

FALSEHOODS are highlighted in YELLOW

**Elmira Psychiatric Center
Application for Change in Status/Privileges
Clinical Summary**

Kevin Saunders

April 14, 2006

DOB: 5/1/56

CPL 330.20

Consecutive No.: 01-51-81

Nature of Facility Request: The Elmira Psychiatric Center is seeking retention.√

Identifying Information: Kevin Saunders is a 48 year old,√ divorced,√ Caucasian^x male , who was admitted to the Elmira Psychiatric Center on 9/14/04 from the Rochester Regional Forensic Unit (RRFU).√ He was admitted to RRFU on 5/23/03 pursuant to 330.20 Recommitment Order issued by the Honorable John Rowley, Tompkins County Judge, on 5/22/03.√

Mr. Saunders is CPL 330.20 status, Track III.√

Initial Facility of CPL: Mr. Saunders was court ordered to Rochester Regional Forensic Unit on January 30, 1998.√ He was discharged from RRFU on 3/31/98 CPL status 330.20, Track III.√

Subsequent Facilities: Prior to his admission to the Elmira Psychiatric Center, Mr. Saunders, had been at RRFU since 5/23/03.√ He was transferred to RRFU after a short stay^{at} the Elmira Psychiatric Center (EPC).√ He was brought to the Cayuga Medical Center by his roommate^x Alice Richardson.√

TYP0 1 -
"at"

During his stay at EPC, Mr. Saunders, assaulted a staff member.^x This assault^x took place on 4/6/03.√ Patient was placed in 4 point restraint√ following the assault^x and received stat medication.√ He continued to escalate^x and needed^x to be place in 5 point restraint.√ Due to his assaultive behavior,^x the treating physician filed a request for recommitment to a forensic facility.√ The patient was transferred to RRFU.√

Instant Offense: Mr. Saunders instant offense consisted of Burglary, 2nd degree,√ Arson, 3rd degree-a class C Felony,√ Criminal Mischief,√ 2nd degree and Criminal Contempt, 1st degree.√

On the morning of 2/6/97, Mr. Saunders drove to the trailer park where his estranged ex-girlfriend^x had been living. According to the patient's statement, as well as the police report, he was dressed in a woman's evening dress,^x stockings√ and high heels.√ He was in possession of four kitchen knives, including a meat cleaver.√ Patient reports that a few days prior to the offense he read the book *The Silence of The Lambs*√ and began making connections between his life, his ex-girlfriend's^x life and some of the characters in the book.√ He came to the conclusion that his girlfriend,^x Susan, was a character from the book (Clarice).^x **He was also convinced that the FBI was after him.**^x Mr. Saunders was under the impression that Hannibal Lector (another character from the book who was a cannibal, serial killer and psychiatrist) was sending him messages

sp. LECTER

through the radio.^x Some of these messages were of command nature[✓] ordering Mr. Saunders to dance[✓] or **break into the trailer.**^x

He stated that the night before the offense he had been up all night dancing[✓] and that he put on Susan's clothing.[✓] He stated that he felt afraid that someone might be coming to his house to kill him.[✓] At that point he states he got in his car and drove to Susan's trailer.[✓] He states that he took the knives with him to protect himself.[✓] He stated that he wanted to see Susan and had not intention of hurting her.[✓] When he arrived at her trailer he saw that her car was there[✓] and he thought she was home.^x He proceeded to break into her trailer through a window.[✓] He then picked up lighter fluid^x that he found in her trailer^x and then set the trailer on fire using his own lighter.[✓]

TYPO 2 -
"stated"

TYPO 3 -
"had no"

He left the scene in his own car but was stopped less than a mile away by the state police[✓] who had been notified by a neighbor that he was at the trailer.[✓] **Patient told the state police that he was receiving messages through the radio telling him to kidnap his estranged girlfriend, Susan Hamann. He stated that he brought the knives with him to use in his attempt to kidnap her.** He stated that he felt his life was in danger[✓] if he did not follow the commands^x he was hearing through the radio.[✓] It should be noted that Mr. Saunders' ex-girlfriend^x had an order of protection against him at the time of the offense.[✓] She had requested^x the order of protection 1 month before the offense because she feared for her safety. She reports that **he physically assaulted and raped her around Christmas 1996.**[✓]

