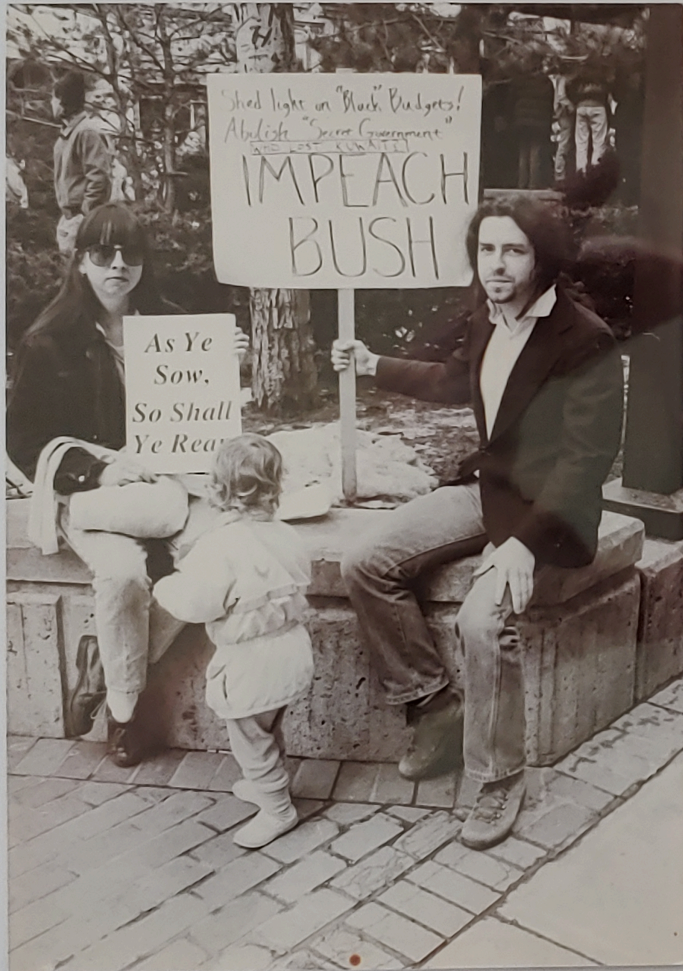


Shed light on "Black" Budgets!
Abolish "Secret Government"
WHO LOST KUWAIT?



IMPEACH BUSH

"Arm the Contra...
Disarm American Citizens!"
WHY?



Bonze Anne Blayk

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ROSIE-ANNE QUVUS AKA BONZE BLAYK! - 20 FEB 2022



Burns International Security Services Inc

P.O. Box 7525 Forest Park Station
Little Rock, Arkansas 72217
Tel 501 666 0322

January 31, 1984

Dear Kevin and Anne Marie,

Just a very quick note, as I have been trying to get this off to you for a couple of weeks now. Ever since the snow and ice went away, which was not soon enough for me. It was very disturbing being unable to drive and having to beg rides to get to work. But today is simply gorgeous.... who knows about tomorrow.

The prints of the wedding of the love birds are enclosed. I have sent Mike the negatives, so any further needs will have to be through him. They did not do a very good job in making these prints, but you probably don't mind that much, do you?

Enclosing some stuff which came in the mail. When I opened the letter from Hall High was later than the due date, but thought you just might be interested ... also the Year Book from your senior year was still in the telephone book holder and thought that might be something you would want to look through and keep.

Also the Telluride (since I am sending a junk package) -- why don't you get your address changed?

Anne Marie, you won't believe it but I am still enjoying your contribution to my Christmas - the loaf of bread. I share it on rare occasions with visiting dignitaries.

Don't have much real hard news to impart -- have been spending some time in Tulsa during December and January, hiring and training their new secretary. Ran one ad and got 106 resumes in answer had to screen them just from reading, and then went over and interviewed some ten. I am very pleased with my selection -- she is super smart and fits in quite well with our type of operation.

Hope to get out now that the weather has improved and do some car shopping. I am about convinced that the Datsun is the best thing going; how about that after giving one away????? The new models have a lot more headroom, and I would get a 4 door sedan this time. My car still looks good, but it just does not have any pick-up or control on ice/snow. Believe I will spend my money this year on a car instead of a big trip. Also, think this is the year for me to have my foot operated on so I can continue to walk around -- very handy.

Have been watching with interest the introduction of the MacIntosh and wondered what you thought of it. Are you making any progress towards a career? Very interesting about the person who got the job at Cornell being a fan of Mike's group. VERY SMALL WORLD.

Have to get back to work, so will write you more later. Let me hear from you.

the ANGRY SAMOANS. OUR band.
Bonze Saunders.
LA. 1978.

facebook.com/media/set/?vanity=bonze.blayk&set=a.10159738196682954

Bonze Anne Rose Blayk - COMETMONGER - SSN 451-88-9647 *once slayk*

Secondary School Record
LITTLE ROCK, ARKANSAS

SAUNDERS KEVIN ERIC M 242 Kingrow Drive Little Rock, Arkansas MO 3-2121

Earl Saunders Same Commercial Photographer Teacher Housewife
Father's Name Address Occupation Birth Date

Guardian's Name Address Occupation Birth Date

Jefferson 0-3-68 (0-4-71) 5-1-66

TEST RECORD

Grade	1	2	3	4	5	6	7	8	9	10	11	12			
10-2	99	42	43	36	48	97	41	98	43	96	39	99	43	99	44

ACTIVITY RECORD

SAUNDERS KEVIN E 11 APR 73 SAUNDERS KEVIN E 04 73 C R F A

Bonze Anne Blayk

Edit cover photo

Bonze AnneRose Blayk (barmayden Rosie-Anne Quvus)
340 Friends

Posts About Friends **Photos** Videos Groups More

'Mafuzur Rahman is a lying moron not a Medical Doctor'

1 Post · 12 Items · 1 Share

Like Comment Share

facebook.com/photo/?fbid=10159742956887954&set=a.427053897953

DSCO1680 - BARMAYDEN - PROPERTY OF LENORA QUVUS - THE HAUNT TUESDAY BLUESDAY.JPG
JULY 31 2018 - "AUTOSEXUAL"
photo.fb/15urRLgDuK

"Bonze Blayk observed in a state of
psychotic compensation"
Transsexualism F64.0 / ICD-10

Bonzeanne Blayk's Allergies & Conditions

Allergies	Last Updated
ampicillin	Jan 22, 2021
hydrochlorothiazide	Jan 22, 2021
latex	Jan 22, 2021

Current Conditions	Onset Date
✓ DVT prophylaxis	
✗ Fever	
✗ Leukocytosis - Normal for Type O-	
✓ Nasal bone fracture	
✓ Rib fracture	
"Unspecified psychosis" → ICD-10 F64.8 Transsexualism!	
Unspecified senile psychotic condition	

Clifford Ehmke MD:

"Risks to self - Likely to be assaulted"

Bonze Blayk
2/22/22

Bonze Anne Rose Blayk - COMETMONGER - SSN 431-88-9647

Bonze Blayk

**Secondary School Record
LITTLE ROCK, ARKANSAS**

SAUNDERS KEVIN ERIC M 242 Kingsrow Drive Little Rock, Arkansas MO 3-2121
 Last Name First Name Middle Name Sex Home Address City State Telephone
 Earl Saunders Same Commercial Photographer Jean Same Housewife
 Father's Name Address Occupation Mother's Name Address Occupation
 Executive Secretary - Burns International Security Services - Little Rock, Arkansas
 Guardian's Name Address Occupation Little Rock, Arkansas 5-1-56
 Birth Place Birth Date
 FH Junior High Jefferscn 9-3-68 6-4-71
 Entered From Date Date Promoted Date Withdrew and Reason Date Re-Entered

Bonze Anne Blayk

Hail Senior High FH 8/71 5/30/74 48 393 2.292 9/12/72 Illness
 Entered From Date Date Graduated Ranks In Class Of Grade Average Date Will Be Graduated

TEST RECORD

GRADE-SEX	COMPOSITE	ABILITY	EXPECTED COMP.	I. ENGL. USAGE	II. MATH. USAGE	III. SOC. STUD. READING	IV. NAT. SCI. READING	V. WORD USAGE
10-2	99 42 43	36-48	97 41 98 43	96 39 99 43	99 44			

