

Name: Jeffrey Bodin | DOB: 5/22/1997 | MRN: 1002548110 | PCP: Callie Anne Linden, MD

Appointment Details

MRI Brain w wo Contrast

Tuesday December 15, 2020
Arrive by 8:30 AM CST
Starts at 9:15 AM CST (45 minutes)
[Add to Calendar](#)

University Medical Center
MRI Radiology Department
2000 Canal St
New Orleans LA 70112-3018
504-702-5700

Prepare for Your Visit

All questionnaires for this appointment will be available for you to answer on Tuesday December 08, 2020.

Directions for University Medical Center MRI Radiology Department

UMCNO Imaging Services, 1st floor of the Hospital (D&T)

Please report to University Medical Center New Orleans. The main patient entrances are on S. Galvez Street and Tulane Avenue. Free patient parking is available in our parking garage at 2001 Tulane Avenue. On the day of your appointment, report to the first floor of the Hospital (D&T). Swipe your valid driver's license or state-issued ID card at a kiosk and check in with the Patient Access Registrar. After completing registration, you will be directed to UMCNO Imaging Services on the third floor of the Hospital (D&T).

Visit Instructions

An MRI is a very noisy test. You will hear a lot of loud knocking noises throughout the exam. This is normal. You will receive either earplugs or music to help muffle the noise. These exams are very sensitive to motion. You will be expected to lay still for the entirety of the exam in order to get quality images. If you feel like you cannot lay flat and still for up to an hour, please let your doctor know.

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If you are claustrophobic, please let your doctor know so a prescription for a sedative can be placed for you. You will need to pick up this prescription from your pharmacy prior to your exam. Take as directed by your doctor. Please bring any pain medication if needed.

If you have any metal implants or devices, you are required to bring your implant card. Your exam may be delayed if you do not have the proper documentation. Please call the Radiology department if you have any questions or concerns.

Please arrive 15 minutes before your appointment time. Wear comfortable clothing that does not contain any metal snaps or buttons, such as a sports bra. Please remove any bobby pins, removable dental work, necklaces or chains, piercings and other jewelry, and hearing aids prior to your exam. For the safety of you and the technologist, do not bring any electronics, credit cards, keys, or other loose metal into the scan room.

This appointment cannot be canceled online. To cancel, please call 504-702-5700.

2020-12-28 Notes

- Did not attend appointment on 2020-12-15
- Had a grand mal seizure and had to reschedule

See (1/4)

- Attached images / photos taken of the seizure that morning

(1)

Screenshot_20201228-194826~2.png

- Time reference
- Screenshot of a phone call to reschedule MRI
- To
- Oncology // Scheduling (504-702-5700)
- At 7:50 am
- This post-waking up, after going BACK to sleep.
- Was my FIRST completed task. Post-waking.
- Ie
- Wake -> Seizure -> Bathroom
- Bathroom -> Bed/Sleep
- Bed/Sleep -> Wake -> Call 504-702-5700
- Get Up -> Bathroom -> Photos Ref Below

(2)

IMG_20201215_083858.jpg

- Sent by my mother, direct, to me.
- Ie 985-264-5277 to 985-272-8989
- At 7:53 am
- Photo was taken by my mother.
- At 8:38 am

(3)

PXL_20201215_134226788.PORTRAIT.jpg

- Taken by me
- R S Q2
- Facing phone deadpan expression

See (2/4)

- Attached images / photos taken of the seizure that morning

(4)

PXL_20201215_134240224.PORTRAIT.jpg

- Taken by me
- R S Q2 + Q4
- Head tilted to R
- 60 radians or so
- 2 o clock
- facing phone deadpan expression

(5)

PXL_20201215_134246444.PORTRAIT.jpg

- Taken by me
- Full 4 quadrants of face
- Staring forwards looking down at phone
- W head not tilted

(6)

PXL_20201215_134248303.PORTRAIT.jpg

- Taken by me
- L S Q1 is parital
- R S Q2
- L S Q3 is half
- R S Q4 is full
- Head is tilted 30 radians
- 1 o clock
- Head is facing 50 minutes || 300 radians

See (3/4)

- Attached images / photos taken of the seizure that morning

(7)

Screenshot_20201215-092142.png

- Time reference

- A text message sent by myself

- To

-- 985-237-8363 father

-- 985-264-5277 mother

-- 985-705-0513 sister

- Sent at

-- 8:41 am

- Screenshot taken at

-- 9:21 am

(8)

Screenshot_20201215-092147.png

- Time Reference

- A text message sent by myself

- To

-- 985-264-5277 mother

- At

-- 8:40 am

- Of

-- Above photo reference "(2)"

-- That was sent/received at 7:53 am

(9)

2020-12-28 screenshot_2020-12-15 days Adderall dosages (1)

- Medication reference

- Of days dosage of Stimulant Therapy

-- Narcolepsy wo Cataplexy

-- 1e 40 mg per dose

-- 1e 3 doses per day

- To show on day woke post going back to sleep.