Risk Factors: Mr. Saunders was being prescribed Prozac[✓] and Trazodone[✓] by Dr. Singh^x at the time of the offense. **He admits to not taking his medications as prescribed because he did not agree with his diagnosis^x and felt the medications were causing him to have unpleasant side effects.**[✓] He felt that he had a neurological disorder known as Guillain-Barre Syndrome.[✓]

Patient admits to smoking Marijuana on a daily basis[✓] and also was drinking alcohol at the time of the offense.^x **He has a history of alcohol dependence.**^x

Mr. Saunders admits to having extreme difficulty with interpersonal relationships.^x He has narcissistic and borderline features which make it difficult for him to engage in meaningful relationships with others.^x He also believes that he has gender identity disorder[✓] and reports attractions to both males and females.[✓] Prior to the offense his girlfriend had ended their relationship^x which was very upsetting to Mr. Saunders.^x

Mr. Saunders had been physically^x and sexually^x assaultive^x in the past to his ex-girlfriend.^x Reports indicate that he was also physically assaultive^x towards his first wife, Ann Marie Whelan, from whom he is divorced.[✓]

Since December of 2005 to the present time Mr. Saunders has been aware of risk factors related to his bi-polar disorder and his past substance abuse history.[✓] He is able to share the depth of his pathology^x within psychotherapy groups. He has verbalized his need for ongoing treatment[✓] for both psychotherapy[✓] and psychiatric treatment[✓] which includes psychotropic medications.[✓] He has been in complete remission of his psychotic symptoms[✓] since **December 2004^x** as indicated in his Treatment Plan.

MediPot
for PTSD

April 7 2003 - POISONED using PCP 4/1/2004 - SIX DAYS

Danger Signs: According to information from Tompkins County Mental Health, where he has received outpatient services in the past, when **decompensated** he suffers from auditory hallucinations, paranoid and persecutory delusions and preoccupation with physical health (CPL 330.20 Quarterly Monitoring Report dated 1/31/02 by Linda Riley, CSW-R). **He also becomes physically assaultive when not on medication.**

Since December of 2005 to the present time Mr. Saunders is aware of behaviors which would indicate for him that he may be decompensating. These behaviors include agitation, loss of appetite, insomnia, and a feeling of being watched. His safety plan is to notify the facility, specifically the social worker, during business hours from 8:00 a.m. to 4:30 p.m. (Monday - Friday), if he is experiencing any of these symptoms. During off hours, Mr. Saunders may contact the unit staff or the Safety Office and will have their numbers. He will also have access to a working phone. Mr. Saunders will know when and where AA meetings are held in his community and will be able to access his AA sponsor for needed support. Mr. Saunders is also around his roommate, Ms. Richardson, and she is aware of these symptoms also and will be able to assist Mr. Saunders if need be. In addition, she is willing to call the facility to report any concerns.

Victim Profile: Relationship based. Ex-wife and Ex-girlfriend.

Type of Weapon: Mr. Saunders was carrying several knives with him at the time of the offense however he did not use these knives in any way during the offense. There is no history of Mr. Saunders collecting weapons. He used lighter fluid and a lighter to start the fire that destroyed his ex-girlfriend's trailer.

Medical History: Mr. Saunders had indicated in the past that he believes that he has a neurological disorder such as **Teshwin Syndrome** or Guillain-Barre Syndrome. He was seen by a neurologist, Dr. Stackman, who did not agree with his interpretation of his situation. **Dr. Stackman diagnosed him with alcohol dependence.** He has a history of pseudo seizures.

GESCHWIND Syndrome

Psychiatric History: Mr. Saunders has a long history of emotional difficulties.

He reports that he first received treatment **for moderate symptoms of depression in 1979** while attending graduate school at Cornell University. He attended 3 sessions at Family and Children Services in Ithaca, NY.

Patient reports receiving services again from Family and Children Services in 1992 upon being referred through the Cornell EAP program where he was employed. He states he attended 12 sessions with Ellen Stotz from 1/9/92 to 6/11/92. He was placed on administrative leave from Cornell University.