ACTIVITY RECORD

Activities	7	8	9	10	11	12

SAT NATIONAL EDUCATIONAL DEVELOPMENT TESTS - 1971-72

LAST FIRST M.I. GRADE TEST DATE
 SAUNDERS KEVIN E 11 APR 73
 VERBAL MATH ACH 1 ACH 2 ACH 3 SUBSCORES
 730 710

SAUNDERS KEVIN E 04 73 C B B A
 The American College Testing Program
 STANDARD SCORES: ENG. 30 MATH. 36 SOC. 33 N. SCI. 34 COMP. 33
 COLLEGE-BINDING PERCENTILES: ENG. 99 MATH. 99 SOC. 99 N. SCI. 99 COMP. 99

730/710 SAT = 1440 ==> 144 IQ - 1/1,000

COLLEGE BOARD ADMISSIONS TESTING PROGRAM

LAST FIRST M.I. GRADE TEST DATE
 SAUNDERS KEVIN E 12 DEC 73
 VERBAL MATH ACH 1 ACH 2 ACH 3 SUBSCORES
 EN740 M1770 AH800

ATTITUDE AND ATTENDANCE RECORD

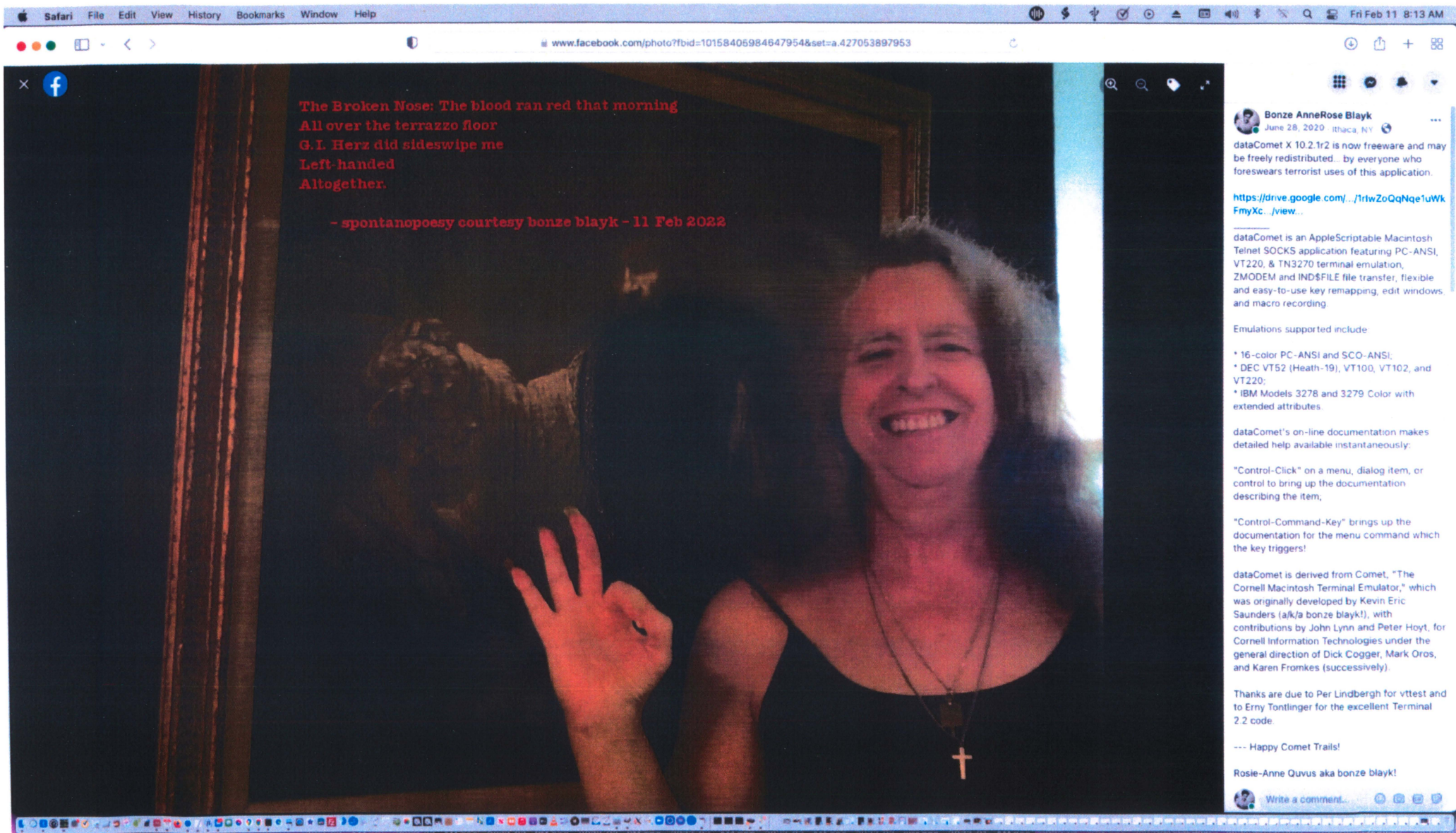
Gr.	Attitude						Absent		Tardy	
	1 S			2 S			1 S 2 S	1 S 2 S		
	S's	M's	U's	S's	M's	U's				
7	4	9	0	4	8	0	4	7		
8	6	8	0	7	7	0	1	7		
9	14	0	0	12	2	0	2	0		
10							0	1		
11							7	2		
12										

OFFICIAL

- College Board Advanced Placement Tests

General Health Home Conditions Parents Living M F No. Brothers No. Sisters

Credits Sent To *Mr. B. Macintosh, Cornell Univ. Ithaca, N.Y.* Date *1-31-73* - Duplicate *4/13/73* National Merit Scholarship Corp
USA 6/21/72 *Cornell University 10-26-73* *Evanson, Illinois 60201 1-30-74*
2 of Texas-Austin, Tex 1-18-74 *June 6-14-74*



The Broken Nose: The blood ran red that morning
 All over the terrazzo floor
 G. I. Herz did sideswipe me
 Left-handed
 Altogether.

- spontanopoesy courtesy bonze blayk - 11 Feb 2022

Bonze AnneRose Blayk
 June 28, 2020 Ithaca, NY

dataComet X 10.2.1r2 is now freeware and may be freely redistributed... by everyone who foreswears terrorist uses of this application.

<https://drive.google.com/.../1r1wZoQqNqe1uWkFmyXc.../view...>

dataComet is an AppleScriptable Macintosh Telnet SOCKS application featuring PC-ANSI, VT220, & TN3270 terminal emulation, ZMODEM and IND\$FILE file transfer, flexible and easy-to-use key remapping, edit windows and macro recording.

Emulations supported include:

- * 16-color PC-ANSI and SCO-ANSI;
- * DEC VT52 (Heath-19), VT100, VT102, and VT220;
- * IBM Models 3278 and 3279 Color with extended attributes.

dataComet's on-line documentation makes detailed help available instantaneously:

"Control-Click" on a menu, dialog item, or control to bring up the documentation describing the item.

"Control-Command-Key" brings up the documentation for the menu command which the key triggers!

dataComet is derived from Comet, "The Cornell Macintosh Terminal Emulator," which was originally developed by Kevin Eric Saunders (a/k/a bonze blayk!), with contributions by John Lynn and Peter Hoyt, for Cornell Information Technologies under the general direction of Dick Cogger, Mark Oros, and Karen Fromkes (successively).

Thanks are due to Per Lindbergh for vttest and to Emy Tontlinger for the excellent Terminal 2.2 code.

--- Happy Comet Trails!

Rosie-Anne Quvus aka bonze blayk!

My works. 1. I do not use hallucinogens: 2x mushrooms 1995. 2. I am trans, smoke pot, Δ "do CODE." "Flaming, cute, and hyperbolic" - self-characterization to Paul T. Rovinelli PhD. 3. We're looking at "Liar, liar, pants on fire!" quality "testimony" from these guys, & 4. Is it really too much to ask for a warning label re: mCPP on Trazodone? Be filled and "Natural born Catrinist" - (Smze Blayk 2/11/2022)

ROFL - "Che!"
- Rosie-Anne Furus aka bonze blayk! (R)
2/11/22

Bonzeanne Blayk's Report

History & Physical

History & Physical

Patient: BLAYK, BONZE ANNE ROSE
DOB/Age: 05/01/1956 60
Admission Date: 12/25/16

Account Number: A00082793308
Medical Record#: M000597460

Provider: Mafuzur Rahman MD

HISTORY AND PHYSICAL:

DATE OF ADMISSION: 12/25/16 Christmas! HE LIVES!

IDENTIFYING DATA: Ms. Blayk who also wants to be known as Anne, is a male to female individual who was admitted to the behavioral health unit because of some bizarre behavior. This is her second hospitalization on this unit. The first one was on 04/27/02.

