Lexplained that part of our efforts to meet or get information about Deoide's condition was due to Karl preventing access to records and preventing Deoide from communicating at all with DDD staff, even during assessments. Lalso explained that some of the "meetings" were hearings and prehearing conferences that Deoide, through Karl, had requested. Dr White stressed that he advised them that they needed to "work" with us, the at least the "minimum requirements" for communication with DDD should be met.

Regarding his letters about limiting communication or meetings: He stated that he thinks Karl has Deoide's best interests at heart, and stress triggers seizure episodes "although I have not observed this, have only been told....." He acknowledged that he wrote the letters at the request of Karl, and was unsure exactly what DDD was requesting in terms of meetings or contact, but he also referenced Norma's letter last summer laying out what we expected in terms of information and cooperation, and he thought that was a bit excessive. However, he stated that he thought that her active participation in

assessments AND her testifying at her own hearings by telephone would be reasonable.

Telephore

Regarding out of state periods: He stated that he was aware that they were apparently trying to find "healing clinics" somewhere in "the south," but and the records reflect a letter from Dr. Whitehead about this in vague terms (and as Jon notes, they were back for a visit to Dr. Whitehead within a week). He acknowledged his reference letter to Argosy University in San Diego, and stated that he knew she had been in San Diego taking classes there but was unsure how often, and thought some classes she took were online.

For the most part, he stressed that he believed they should cooperate with at least the "minimum Rerequired," that he believed they needed to cooperate more with us, and that he thinks they will be more cooperative soing forward.

Hearsay. 3/15/2013 5:29 pm 3/18/13 ±xh K Monday Hearing

I have discussed this with Jon this afternoon, and at Monday's hearing I-may-offer rebuttal testimony. regarding my conversation with Dr. Whitehead, depending on how Karl testifies. The purpose would be to establish that Dr. Whitehead's letters were in response to Karl's request, and that he was not fully aware of the nature of the "frequent meetings" he referenced, and that he believes it is not unreasonable for her to participate in her own assessments and hearings (by telephone). It would also be for the purpose of showing that he had not actually observed her having any seizure episodes due tostress, but that was what they had told him. We are going to avoid the issue of residency until we can engage in more discovery for the eligibility hearing.

This is why kelly lied At the hearing on 3/18/13,

Kelly A. Clark

Administrative Hearings Coordinator

Department of Social & Health Services Developmental Disabilities Administration -

M/S 46-6

1700 Cherry Street, Suite 200

Seattle, WA 98122

Tel: (206) 568-5823 Fax: (206) 720-3334

Region 2 South She filed her PAN 3/4/13 0109 and was denied a Continuence.

DUV appeal was tiled 3/8/13

after failing to get the Dr to allow an in person heaving, This document exposes Kelly Clarks scheme to work around her factions to secure a continuance. The dr. Confronted He excessive demands, were demanded and stressed that a felephone hearing lanessment would be better.

Kelly gives away her whole plan by stating in her last line, "avoid residency" ("more disivery)

But that was too late, she already filed the PAN dated 3/4/13 under 0109. NO Cont. She then level at the hearing

Ixh K

Page 1 hearsay/ but confirms telephone hearings that Dr stressed. And temporary out of state.

Date of call, 3/15/2013 the Friday before the Monday 3/18/2013 hearing.

Two issues

- 1. Absence Temporary from WA /residency/ 3/4/2013 PAN on DD client eligibility
- Telephone hearings stressed by doctor because of issues from stress that made it very hard on Deoid'e for hearings and assessments.

Summary on page

This is why Kelly Clark Lied at the hearing on 3/18/2013 and concealed our appeal that was filed properly, she filed her PAN dated 3/4/2013 with OAH on DD client eligibility under docket 07-2012-HCA-0109 here and was denied all her continuance requests.our appeal was filed properly on 3/8/2013 by OAH.