- And the time took dosages.

- 1e abnormally late in day.

- After sleeping all day following seizure.

See (4/4)

- Attached images / photos taken of the seizure that morning

(10)

2020-12-28 screenshot_2020-12-15 days Adderall dosages (2)

- Medication reference
- Of days dosage of Stimulant Therapy
- Narcolepsy wo Cataplexy
- 1e 40 mg per dose
- 1e 3 doses per day
- To show on day woke post going back to sleep.
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Dr Brian Christopher Boulmay, ...
Work // University Medical Center • (...)



(1)

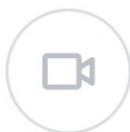
Oncology // Sch:
504-702-5700

- called at 7:50 am
- post waking fr seizure
- to cancel b/c seizure
- at 6:50 am~
- that had post-waking
- 6:40 am~ approx
- getting up bathroom then bak

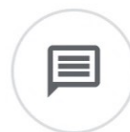
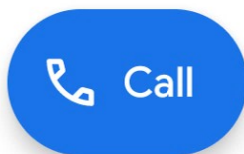


Outgoing call [HD]
Dec 15, 7:50 AM

8m 6s



Video call



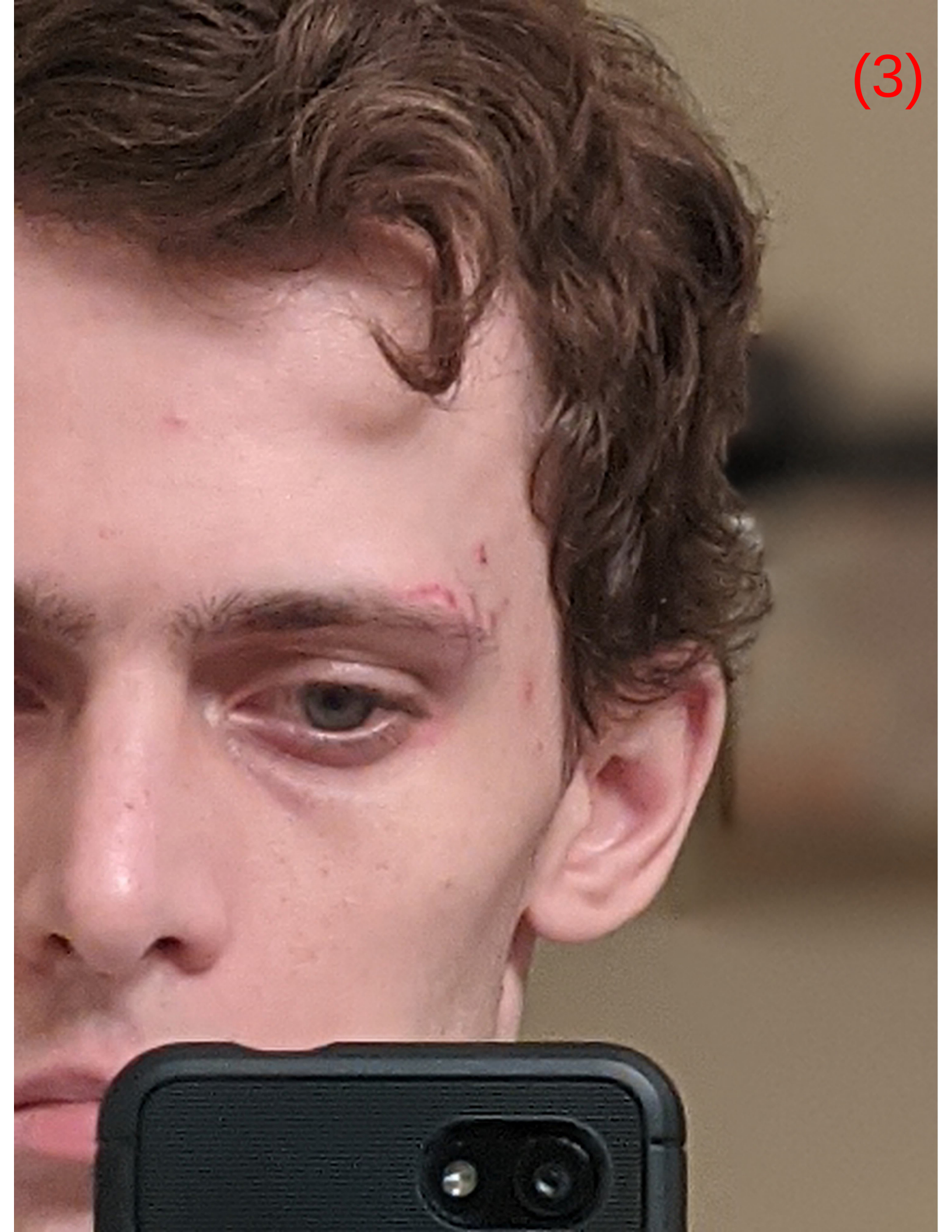
Message



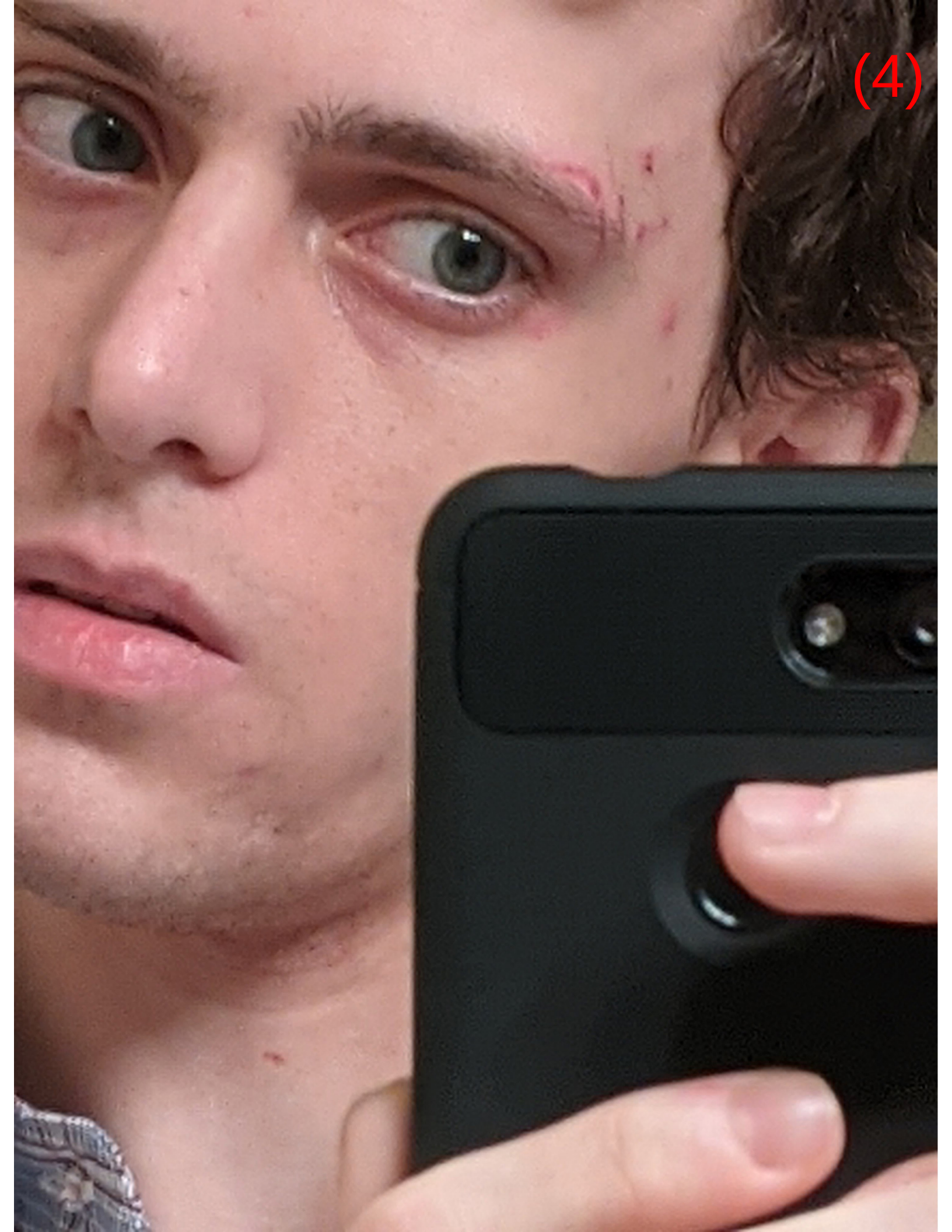
(2)