CHIEF COMPLAINT: "I don't believe you are a real psychiatrist, rather a fake psychiatrist, go away." House vandalized.
His ID card was out-of-date. He used to have a beard, or vice versa? LOL

HISTORY OF PRESENT ILLNESS: This patient with known history of mental illness was admitted because of agitated and angry state while he was yelling at others including staff at the emergency department, accusing them of harassing him. Initially, he was brought from the Sunoco Gas Station due to an altercation with another person and people around him/her felt unsafe and they called 911. Today, I tried to interview him multiple times. At first, he/she was unwilling to go into a room to talk to me. Then, I tried to get him to the comfort room with the help of staff to assess him, he would not get in there. He wanted to go to my office, which I do not have one. Then he became very angry, started pointing his fingers at me and put it on my face and calling me a fake doctor from India and asked me to go away. Staff tried to intervene. He became agitated and very disrespectful to everyone on the hallway. When he saw the security officers coming through the door, he somewhat calmed down, but continued to be agitated and disrespectful. At that point, we decided to postpone the interview and allowed him to go back to his room. From the collaterals mentioned in the original mental health evaluation, we found the same history as mentioned earlier. During that time, he claimed that he was an officer of federal government and some bad guys were hacking his software and were trying to kill him. During the entire time, he was pressured, tangential with flight of ideas. He would not answer any questions pertaining to the history taking. "I am working FOR the Federal Government!" - NOT AGAINST IT!
LOL same house as prior record in 2002!

Other than being homeless and wandering on the streets of Binghamton, no other psychosocial history is available. No family history, medical history, or personal history is obtainable at this time. LOLOLOLOL

PHYSICAL EXAMINATION

Physical exam was offered. He would not even consider going close to him because he does not believe that I am a doctor and I should go back to where I come from. He does not appear to be in any physical distress. I reviewed his labs as well as vital signs taken this morning. He declined to get his vitals taken.

"Go back to where you came from" -> Central Casting!

LABORATORY DATA: Labs included CBC with differential, chemistry, urinalysis, and tox screen. CBC shows a WBC count of 7.3, hemoglobin 16.6, hematocrit 48, MCV 94, platelet count 339. Chemistry shows sodium level of 130, slightly lower than normal; potassium 3.8; chloride 100; carbon dioxide 20; BUN 13; creatinine 1.08; estimated GFR 98 for African American, 76.9 for non African American; glucose 106; hemoglobin A1c 10.2. His fingersticks showed a blood sugar of 374. Urinalysis showed 2+ urine ketones, 1+ blood in the urine, squamous cell epithelium of slightly higher than normal is present, urine glucose 3+. Tox screen showed positive benzodiazepines. Rest of it is unremarkable. FALSE 2 scarf? No.

MENTAL STATUS EXAMINATION: This is a healthy appearing, average height male to female wearing a scarf with long hair, poorly groomed with poor personal hygiene. He is pacing and unable to settle down. Alert and oriented to time, place and person. Irritable mood with dysphoria. Speech is pressured, tangential with frequent flight of ideas. "Illogical." Thought process with "delusions of persecution." Would not answer about experiencing any hallucinations. Unable to

EYEROLL,

Bonzeanne Blayk's Report

History & Physical

detect his memory functions because of uncooperative behavior; however, his insight and judgment appears to be impaired. Would not answer question of suicide or homicide; however, he could be a potential for physical violence on the unit.

SUMMARY: This 60-year-old male to female individual with known history of mental illness, currently admitted to the unit in a very disorganized state of mind with psychosis.

DIAGNOSIS: Axis I: Psychotic disorder, not otherwise specified, rule out schizophrenia versus schizoaffective disorder.

PHYSICAL HEALTH DIAGNOSIS: None.

TREATMENT RECOMMENDATIONS: The patient will remain hospitalized for now for his and others' safety. His code status is going to be full. Supportive milieu, individual, and group therapy will be offered. At this time, he is unwilling to take any medications; however, we will consider antipsychotic with or without mood stabilizer to stabilize him. If he continues to refuse, he may need to go to the court for treatment over objection. Also may need to be transferred to one of the state facilities for intermediate to longer term care.

Say GBHC, where he also works?

"Oh YEAH!"

*B.S. Economics 3.6 GPA
UT Austin High Honors*

*Kevin Eric Saunders
(aka "The Bonze")
May 1977.*

*- Bruce Clark
2/11/2022*

85518/725366516/CPS #: 9283576

<Electronically signed by Mafuzur Rahman MD> 12/26/16 1314

Mafuzur Rahman MD
Dictated Date/Time: 12/25/16 1644

Transcribed Date/Time 12/25/16 1834

Copy to:

CC: Mafuzur Rahman MD

Printed by: Bonzeanne R Blayk on 07/28/21 at 1:32 pm from Cayuga Medical Center at Ithaca Patient Portal

[← Back to Your Results](#)

CMCI LAB

Patient Information

BLAYK, BONZEANNE
1668 Trumansburg Rd
Ithaca, NY, 14850
Administrative Sex: Female
DOB: May 01, 1956

Order Details

Status: Final
Observation/Collection: Dec 24, 2016 11:25 PM EDT
Filler Order #: 1224:CE00011S
Requested: Dec 24, 2016 11:25 PM EDT
Ordering Provider: David Shenker
Result/Status Change: Dec 25, 2016 12:01 AM EDT
Result Copied To: David Shenker - Attending provider
Quantity/Timing: - -

Drug Screen UR ED/Pain Clinic

Analyte	Value	Flag	Reference	Status
Amphetamine UR Screen	None Detected		None Detect	Final
Barbiturates Urine Screen	None Detected		None Detect	Final
Benzodiazepine Urine Screen	None Detected		None Detect	Final
Urine Cannabinoids Screen	None Detected		None Detect	Final
Urine Cocaine Screen	None Detected		None Detect	Final
Urine Opiates Screen	None Detected		None Detect	Final
Urine Phencyclidine Screen	None Detected		None Detect	Final

Truth is, I hit the library frequently to do network computing while I was taking the bus over 2015-2016, and hit the Sunoco for eats & cigarettes quite frequently with ZERO problems!

once
Blayk

PRID: 43705582

Service: Bangs Ambulance, Inc.
(State ID: 5411)
Base: State Street
Unit: 959 (Transport)
Shift: Evening
EMD: Yes, Without Pre-Arrival Instructions - 25A01
Dispatched As: Psychiatric Problems
Mass Casualty: No
Vehc. Grid: Ithaca
Type of Svc: Scene Unscheduled
Response Code: Alpha
Mode to Ref: No Lights/Sirens
Moved Via: Stretcher
Position: Semi-Fowlers
Outcome: Treated, Transported by EMS
Amb. Transport Code: Initial Trip

Date: December 24, 2016
Team: ALS
Crew 1: Driver
Gresov, Alexandra
EMT-B (436374)
Crew 2: Primary Caregiver
Domster, Frank
AEMT-P (346161)
* designates an ALS Provider
Mode to Rec: No Lights/Sirens
Moved From: Stretcher

Ref Other Type: Business
Location: Sunoco
210 S Cayuga St
Ithaca, NY 14850-5510
United States
Requester: 911
Scene Grid: Ithaca
Ref. GPS: 42.4384082, -76.4993085

Receiving: Hospital
Cayuga Medical Center
Emergency Department
101 Dates Drive
Ithaca, NY 14850-1342
607-274-4011
Dest. Grid: Cayuga Medical Center
Dest. GPS: 42.46852, -76.53792
Destination Basis: Closest Facility

Last Name: Blayk First: Bonze
Address: 1668 Trumansburg Rd
City: Ithaca ST: NY Zip: 14850
County: Tompkins
Country: United States
Citizenship: United States
Phone: Home: 607-277-5808
Mobile: 607-277-5808
DOB: 05/01/1956 SSN: 431-88-9647
Age: 60y Sex: M Weight:
Height:
Subscriber: No

Odometer	Times
Ld Miles: 3.7	Dispatch: 22:27
	EnRoute: 22:27
	At Ref: 22:29
	At Patient: 22:30
	Leave Ref: 22:34
	At Rec: 22:43
	Transfer Care Dest: 22:48
	Available: 22:54

Consent Signed: Yes
PCS / Medical Necessity Signed: No
Primary Method of Payment: Medicaid

Billing Information:

Company Medicaid (Medicaid) Group ID

Scene Information
Description: Gas station parking lot
Patient Belongings: multiple bags all kept with the pt in the ER room. None of the contents were checked.
Other Agencies: Law Law Enforcement Number: M. Grey
Chief Complaint (Category: Psychiatric Problems)
Mental/Psych. Behavioral / psychiatric disorder
ALS Assessment: Not Required
History of Present Illness
Disp by 911 to stage away from the scene for a possible mental health transport. We were cleared prior to staging. Upon our arrival we found this pt in the care of IPD. They reported that the pt stated that he tried to get a room at the friendship center and

Chief Complaint (Category: Psychiatric Problems)
 they refused a room for him for the night. He added that now he is becoming agitated that he would like a mental health evaluation at CMC. Pt is found standing upright CAOx3 airway clear as he is speaking to us, breathing free and easy speaking in full sentences without difficulty, skin is pink warm and dry with pink and moist mucus membranes. Pt reported the same as IPD stated. He denied suicidal or homicidal ideations. Pt requested that we take him as he feels more comfortable in the ambulance than any other route. Pt sat on the stretcher and was moved to the ambulance. Tx alpha. Vitals were not taken as pt was stand offish and showed distrust with any physical contact. Radio report en route without orders. No changes en route. Pt continued to explain how he burned his exgirlfriend's trailer down and that his PTSD needs to be addressed. Continued conversations did not connect with obvious reality as he was not associating with current events. Upon our arrival, moved pt to ER room 5 TCOT RN Deb. 721619

Medical History	Current Medications	Allergies
Obtained From: Not Recorded	None Listed	None Listed

Neurological Exam

Level of Consciousness: Agitated Loss of Consciousness: No
 Chemically Paralyzed: No

Glasgow Coma Scale			
E	V	M	Tot
Int:	4	5	6 = 15

Motor	Sensory
LA: Normal	Normal
RA: Normal	Normal
LL: Normal	Normal
RL: Normal	Normal

Motor Comments: normal
 Sensory Comments: intact

My debit accounts ran dry and I was bounced from the Hotel Ithaca, at risk of freezing to death!
 I was staying in hotels in Ithaca because my home at 1668 Trumansburg Rd had been vandalized! - Once again 2/11/22

RATIONAL

Airway	Respiratory
Status: Patent	Effort: Normal
Cardiovascular	
JVD: Not Appreciated	Cap. Refill: Less than 2 Seconds
Edema: Not Appreciated	
Injury Details	
Drugs/Alcohol?:	

Initial Physical Findings

Assessment
 Skin Findings:

Impression / Diagnosis

Symptoms: Mental/Psych
 Impression: Behavioral / psychiatric disorder

Activity										
Time	H.R.		B.P.	RA SaO2	Resp	Rhythm	GCS	ECG Method	Pain	CRW*
	Method	Method			Effort					
22:34					16		4/5/6		0	#2
22:38					Normal					#2

Hosp. Notify BLS alert sent by Frank Domster via Radio. no orders

* Assessment made by

Acc. Name: Blayk, Bonze Anne Rose
 Acc. No.: IN 108299
 Room No.: 390



Arrival: 12/18/16
 Departure: 12/22/16
 No. Guests: 1
 Folio Type: Current

Bonze Anne Rose Blayk
 BAR
 1668 Trumansburg Rd
 Ithaca, NY
 14850, USA

GUEST FOLIO

SEQ	DATE	TRANSACTION DESCRIPTION	REF/COMMENTS	ROOM #	Q	AMOUNT	TX	S/F
1	12/18/16	Visa	Aut#: 651204	121	1	(166.37)	I	B
2	12/18/16	Visa	Refund	121	1	166.37	I	B
3	12/18/16	Room	Re: 390	390	1	149.00	N	A
		Sales Tax				11.92		
		County Tax				7.45		
4	12/19/16	Visa	Aut#: 651266	390	1	(166.37)	I	A
5	12/19/16	Room	Re: 390	390	1	149.00	N	A
		Sales Tax				11.92		
		County Tax				7.45		
6	12/20/16	POS Room Charge	Inv: 10172-47742/47742/1	390	1	24.97	I	A
7	12/20/16	POS Room Charge		390	1	2.00	I	A
8	12/20/16	POS Room Charge		390	1	5.00	I	A
9	12/20/16	POS Gratuity	Inv: 10172-47742/47742/1	390	1	149.00	N	A
		Room	Re: 390			11.92		
		Sales Tax				7.45		
		County Tax				11.97		
10	12/21/16	POS Room Charge	Inv: 10178-47751/47751/1	390	1	0.96	I	A
11	12/21/16	POS Room Charge		390	1	2.07	I	A
12	12/21/16	POS Gratuity	Inv: 10178-47751/47751/1	390	1	149.00	N	A
13	12/21/16	Room	Re: 390			11.92		
		Sales Tax				7.45		
		County Tax						
TOTAL						552.08		

I have received the goods and / or services in the amount shown ^{hereon} *hereon* and agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part of the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

x Bonze Blayk
 GUEST SIGNATURE

My Medwatch report to the FDA:**Trazodone ==> mCPP may induce psychosis;
Trazodone should have a warning label**

Submitted on December 30, 2002

- Bonze Anne Rose Blayk

(F/K/A "Kevin Eric Saunders a/k/a bonze blayk")

Kevin Eric Saunders a/k/a bonze blayk

Describe event or problem up to a total of 6400 characters allowed

NOTE... my GP is Dr. Breiman of Family Medicine Associates, 209 W. State St., Ithaca, NY 14850. The psychiatrist who prescribed the drugs which caused the adverse reactions was the (now-deceased) Dr. Robert Hamlich. If you would please provide me with an email contact address, I can also submit research citations in RTF format which support this analysis.

SUMMARY: Concurrent use of fluoxetine (Prozac, 20mg/day in the morning as an antidepressant) and Trazodone (50 mg/day at bedtime as a "sleep aid") over 6 days led to peripheral numbness, heart palpitations, urinary retention, visual distortions, and eventually paranoia and delusions. Discontinuation of Trazodone after 6 days and later substitution of Hydroxyzine Pamoate (25 mg) as a "sleep aid" further complicated the adverse reaction, eventuating in frank psychosis with prominent auditory hallucinations (2/5/97).

Fluoxetine was initiated 12/28/96, followed by Trazodone (taken at bedtime) on 1/4/97.

On an ER visit on 1/11/97 physical symptoms listed above were dismissed by the ER examiner as effects of "agitated depression." (Fluoxetine had been used 8/96 - 10/96 at 10mg/day, but had been discontinued due to mildly unpleasant side effects.)

I discontinued Trazodone, since according to the Trazodone insert it might be a possible cause of the heart palpitations I had felt; on 1/16/97 Hydroxyzine Pamoate (Vistaril) was prescribed as an alternative "sleep aid," resulting in extreme anticholinergic side effects and worsening of paranoia.

I believed I was suffering from a serious neurological disorder, and resumed smoking cannabis for about two weeks (through 1/28/97) in the hope I would experience some relief of the symptoms. (NB: I had never experienced any significant negative side effects from smoking marijuana over 20 years of fairly regular use, which had been discontinued more than one month prior to going on fluoxetine ... nor, prior to this incident, psychosis from any cause.) Use of cannabis was discontinued in the expectation that I would soon be undergoing an NCV test for the presence of neurological problems (since use of cannabis could conceivably be reducing inflammation or affecting other neuropathic processes).

For some period during this interval, I completely lost all sensations of appetite, and lost 20 pounds.

On 2/6/97 I suffered a major psychotic episode involving delusions and auditory hallucinations.

Since the psychosis wound up resulting in serious criminal charges, consequently resulting in an acquittal under New York State law as "Not Responsible for Reason of Mental Disease or Defect," the cause of the psychosis was considered by a number of psychiatrists, neurologists, and psychologists. No signs of brain abnormalities were found in an MRI (5/12/97). The possibility of a neurological disorder was dismissed

after subsequent 3-day sleep-deprived EEG testing showed no abnormalities (2/98). The diagnosis of Cannabis-Induced Psychotic Disorder was also considered and dismissed.

Psychiatric and psychological examiners made varying diagnoses, including some questioning the presence of psychosis during the criminal offense (particularly since I'd been consistently found to be rational in numerous examinations). No doctor or other examiner ever considered the possibility of side effects from Prozac, Trazodone, or Hydroxyzine as a factor.