PAID

He was seen by Ms. Micki Goldstein in May of 1993 for marital counseling with is former wife, Ann Marie Whelan.

his

TYPO 4 -
"his"

From 5/17/93-1/31/94 he was seen by Anna Matusiewicz, M.D. for depression, marital/divorce

issues[✓] and possible exposure to HIV[✓]. He states he attended approximately 17 sessions with her.[✓]

The precipitant to him seeking therapy was that **Mr. Saunders reports that in February of 1993 that he was raped by a male acquaintance of his wife.** He admits that he and his wife had an agreement for an "open marriage" where both of them were free to participate in sexual relationships outside of the marriage. He reports that the person who raped him had been sexually involved with his wife. **Mr. Saunders had previous encounters with males.** Mr. *menage à trois* Saunders became concerned that he may have contracted HIV as a result of the rape. He was *with AnneMarie* also concerned for his wife's health as she had been involved with this same man. He sought counseling to deal with his anxiety surrounding this situation.[✓]

Dr. Matusiewicz offered him a trial of Lithium. He declined the medication[✓] but continued with psychotherapy.[✓] He terminated therapy when he felt better[✓] and after testing for HIV was negative.^{x✓} Dr. Matusiewicz felt Mr. Saunders suffered from an affective disorder but stated it was hard to determine due to his cannabis use.[✓] During this time, **Mr. Saunders, admitted to episodes of hitting his wife** when he was trying to taper his use of marijuana.^x

From 5/96 to 1/97 Mr. Saunders was seen for 29 sessions by Amari Meader, MSW at Family and Children Services.[✓] He sought counseling for "relationship issues".[✓] **His case was eventually terminated because he refused to stop using cannabis.** *see below* He was seen again during January of 1997 by Dr. Singh^x and was put on Trazodone and Prozac.[✓] **Later that month he stopped both medications** as he felt the Trazodone was causing panic like symptoms.[✓] **He continued to smoke marijuana.** *I declined Amari Meader's demand that I spend a month in an inpatient drug treatment program operated by the Alcoholism Council of Tompkins County.* Mr. Saunders was charged with a DWI on 12/22/96[✓] and reported being under stress as a result of this.[✓] He presented to the Cayuga Medical Center ER on 1/11/97 at 5:00 AM[✓] with reported heart palpitations,[✓] chills[✓] and shortness of breath.[✓] *> TRAZODONE*

On 2/6/97 Mr. Saunders was arrested on the charges listed in the Instant Offense.[✓] He was released on bail of \$50,000.00 on 3/20/97 posted by his mother.[✓] Mr. Saunders was examined by Dr. Brink on 4/8/97[✓] and Dr. LeVerrier on 4/11/97[✓] in regards of his mental capacity to proceed with the trial. On 6/14/97 he was evaluated by Norman J. Lesswing, Ph.D.^{✓x} He received Not Responsible By Reason of Mental Disease by plea on 6/28/97 in the court of Judge William C. Barrett, county court judge of Tompkins County.[✓] A CPL 330.20 examination was ordered on 8/4/97.[✓] Patient remained at RRFU from 1/30/98-3/31/98 for dangerousness examination.[✓] Both examiners (Dr. Singh[✓] and Dr. Kennedy[✓]) concluded that at that time Mr. Saunders did not suffer from a dangerous mental disorder.^{✓x} **AND* DID NOT SUFFER FROM A MENTAL ILLNESS.* *Where's Dr. Povinelli, PROSECUTION Expert?*

The Order of Conditions was issued and Mr. Saunders was ordered to attend ^{an} outpatient mental health treatment program at Tompkins County Mental Health Center.[✓] He was seen there by Linda Riley, CSW from May of 1998^x to May of 2002.[✓] His treatment was then transferred to the EPC outpatient clinic at the request of the commissioner of mental health for Tompkins County, Anthony B. Deluca.[✓] He requested the transfer due to ongoing non-compliance with the order of conditions^x (ongoing use of cannabis[✓] and refusal to comply with urine toxicology *TYPO 5 - "an"*

screens).[✓]

He was hospitalized at Cayuga Medical Center on 4/27/02[✓] for psychotic decompensation.^x He remained in the hospital until 5/2/02.[✓] He stated during this admission that he was the reincarnation of Adolf Hitler and that he had "a mission".^x He was discharged on no medications as he refused to take them.[✓] The MISSION was to go to the hospital!