After failing to get the Dr to allow an in person hearing, this document exposes Kelly Clark (HCA REP) scheme to work around her failures to secure any continuances. The doctor confronted HCA/her on their excessive demands, he (doctor) demanded and stressed that a telephone hearing/assessment would be better. Kelly gives away her whole plan by stating in her last line that and I quote" WE ARE GOING TO AVOID THE ISSUE OF RESIDENCY UNTIL WE CAN ENGAUGE IN MORE DISCOVERY FOR THE ELIGIBILITY HEARING" But she could not as she had already committed to hearing for efficiency and by filing her PAN on DD client eligibility prior to our appeal arriving. This was why

Kelly and the ALJ concealed the appeal on 3/18/2013 because we denied her continuances and she needed MORE TIME FOR DISCOVERY.

You cannot lie under oath at a hearing and certainly not about evidence.

It was too late, she already filed her PAN dated 3/4/2013 under 07-2012-HCA-0109 and she was never granted a continuance. She then lied under oath numerous times at the hearing which MR Duncan revealed was made under sworn testimony.

However, anytime out of state is determined to be temporary or should have been. Exh A. HCA review for accuracy conducted in 2017.

OFFICE RECEPTIONIST, CLERK

From: OFFICE RECEPTIONIST, CLERK

Sent: Wednesday, March 21, 2018 11:36 AM

To: 'i o'; Woodrow, Becky

Subject: RE: DEOIDE CUNNINGHAM 95346-5 email file? another ER motion I would have sent

it sooner but I had the flu.

Received 3/21/18.

Supreme Court Clerk's Office

NOTE: The Supreme Court and the Court of Appeals now have a web portal to use for filing documents. <u>All</u> electronic filing of documents in the Supreme Court should be through the web portal, not by e-mail. Although we have accepted your attached document(s) for filing, future documents sent by e-mail may be rejected for filing. If you have not already registered to use the web portal, here is a link to the website for information about the portal and how to register: https://ac.courts.wa.gov/

From: i o [mailto:Karl69Olson@hotmail.com] Sent: Wednesday, March 21, 2018 11:21 AM

To: Woodrow, Becky <Becky.Woodrow@courts.wa.gov>; OFFICE RECEPTIONIST, CLERK <SUPREME@COURTS.WA.GOV> **Subject:** DEOIDE CUNNINGHAM 95346-5 email file? another ER motion I would have sent it sooner but I had the flu.

hello. I would like to try this if we may, we have a shop in town that can scan then I can email. I am unsure how to do it.

360 420 8065 thank you.

karl olson,

OFFICE RECEPTIONIST, CLERK

From:

OFFICE RECEPTIONIST, CLERK

Sent:

Wednesday, March 21, 2018 11:35 AM

To:

'i o'

Subject:

RE: DEOIDE CUNNINGHAM 95346-5 email file? another ER motion I would have sent

it sooner but I had the flu.

We will accept for filing the most recent filing titled "ER 2 MARCH". We will disregard "Emergency Motion 2".

Thank you,

Supreme Court Clerk's Office

From: i o [mailto:Karl69Olson@hotmail.com] Sent: Wednesday, March 21, 2018 11:31 AM

To: OFFICE RECEPTIONIST, CLERK <SUPREME@COURTS.WA.GOV>

Subject: Re: DEOIDE CUNNINGHAM 95346-5 email file? another ER motion I would have sent it sooner but I had the flu.

yes they are.

From: OFFICE RECEPTIONIST, CLERK < SUPREME@COURTS.WA.GOV >

Sent: Wednesday, March 21, 2018 11:28 AM

To: i o; Woodrow, Becky

Subject: RE: DEOIDE CUNNINGHAM 95346-5 email file? another ER motion I would have sent it sooner but I had the flu.

Mr. Olson,

We will accept your filing. We received two – one at 11:07 titled "Emergency Motion 2" and the other at 11:21 titled "ER 2 MARCH". Are these the same filing? Please advise.

Supreme Court Clerk's Office

From: i o [mailto:Karl69Olson@hotmail.com]
Sent: Wednesday, March 21, 2018 11:21 AM

To: Woodrow, Becky <<u>Becky.Woodrow@courts.wa.gov</u>>; OFFICE RECEPTIONIST, CLERK <<u>SUPREME@COURTS.WA.GOV</u>>
Subject: DEOIDE CUNNINGHAM 95346-5 email file? another ER motion I would have sent it sooner but I had the flu.

hello. I would like to try this if we may, we have a shop in town that can scan then I can email. I am unsure how to do it.

360 420 8065 thank you.

karl olson,