Around May 2000, I finally identified the underlying cause(s) of my physical illness in January 1997 (and subsequent psychosis) when I found research which identified both Fluoxetine and Trazodone as sodium channel blockers capable of inducing paresthesias. My suspicions having been heightened, I did more research on Trazodone, and discovered that Trazodone has an anxiogenic byproduct with hallucinogenic properties: the serotonergic agonist mCPP (meta-chlorophenylpiperazine). The anxiogenic properties of mCPP are widely used in clinical research; the hallucinogenic properties have gone largely unrecognized (though note "The subjective effects of MDMA and mCPP in moderate MDMA users", Tancer & Johanson, PMID 11714594, and reports of delirium induced by Trazodone where these effects were probably caused by mCPP, e.g., "Trazodone-induced delirium in bulimic patients," Damlouji & Ferguson, PMID 6584039).

Also, mCPP is a powerful anorectic agent, accounting for my loss of appetite!

Moreover, I found that research has clearly established that Fluoxetine impairs clearance of substances metabolized by the P450IID6 enzyme (and indeed there is a warning noting this effect in the Prozac monograph)... which includes mCPP, as well as Hydroxyzine. (It is not known whether I have a defective allele at CYP1D6 causing impaired P450IID6 metabolism -- present in about 7.5% of the Caucasian population -- since I have been unable to find a doctor or lab performing dextromethorphan/dextrorphan ratio or other tests of P450IID6 functioning.)

Thus, the "rare" CNS side effects of paranoia, delusions, and hallucinations listed in the Trazodone monograph are statistically predictable disasters: Trazodone has tranquilizing, antipsychotic properties which ordinarily mask the anxiogenic, psychotogenic properties of mCPP... but the vagaries of metabolism may result in Trazodone clearing relatively unimpaired P450IIIA4 channels while mCPP accumulates as a result of P450IID6 blockade.

CONCLUSION: I strongly believe that the labelling of Trazodone (and, likewise, of Serzone) should clearly indicate that it produces mCPP, a panic-inducing hallucinogenic byproduct, and that clearance of this byproduct may be impaired by use of other drugs or by genetic variations affecting the P450IID6 enzyme.

6. Relevant tests/laboratory data, including dates up to a total of 1000 characters allowed

Cayuga Medical Center: ER 1/11/97 for complaints of heart palpitations, peripheral numbness, urinary retention, etc. No tests directly relevant to the question of plasma levels of Fluoxetine, Trazodone, mCPP, or Hydroxyzine Pamoate were performed. Other tests were normal (EKG, chest X-ray, lab work).

Dr. Jody Stackman (neurologist): neurological exam 1/20/97, NCV (negative) 3/26/97, MRI (negative) 4/8/97

Strong Memorial Hospital, Rochester: 2/11/98, 3-Day sleep-deprived EEG (negative for epilepsy)

7. Other relevant history, including preexisting medical conditions, (e.g. allergies, race, pregnancy, smoking and alcohol use, hepatic/renal dysfunction, etc.) up to a total of 500 characters allowed

Discussed in Section B5.

1. Name
(Product Name) (Label Strength) (Mfr/Labeler)
#1 Trazodone 50mg
#2 Prozac 20mg Eli Lilly

2. Dose/Frequency/Route used
 #1 50mg / nightly / op
 #2 10mg / morning / op [sic 4/23/11: should be 20mg]

3. Therapy Dates (or best estimate)
 If necessary, use Section B5 to explain or clarify dates.
 From To
 #1 1/4/97 - 1/10/97
 #2 12/31/96 - 6/30/97

4. Diagnosis for use (separate indications with commas)
 #1 Insomnia
 #2 Depression

5. Event abated after use stopped or dose reduced
 #1 Yes (No) Doesn't Apply
 #2 Yes (No) Doesn't Apply

6. Lot # If known
 #1
 #2

7. Exp. Date If known.
 If necessary, use Section B5 to explain or clarify dates.
 #1
 #2

8. Event reappeared after reintroduction
 #1 Yes No (Doesn't Apply)
 #2 Yes No (Doesn't Apply)

9. NDC #(for product problems only)

10. Concomitant medical products and therapy dates (exclude treatment of event)
 Vistaril 25mg / 1-2 prn for insomnia / 1/16/97 - ? precise dosages unknown

From: medwatch@oc.fda.gov
 Subject: Thank you for your submission
 Date: December 30, 2002 2:00:20 PM EST
 To: bonze@databaseast.com

Received: from mx.lightlink.com (mx.lightlink.com [205.232.34.15])
 by adore.lightlink.com (8.8.6/8.8.8) with ESMTMP id OAA15313 for ;
 Mon, 30 Dec 2002 14:02:20 -0500 (EST)

Received: from ocswall01.fda.gov (ocswall01.fda.gov [198.77.181.7])
 by mx.lightlink.com (8.8.8/8.8.8) with SMTP id OAA00877 for ;
 Mon, 30 Dec 2002 14:02:20 -0500

Received: from cdswws2.cder.fda.gov
 by ocswall01.fda.gov
 via smtpd (for mx.lightlink.com [205.232.34.15]) with SMTP;
 30 Dec 2002 19:02:20 UT

Received: from 150.148.145.193
 by cdswws2.cder.fda.gov with ESMTMP (FDA/CDER Tumbleweed MMS SMTP Relay (MMS v4.7));
 Mon, 30 Dec 2002 14:02: 03 -0500

Received: from CDSX01.cder.fda.gov (cdsmedwatch.cder.fda.gov [150.148.157.160])
 by cdsx01.cder.fda.gov with SMTP
 (Microsoft Exchange Internet Mail Service Version 5.5.2653.13) id ZRBNTZQG;
 Mon, 30 Dec 2002 14:02:14 -0500

X-Server-Uuid: 00796fd4-893e-11d3-8ed3-0008c75df4f2
 X-Sybari-Space: 00000000 00000000 00000000 00000000
 Mime-Version: 1.0
 X-Wss-Id: 120E47A1791004-01-01
 Content-Type: text/plain; charset=us-ascii
 Content-Transfer-Encoding: 7bit
 Message-Id: <120E47A1791004-01@WorldSecure_Server_cder.fda.gov_>
 X-Uidl: U="!0ld!!mCk!!Y> '#!
 Status: RO
 X-Status: F
 X-Keywords:
 X-Uid: 69464

Dear Reporter:

Thank you for taking the time to report to MedWatch, The FDA Safety Information and Adverse Event Reporting Program. Voluntary reports, such as yours, are essential for ensuring the continued safety of FDA-regulated products and help to ensure that the benefits of medical products outweigh their known risks. One

or two well-documented case reports often provide the first signal of potential problems and can lead to additional investigations and regulatory action.

We appreciate your support of the MedWatch program and for contributing to the public health. Please continue to notify us whenever you suspect a serious adverse event or product problem.

The MedWatch website includes the most up-to-date medical product safety information, including monthly safety-related drug labeling changes. If you are interested in receiving immediate notifications pertaining to safety issues when they are posted to our website, we invite you to sign up for the MedWatch e-list. Go to <http://www.fda.gov/medwatch/elist.htm>

If you have questions or comments about the MedWatch program, you may e-mail us at medwatchcomments@cdcr.fda.gov or call 1-800-FDA-1088, then press "0".

Sincerely yours,

MedWatch

UP

HOME

Updated 11/6/10, 1/7/10, 2/1/10



Science that benefits humanity

DNA DRUG SENSITIVITY TEST (DST) RESULTS
Cytochrome P450 2D6 Test

Genelex Laboratory # CRM 16424

Report Date: July 27, 2010

Patient Name: Kevin E. Saunders / <i>Bonze Anne Rose Blayk</i>	Collection Date: 7/16/2010
Date of Birth: 5/1/1956	Sample Type: Blood
	Receipt Date: 7/19/2010
Cytochrome P450 2D6 Genotype (Phenotype) Interpretation:	DST- CYP 2D6 *1 / *4 (Intermediate Metabolizer)

Laboratory Director: Teresa H. Aulinskas, Ph.D.

Laboratory Test Interpretive Comments:

Normal metabolizers represent the norm for metabolic capacity. In general normal metabolizers can be administered drugs which are substrates of the CYP2D6 enzyme following standard dosing practices. Genotypes consistent with the normal metabolizer phenotype include two active CYP2D6 alleles or one active and one partially active CYP2D6 allele. Increased caution may be appropriate for individuals having one partially active allele.

- Intermediate metabolizers** may require lower than average drug dose for optimal therapeutic response to medications with the exception of prodrugs. For the majority of drugs consider decreased dosage. For prodrugs, like tamoxifen, that require activation by CYP2D6, an alternative treatment or increased dose should be considered. Genotypes consistent with the intermediate metabolizer phenotype are those with one active and one inactive CYP2D6 allele, one inactive and one partially active CYP2D6 allele, or two partially active CYP2D6 alleles.