Mr. Saunders did attend his appointments at the EPC outpatient clinic, starting in May of 2002,[✓] but he was non-compliant with treatment^x and refused to take medication.[✓] He was seeing both Dr. Belsare^x and Janet Stevens, CSW.[✓] He continually refused to accept education regarding his illness.^x He also continued to smoke marijuana.[✓]

For "treatment" read ABUSE.

On 4/4/03 Mr. Saunders was admitted to Cayuga Medical Center.[✓] He was brought there by his roommate^x Alice Richardson.[✓] She reports that he had not been eating[✓] or sleeping[✓] and that he was becoming increasingly more bizarre.[✓] He had been running around outside naked[✓] when there was still snow on the ground.[✓] She also reported that he had become loud[✓] and threatening^x towards her and that she feared for her safety.[✓] He was transferred by ambulance to Elmira Psychiatric Center.[✓]

ALICE H. RICHARDSON LPN: POISONER AND *PARASITE* - PCP II

While at EPC he physically assaulted at staff person on 4/6/03.[✓] He was in both 4 point and 5 point restraints[✓] and required stat medications to calm down.^x The treatment team requested that the patient be transferred to RRFU based on his CPL status,[✓] ongoing noncompliance[✓] and assaultive behavior.^x

TYPO 6 -
"a"

Patient was ordered by the Honorable John Rowley of Tompkins County to be transferred to RRFU on 5/22/03.[✓] He was admitted to RRFU on 5/23/03.[✓] He remained there until he was transferred back to EPC on 9/14/04.[✓]

During his stay at RRFU, Mr. Saunders, condition improved significantly.^x He was started on an antipsychotic medication, Risperdal Consta,^x which is an injectable medication.[✓] Initially, Mr. Saunders refused to take medication[✓] but when Dr. Guttmacher explained to him that they would seek treatment over objection^x he agreed to begin the medication.[✓] He was started on medication on 8/29/03.[✓] He is currently compliant with medications[✓] and has gained some insight into his illness[✓] and the need for ongoing treatment.[✓]

While at RRFU he did participate in treatment[✓] by attending groups[✓] and meeting with his team individually.[✓] He gained most insight in regards to his marijuana use.^x Through participation in MICA group he was able to understand how smoking marijuana affected his mental health.^x He was able to state that he should refrain from using marijuana in the future.[✓] He maintained appropriate interactions with both staff and peers.[✓] He was granted Level 3 privileges which is the highest level of privileges at RRFU.[✓] Patient was later granted escorted furloughs to the community on 2/17/04.[✓]

TYPO 7 -
"the"

Since being admitted to the adult services unit at EPC on 9/14/04[✓] he has been pleasant[✓] and cooperative[✓] with all aspects of treatment.^x He is attending MICA[✓] and psychotherapy[✓] as well as

"PLEASANT AND COOPERATIVE" IN ALL RESPECTS

other therapeutic and recreational groups. Mr. Saunders' treatment team has provided him with education regarding his mental illness. He has been receptive to teaching by staff as evidenced by his verbal interactions, use of positive coping skills, participation, compliancy with medications, and staff observations. He is quiet but does interact appropriately with staff and peers. He regularly goes out with staff in the community. His interpersonal relationship skills have greatly improved. He is able to initiate and engage in social conversations with others.

Mr. Saunders acknowledges he has a mental illness and is in need of on-going psychiatric treatment. He has verbalized his willingness to comply with outpatient mental health treatment when discharged from EPC. Furthermore, he recognizes he has a substance abuse issue and is accepting of substance abuse treatment both inpatient and when discharged. He has demonstrated his commitment to recovery as evidenced by his participation in treatment and discharge planning.

From December 2005 to the present Mr. Saunders continues to attend all psychotherapy groups and the Art Therapy and Addictions Group. In addition, he attends AA and a Rehabilitation Readiness Group. In all groups, it is reported that Mr. Saunders is an engaged and empathetic participant.