(3)



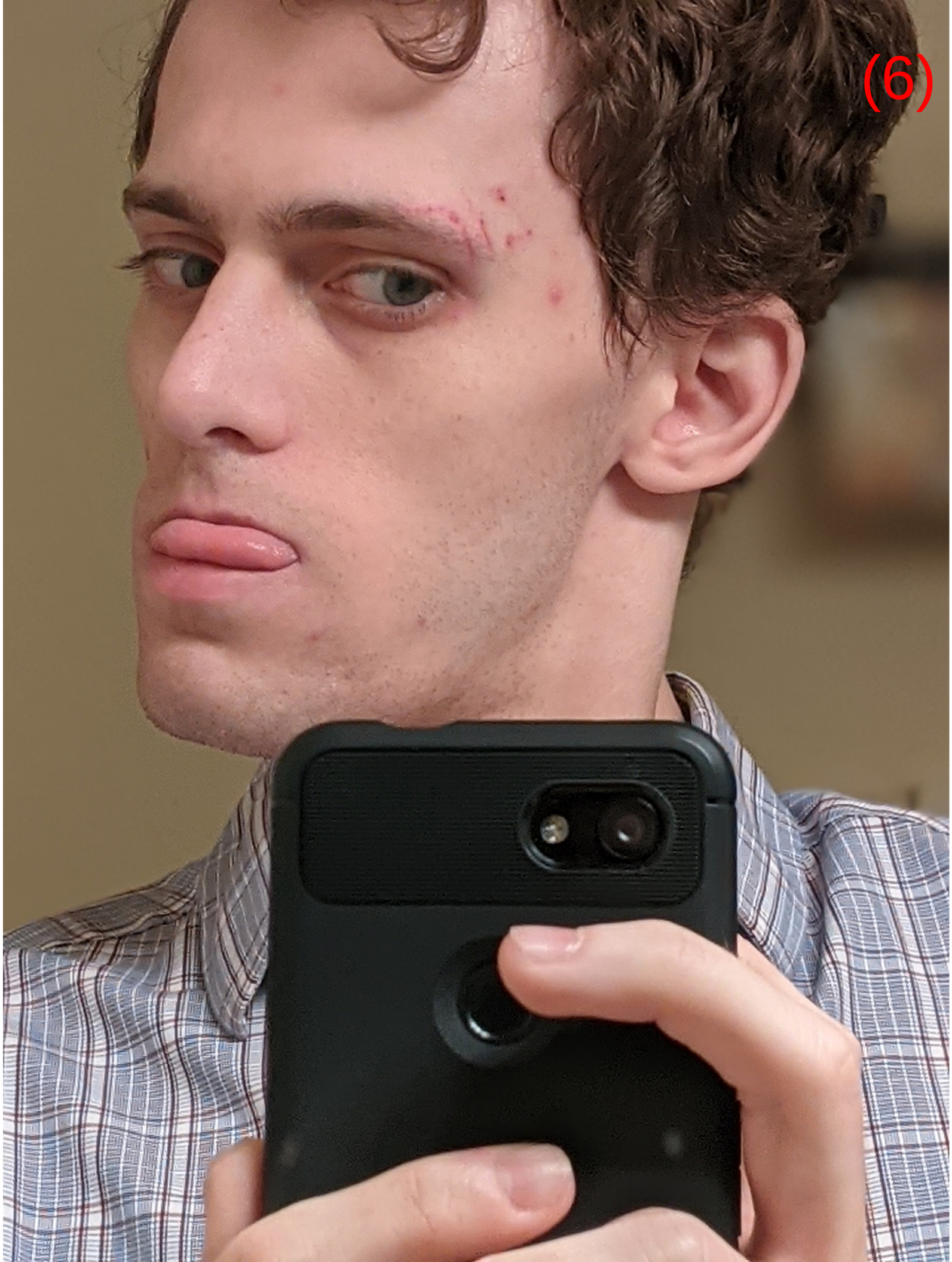
(4)



(5)



(6)



← Linda, Mark, Stephanie



(7)

- out entirely
- 20x rolls upstairs capacity
- 10 to 15 rolls capacity downstairs half bath

Note (Toilet Paper),

- 3 ply
- This is the large rolls.
- The one with the bears on it.
- le large "luxury" style
- 10 roll capacity upstairs bath
- 3 to 5 roll capacity downstairs half bath
- Not recommend
- is inefficient
- much less toilet paper per meter that the 2 ply
- 3ply has "thickness" in nm. Only slightly > 2ply.
- Is scam.