Poor metabolizers are at increased risk of drug-induced side effects due to diminished drug elimination or for prodrugs, like tamoxifen, lack of therapeutic effect resulting from failure to generate the active form of the drug. Alternative treatment should be considered. Genotypes consistent with the poor metabolizer phenotype are those with no active CYP2D6 alleles.

Ultra metabolizers exhibit higher than average rates of metabolism. Ultra metabolizers are at increased risk of therapeutic failure due to increased drug elimination and thus may require an increased dose of drugs that are inactivated by CYP2D6. For prodrugs, ultra metabolizers may also be at increased risk of drug-induced side effects due to increased exposure to active drug metabolites, in which case they may require lower than average doses. Genotypes consistent with ultra metabolizer phenotype include three or more active CYP2D6 alleles due to duplication of an active allele.

Co-administration of other drugs. Genotype results should be interpreted in context of the individual clinical situation including co-administration of other drugs, hepatic and renal function. In all cases monitor for co-administration of CYP2D6 inhibitors which may convert patients to poor metabolizer status. Potential adverse outcomes included overdose toxicity or treatment failure particularly for prodrugs. For more information see GeneMedRx drug-drug and drug-gene interaction software and Cytochrome P450 Metabolism Inhibitor/Inducer Tables. Access GeneMedRx via the patient access code provided at www.GeneMedRx.com/DNAlogin.

*PROZAC***DNA Drug Sensitivity Test (DST) Cytochrome P450 CYP2D6 alleles tested:**

Active alleles: CYP2D6 *1 or *2

Partially active alleles: CYP2D6 *9 or *10 or *17 or *41

Inactive alleles: CYP2D6 *3 or *4 or *5 (deletion) or *6 or *7 or *8 or *11 or *12 or *14 or *15

Gene Duplication: CYP2D6 *1 or *2 or *4 or *10 or *41

Analytical specificity and sensitivity for detection of these mutations are 99%. Other known variants not listed are not detected (< 5% of the population for Caucasians).

Note: This is a list of all tested markers and is no indication of your genetic profile. Your genotype is in the box above.

For more detailed information visit our website at www.healthandDNA.com

Page 1 of 2

Genelex Corporation • 3000 First Avenue, Suite One, Seattle, Washington 98121, 1-800 523-6487 www.HBALTHandDNA.com, Accredited DNA Testing World Leader Since 1987

mCPP is metabolized by the isoenzyme P45011D6 as expressed in the liver and elsewhere as patterned by the CYP2D6 genotype.
—Bonze Blayk

Bonzeanne Blayk's Report

Progress Notes

Progress Note

Patient:
BLAYK,BONZE
ANNE ROSE
DOB/Age: 05/01/1956 60
Admission Date: 12/25/16

Account Number: A00082793308

Medical Record#: M000597460

Provider: Kevin Field Ph D

MHU: Group Therapy Note

- Service Type

Service Type: 90817 Psychotherapy 20/30 - Anne Rose continues to effect an uncooperative rapport with staff, insisting on discharge without tolerating any clinical discussion or attempts to interview. She describes feeling unsafe in his home secondary to what she describes as a cyber attack, displaying impaired insight regarding ability to make decisions or form a cooperative alliance with undersigned, despite having a prior clinical relationship. Although she presents with calmer affect presently, and has improved marginally in terms of organization of thought, insight and judgement remain impaired. Although patient has impressed as being hypomanic historically, discussion is organized and coherent when at baseline.

lol vs "energetic"

& Norman heritage.

→ NORMAL, for a girl!

<Electronically signed by Kevin Field Ph D> 12/29/16 1131

Entered by: Kevin Field Ph D
Entered Date/Time: 12/29/16 1121

Copy to:

My house had been VANDALIZED!

Bonze Blayk

*February 14
2022*

CC: Kevin Field Ph D

*PS: October 10 2014 was like the Apocalypse...
in terms of getting meta-hacked! The FBI is "inaccessible"
to those deemed to suffer a
"Mental Illness."
WE'RE LOSING.
AMERICA IS LOSING THIS CYBERWAR.*

(am evidence. I don't like being tortured.

- Bonze Blayk 2/17/22

Printed by: Bonzeanne R Blayk on 07/28/21 at 1:25 pm from Cayuga Medical Center at Ithaca Patient Portal

Photo from October 13, 2016

Barcode: 209610904929

T-BURG
ShurSave
2085 Rt. 96
Sumner, NJ 07986
(607) 387-9701

FRIED CHICKEN

Packed On May 08, 16		Sell By May 08, 16
Net Wt/Ct 2.07 lb	Unit Price \$4.75	Total Price \$9.92

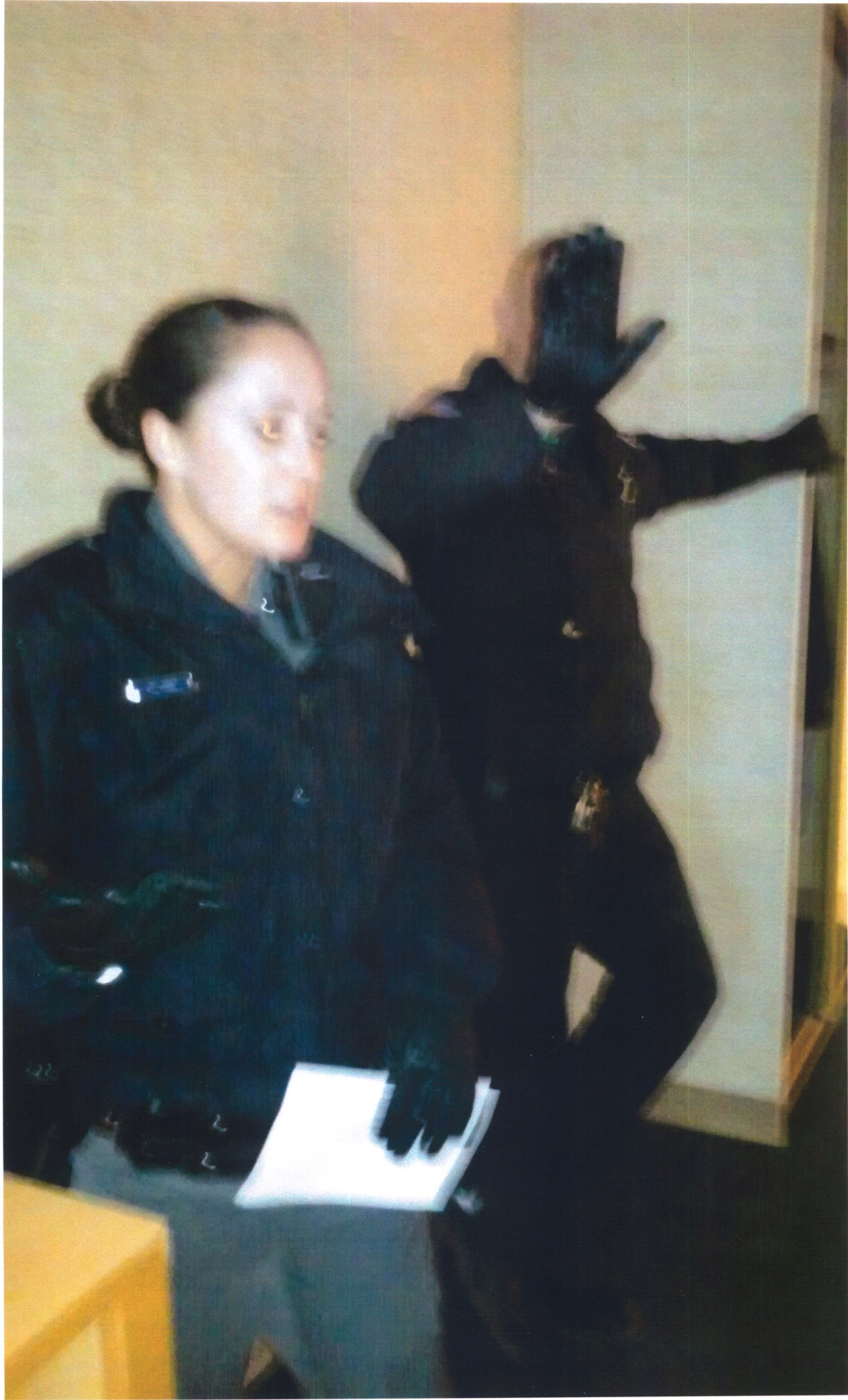
VANDALISM - 1668 TBurg Rd. - 2016 #ratbringer
"where the flies were coming from" - NO POWER - Park on top of Fridge