Substance/Alcohol use/abuse History: Mr. Saunders has a history of both cannabis and alcohol abuse. He states that he began smoking marijuana at the age of 21. He admits to daily use in the past and was not able to accept education regarding the negative impact cannabis use had on his mental status. He felt that his marijuana use was an appropriate way to treat his physical and neurological symptoms. Mr. Saunders was charged with a DWI in 1996 but denied his alcohol use was a problem. He does participate in MICA group here at EPC and did while he was at RRFU as well. He did make a verbal commitment to himself and his treatment team to attend outpatient substance abuse treatment when he is discharged. Mr. Saunders stated he is willing to go for urine drug screens and breathalyser screens after discharged if he is asked to do so. He was non-compliant with drug testing as an outpatient which was required in his order of conditions. PROPAGANDA is not "education" for a 100% legit medical marijuana user. The DWI on 12/22/96 was the result of being given a spiked drink. <<<

Patient's Current Perspective:

Patient's verbatim written report: To give my perspective on my progress in managing my illness, I feel that I am ready to resume life in the community. I'm fully committed to taking medications to control my bi-polar disorder and monitoring my emotional and mental state to detect any symptoms that might indicate another episode of mania is coming on, and to contact my psychiatrist when this occurs. I'm also committed to remaining drug and alcohol free and I'm participating in AA to help in obtaining supports for a sober lifestyle. It has been almost three years since my brief psychosis in April 2003 and I look forward to being able to resume active work in my own software business where my inability to release upgrades to my software have had a negative impact on sales. I need to be able to return to working life in order to care for my house and contribute to my daughter's education. She will soon be entering college and I want to be able to offer her adequate support for her educational goals.

Current Privilege Level: Mr. Saunders currently has level 2, 3, and 4 privileges. ✓ He was granted escorted off-grounds furloughs in February of 2005. ✓ Staff take him out for individual day passes one to two times per week. ✓ The day passes have consisted of visiting museums, taking care of personal banking, checking on his home, his self-operated business, and attending AA groups. ✓ Mr. Saunders has been fully cooperative during escorted furloughs with staff. ✓ Staff reports indicate that these furloughs occur without incident, and have gone well. Mr. Saunders has made good use of his time while on his escorted furloughs. ✓ Recently, he was able to go to the Department of Motor Vehicles to obtain his license, ✓ and to Barnes and Noble bookstore to research computer information to enhance his business. ✗ The off-grounds furloughs have given Mr. Saunders the opportunity to establish a support system, ✗ participate in healthy recreational activities, ✓ and increase positive social interactions. ✗ In addition, he is able to prepare for his eventual return into the community. ✓

Risk Management: Mr. Saunders has been cooperative ✓ and compliant ✓ with all aspects of treatment since the time of admission, including medication. ✓ He has not been threatening or assaultive. ✓ He is considered low risk for elopement as he is agreeable to his current course of treatment. ✓ If Mr. Saunders remains compliant with medication ✓ and treatment the team feels that he is low risk for re-offending. ✓ <<<

Mr. Saunders is aware of de-stabilizers he may be exposed to in the community such as the stress of activities of daily living, ✗ financial problems, ✗ drugs, ✗ alcohol, ✗ and contact with high-risk people ✗ in the community. To prevent a relapse Mr. Saunders and his treatment team have developed a safety plan. ✓ The patient does have support from peers in the community. ✓ He is willing to engage in outpatient mental health ✓ and substance abuse treatment programs ✓ as recommended. AA meetings are available in the community in which he will reside. ✓ In addition, Mr. Saunders is willing to submit to random drug screens. ✓ Mr. Saunders will return to his own home. ✓ He is willing to accept an increase in professional supervision such as intensive case management services. ✓ He is self-employed as a computer software programmer. ✗ ✓

Pres. DATABASEAST INC and AUTHOR OF COMET, dataComet, and dataComet-Secure
Mr. Saunders has been able to maintain his business while receiving inpatient psychiatric services for over two years. ✗