8:41 AM

2020-12-15_0840

Seizure (1)

Please bring me two 500 mg Tylenol. From the bottle and bag.

That is in the kitchen cabinet.

40 min • MMS



Text message





Linda Darlene Re...



(8)



Hello

7:53 AM



2020-12-15_0840

Seizure (1)

Please bring me two 500 mg Tylenol. From the bottle and bag.

That is in the kitchen cabinet.

41 min • Delivered



Text message



2020-12-15

(9)

3:57 pm took medicine (Adderall)

- 30 mg

- 10 mg

- 40 mg total dosage

4:37 pm medicine starts working (Adderall)

- 30 mg

- 10 mg

- 40 mg total dosage

6:37 pm medicine wears off (Adderall)

- 30 mg

- 10 mg

- 40 mg total dosage

6:56 pm took medication (Adderall)

- 30 mg

- 10 mg

- 40 mg total dosage

7:36 pm medication starts working (Adderall)

- 30 mg

- 10 mg

- 40 mg total dosage

9:36 pm medication wears off (Adderall)

- 30 mg

- 10 mg

- 40 mg total dosage

10:55 pm medication starts working (Adderall)

- 30 mg

2020-12-15

(10)

6:56 pm took medication (Adderall)

- 30 mg
- 10 mg
- 40 mg total dosage

7:36 pm medication starts working (Adderall)

- 30 mg
- 10 mg
- 40 mg total dosage

9:36 pm medication wears off (Adderall)

- 30 mg
- 10 mg
- 40 mg total dosage

10:55 pm medication starts working (Adderall)

- 30 mg
- 10 mg
- 40 mg total dosage

11:35 pm medication wears off (Adderall)

- 30 mg
- 10 mg
- 40 mg total dosage

1:35 pm medication starts working (Adderall)

- 30 mg
- 10 mg
- 40 mg total dosage



MRI Brain w wo Contrast

Wednesday December 30,
2020

Arrive by 8:00 AM CST

Starts at 8:45 AM CST (45 minutes)

[Add to Calendar](#)

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Get ready for your visit!

You've confirmed this appointment!

Review your questionnaire answers below.

[Communicable Disease Screening \(Print\)](#)

[MRI Screening Form \(Print\)](#)

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[Collapse](#)

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Communicable Disease Screening

For an upcoming appointment with on 12/30/2020

Here are the responses you submitted.

Question	Answer
Do you have any of the following new or worsening symptoms?	None of these
In the last month, have you been in contact with someone who was confirmed or suspected to have Coronavirus / COVID-19?	No / Unsure
Have you had a COVID-19 viral test in the last 14 days?	No

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MRI Screening Form

For an upcoming appointment with on 12/30/2020

Here are the responses you submitted.

Question	Answer
Do you have a pacemaker or pacemaker wires, defibrillator, aneurysm clips, stents, implanted pump, neurostimulators, bone stimulators, programmable shunt, or any other electronic or magnetic implant or device in your body?	No
Have you ever experienced any problems related to a previous MRI examination or MR procedure?	No
Have you ever had an adverse reaction to an MRI contrast agent?	No
Have you ever had an operation or surgery of any kind?	Yes
Do you have an artificial limb, prosthesis, or joint of any kind?	No
Have you ever had an injury to the eye or under your skin involving a metallic object or fragment (e.g., metallic slivers, shavings, foreign body, etc.)?	No
Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)?	No
Have you ever been a metal worker?	No
Do you have any body piercings?	No
Do you have any dentures or other dental implants?	No
Do you have any tattoos?	No
Do you have any hearing aids or cochlear implants?	No
Do you have a history of kidney or liver disease?	No
Are you wearing any medication patches (Nicotine, Nitroglycerine, etc.)?	No
Are you able to lie flat and still for one hour?	Yes
Are you claustrophobic or uncomfortable in enclosed spaces?	No