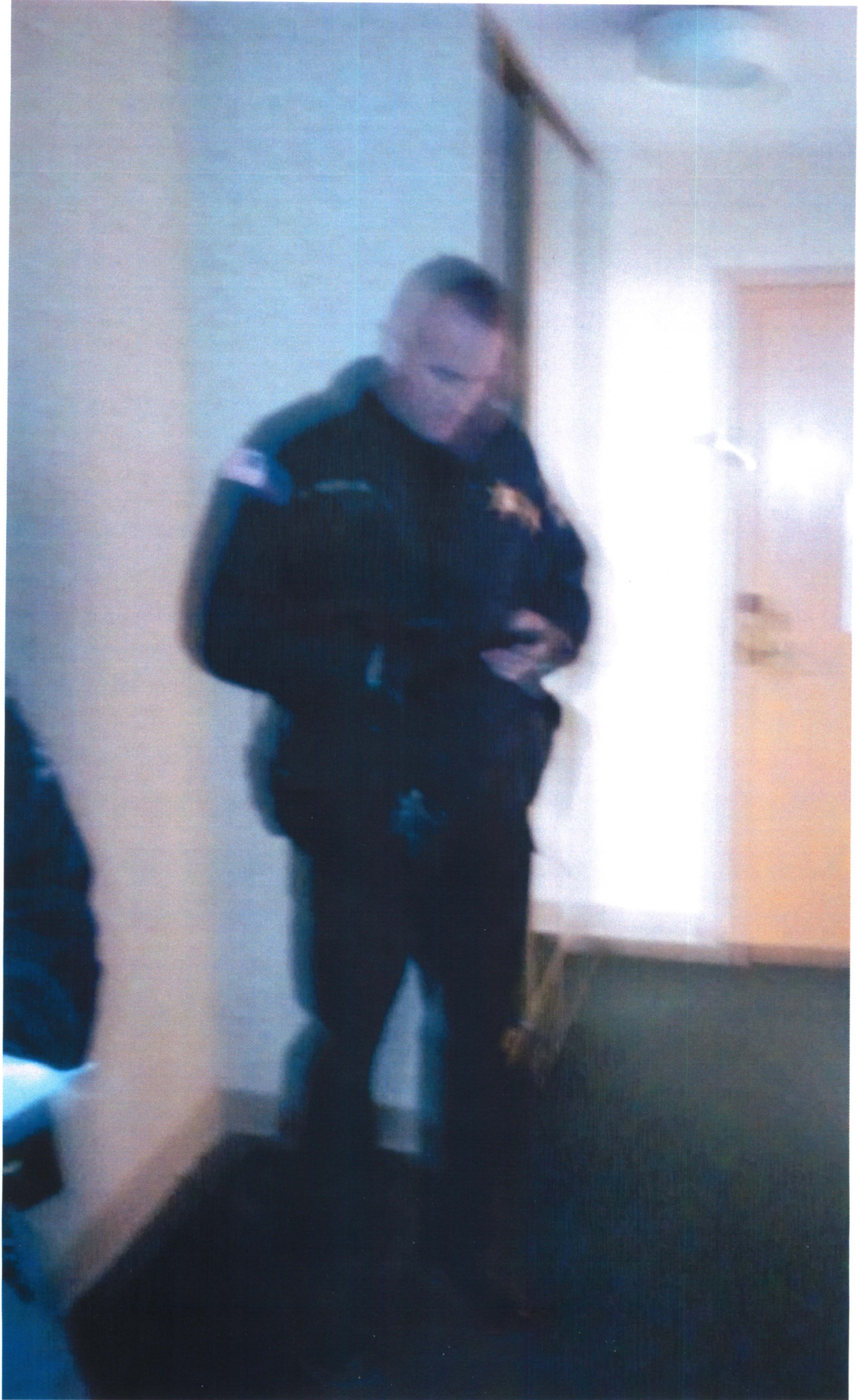
VANDALISM - 2016 ± ratbringer



VANDALISM - 2016 #ratbringer



VANDALISM - 2016 #ratbringer - Trip Hotel - "Phony Cops!"



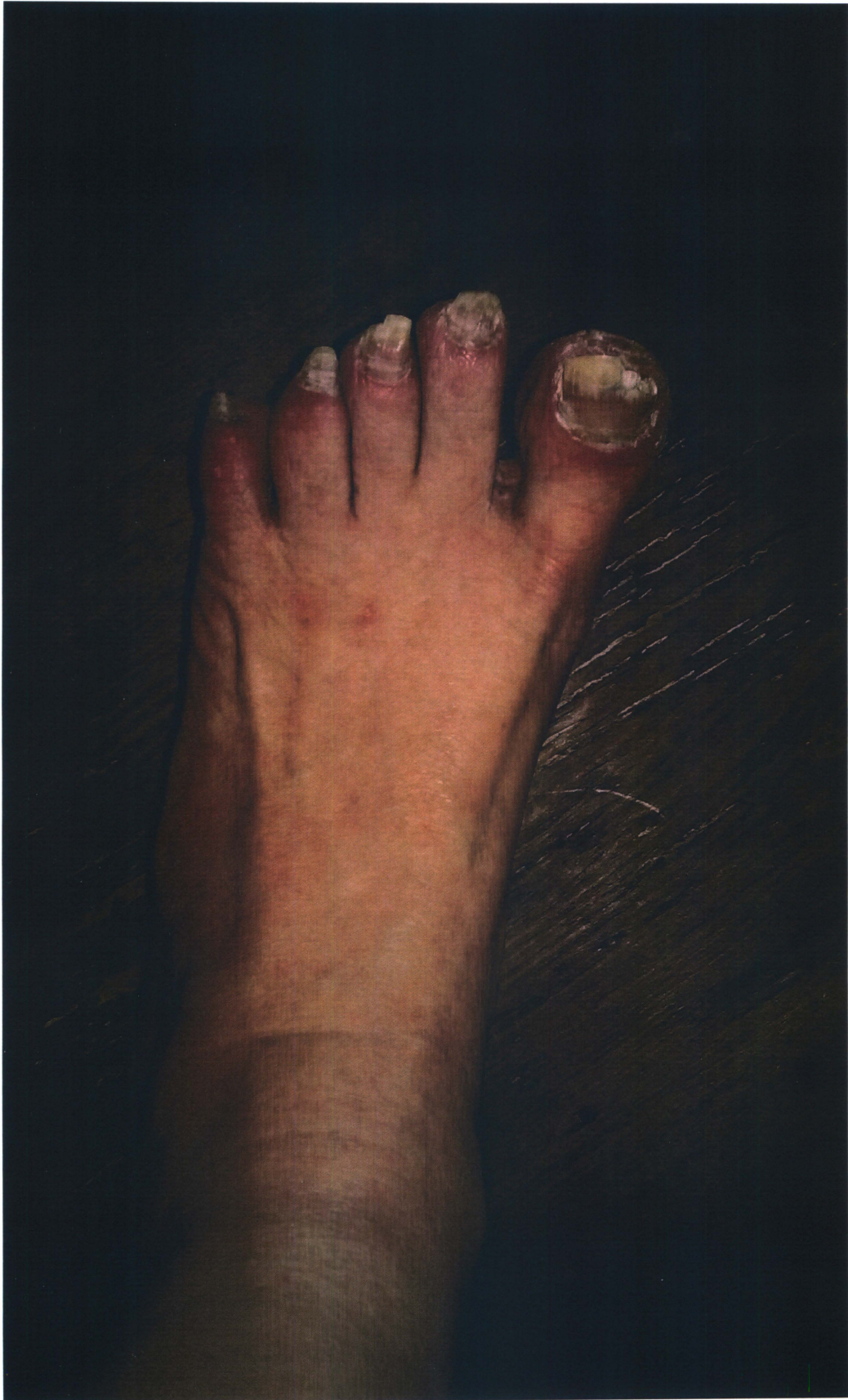
VANDALISM - 2016 #ratbringer - Trip Hotel