Since December 2005 to the present Mr. Saunders continues to present as a low risk for elopement. ✓ He has demonstrated this by cooperating fully with escorted furloughs in the community in which he was with one staff person. ✓ Mr. Saunders is in agreement to his treatment and continues to cooperate with all aspects of treatment in and out of the facility. ✓ He has not been assaultive or threatening as stated previously since April 2003 ✓ and he has been medication compliant since August of 2003. ✓ <<<

Progress and/or Setbacks: Mr. Saunders has made significant progress in regards to improving his insight and judgement. ✗ His progress is measured by his self report, staff observations, participation in assigned groups and treatment planning. ✓ He is accepting of his mental illness ✓ and substance abuse issue. ✗ He has been compliant with treatment and medications since August of 2003. ✓ He has not been assaultive or threatening since April of 2003. ✓ <<<

Since December 2005 to the present Mr. Saunders has made progress while out on escorted furloughs by visiting his home and house mate, Ms. Richardson, who keeps Mr. Saunders informed on personal matters. He was also able to fix his fax machine while home which he uses for his computer software business.

Mr. Saunders went to the Department of Motor Vehicles and got his driver's license. He also filled out financial aid paperwork on behalf of his teenage daughter and made out his tax application. When he was at Barnes and Noble he researched computer books on web pages to enhance his software business. He also wants to look for a job when he is out in the community to help supplement his income. He has contacted the Social Security Administration to see if he could qualify for Social Security Disability in order to have resources to pay for his medications and his psychiatric and physical health treatment. According to staff, he has been more open and has initiated conversations with both staff and peers. Mr. Saunders would also like to find an AA or NA sponsor in the community to help him to maintain his sobriety while out in the community.

In conclusion, Mr. Saunders has verbalized an understanding of his illness. He sees the need to continue to take psychotropic medications to address his bi-polar disorder and to maintain his emotional and psychological stability. He states that he does not want to jeopardize himself or others in the community and is remorseful about his prior offense. He accepts full responsibility for his actions regarding the offense and he is intent on making sure that he does not re-offend by continuing psychiatric treatment and submitting to random drug screens. He also indicates that he will participate in either an AA or NA group in his area. In addition, he has identified the warning signs that would alert him that he might be decompensating. These behaviors include agitation, sleeplessness, loss of appetite, and thoughts that others are watching him. He continues to notice the benefits of being medication compliant and wishes to maintain his current state of well being. Mr. Saunders is also looking forward to resuming life back in the community and has a number of goals. These goals include seeing his daughter graduate high school, supporting his daughter's academic goals, re-engaging in his computer business, and performing home repairs and upkeep.

The PEN 40.15 plea is "NOT Responsible by Reason of Mental Disease or Defect," not GUILTY! mCPP, the active metabolite of Trazodone, is an anxiogenic HALLUCINOGEN! THEIR FAULT!

Current Diagnosis:

Axis I	296.44 Bipolar I Disorder, Recent Episode Manic	x
	305.00 History of Cannabis Abuse	x
Axis II	301.90 Personality Disorder NOS	√
Axis III	History of Hypertension, left shoulder pain & numbness of upper arm	√ ARTHRITIS
Axis IV	Interaction with Legal System	√
Axis V	Present GAF60. Past GAF 30.	

Current Medications: Ativan 0.5 Mg PO QHS and Risperdal Consta 25 MG IM every 2 weeks. ✓

Recommendations: The team is requesting retention^x so that Mr. Saunders may continue to work on his treatment goals in preparation for his eventual discharge into the community. <<<

Colleen Larrison, SWI
Colleen Larrison, SWI

Savithri Satti MD
Dr. S. Satti, Psychiatrist 1

d:03-10-06 cl/t: 03-10-06 jej

7 Typos = 1 per page

25+40+45+45+33+29+1 = 218 ✓ TRUE

22+16+18+14+14+12+1 = 97 x FALSE

218+97 = 315 TOTAL ASSERTIONS

218/315 = .69 ==> 69% Correct - FAIL

52 Outright FALSEHOODS - PERJURY.

I call LIBEL and PSYCHOLOGICAL and PHYSICAL Torture -
by demanding my acquiescence in "treatment" with
"anti-psychotic drugs" when I was NOT psychotic.