"Hospital Foot" - February 11 2017



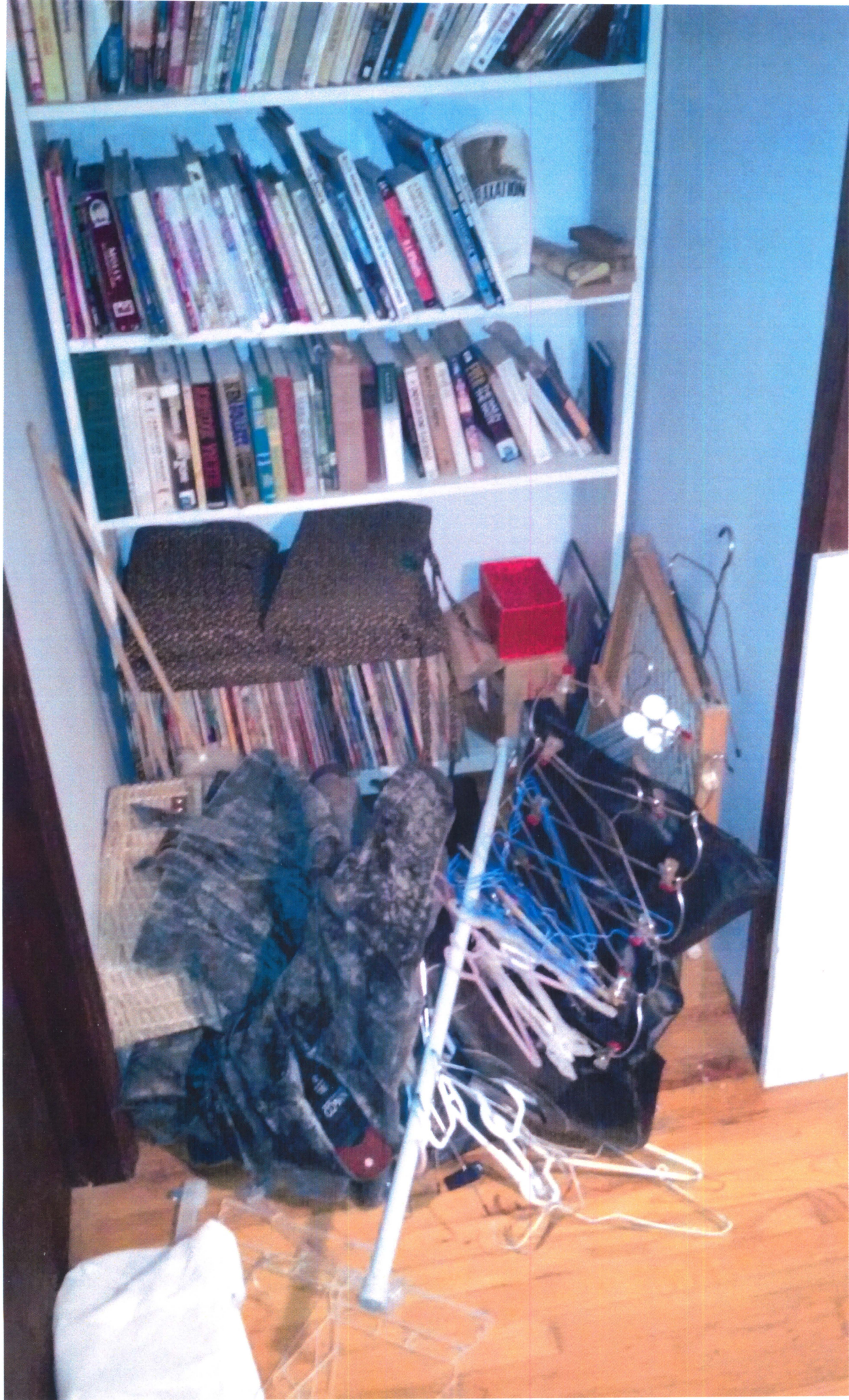
"Hospital Foot" - February 11 2017



"Hospital Foot" - February 11 2017



"Hospital Foot" - February 11 2017



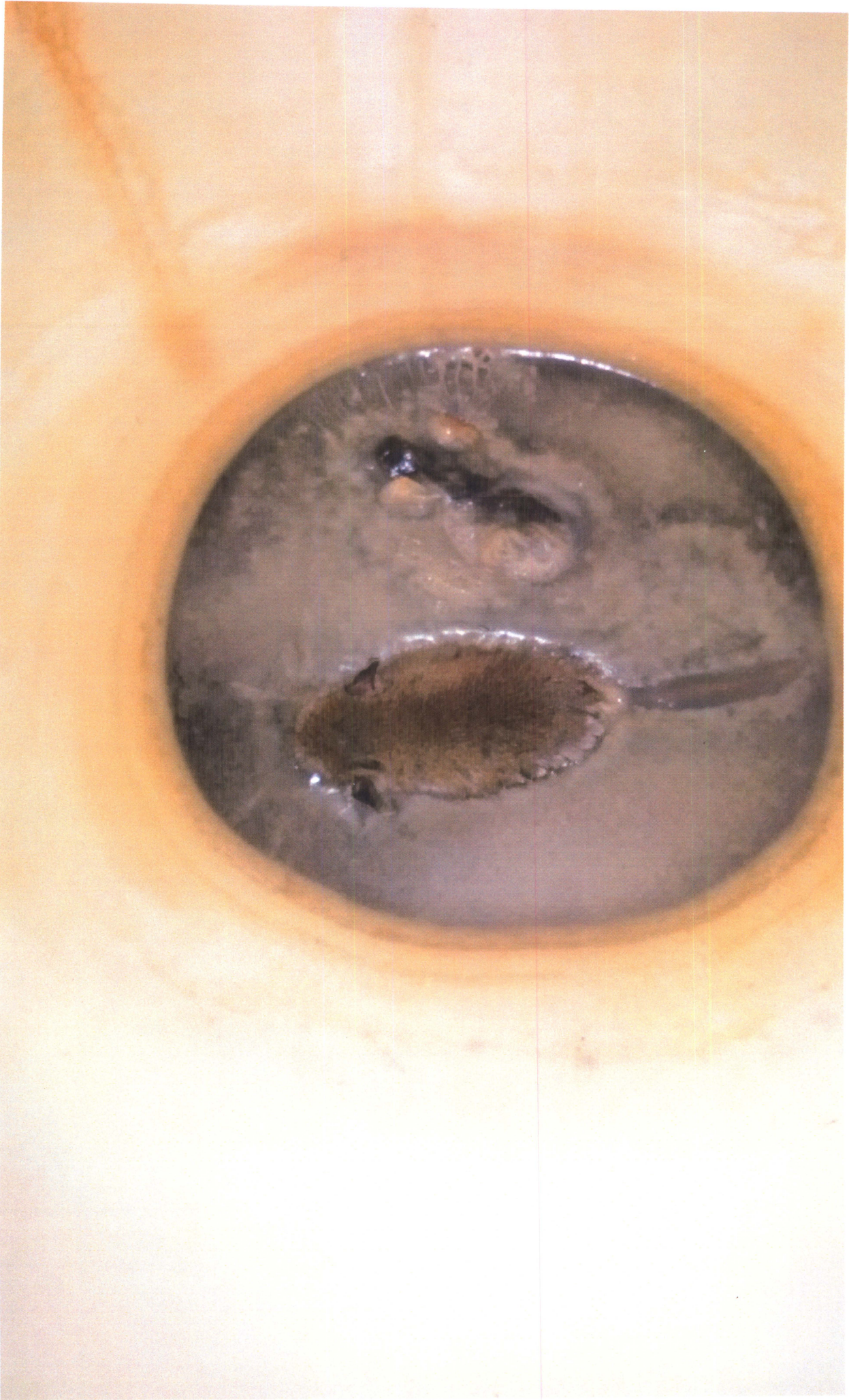
VANDALISM - 2016 #ratbringer - Returned from BSU



VANDALISM - 2016 #ratbringer -
Returned from BSU



VANDALISM - 2016 #ratbringer - Returned from BSU



VANDALISM - 2016 #ratbringer - Returned from BSU



Sustenna and Time Dilation effects

1 message

Bonze Anne Rose Blayk <bonzesaunders@gmail.com>

Tue, Mar 7, 2017 at 7:24 AM

Reply-to: bonze.blayk@databeast.com

To: kevin field <kevinfieldphd@hotmail.com>, Bonze Saunders <bonzesaunders@gmail.com>

The most remarkable - apparently undocumented - side effect of Sustenna I've experienced are Time Dilation effects, where time just seems to drag on and on... waiting 30 minutes for the bus to come back around to Jacksonville, where I was doing shopping at the Blueox store, I felt tremendous impatience - which is unusual for me - combined with an discomfiting sense of "hyper-reality" in my sense of my surroundings...

This is like a trip on an hallucinogenic drug, which drugs I have rarely used due to the risks involved! The literature claims that Sustenna has "inverse agonist" effects on the hallucinogenic serotonin 5HT-2A receptor, but it just seems hallucinogenic to me.

Thanks,
- AnneRose

"Signalling profile differences: paliperidone versus risperidone"

W P Clarke, T A Chavera, [...], and K A Berg

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3791992/>