- Rosie-Anne Quvus aka bonze blayk!

August 11 2020

AFFIDAVIT

IN THE MATTER OF
KEVIN SAUNDERS

STATE OF NEW YORK
COUNTY OF TOMPKINS

Savithiri Satti, M.D. being duly sworn, deposes and says:

1. I am a psychiatrist duly licensed to practice in the state of New York.
2. I currently hold the position of Psychiatrist I at the Elmira Psychiatric Center.
3. I submit this affidavit in support of the Commissioner's application for retention for the above-referenced patient, who resides at the Elmira Psychiatric Center, 100 Washington Street, Elmira, New York 14901.
4. I am familiar with this patient in that I have examined the patient on 18 occasions since September 14, 2004 in the capacity of treating psychiatrist.
5. It is my opinion that the patient's clinical diagnosis at this time is:

AXIS I: (Clinical syndromes, conditions attributable to mental disorder that are the focus of attention or treatment): Bipolar Type 1, recent episode manic with psychotic features, mod congruent in partial remission; Cannabis dependence in remission; alcohol abuse in remission due to readmission; gender identity - adult with transgender issues.

AXIS II: 296.44 Bipolar/Disorder, Recent episode Manic
305.00 History of cannabis abuse
301.90 Personality Disorder, NOS

AXIS III: History of hypertension, left shoulder pain and numbness of upper arm

AXIS IV: Interaction with legal system.

AXIS V: GAF current 60; past year 30

6. A detailed analysis of the patient's condition, upon which I base this opinion is set forth in the report attached hereto.
7. It is further my opinion that at this time the patient should be granted a retention order.
8. For the above-stated reasons, I respectfully request that the Court grant the Commissioner's application for retention for patient Kevin Saunders.

Savithri Satti M.D.

Savithri Satti, M.D.
Psychiatrist I

Sworn to before me this 30th
day of March, 2006

Janice E. Dufraen
Notary Public

JANICE E. DUFRAIN
Notary Public, State of New York
Chemung County No. 01DU6008864
Commission Expires June 15, 2006

AFFIDAVIT

IN THE MATTER OF
KEVIN SAUNDERS

STATE OF NEW YORK
COUNTY OF TOMPKINS

Savithri Satti, M.D. being duly sworn, deposes and says:

1. I am a psychiatrist duly licensed to practice in the state of New York.
2. I currently hold the position of Psychiatrist I at the Elmira Psychiatric Center.
3. I submit this affidavit in support of the Commissioner's application for unescorted furloughs for the above-referenced patient, who resides at the Elmira Psychiatric Center, 100 Washington Street, Elmira, New York 14901.
4. I am familiar with this patient in that I have examined the patient on 36 occasions since September 14, 2004 in the capacity of treating psychiatrist.
5. It is my opinion that the patient's clinical diagnosis at this time is:

AXIS I: (Clinical syndromes, conditions attributable to mental disorder that are the focus of attention or treatment): Bipolar Type 1, recent episode manic with psychotic features, mod congruent in partial remission; Cannabis dependence in remission; alcohol abuse in remission due to readmission; gender identity - adult with transgender issues.

AXIS II: 296.44 Bipolar/Disorder, Recent episode Manic
305.00 History of cannabis abuse
301.90 Personality Disorder, NOS

AXIS III: History of hypertension, left shoulder pain and numbness of upper arm

AXIS IV: Interaction with legal system.

AXIS V: GAF current 60; past year 30

6. A detailed analysis of the patient's condition, upon which I base this opinion is set forth in the report attached hereto.
7. It is further my opinion that at this time the patient should be granted unescorted furloughs.
8. For the above-stated reasons, I respectfully request that the Court grant the Commissioner's application for unescorted furloughs for patient Kevin Saunders.

Savithri Satti MD

Savithri Satti, M.D.
Psychiatrist I

Sworn to before me this 27th

day of April, 2006

Elizabeth A. Crou

Notary Public

ELIZABETH A. HESS *Crou*
Notary Public, State of New York
Chemung County No. 01HE6008699
Commission Expires June 15, 20 10