

15 contacts in 1 month

/ 7+ days on Constant Watch
7/23-7/30

7.6.19- Epstein Arrives and is placed in GP (on a Saturday)

7.8.19- Dr. [REDACTED] Intake Screening – Monday (No endorsements on PSIQ and had just returned from court) – clear mental status, no hx of mental health treatment or symptoms, no suicide history, nothing significant noted, CC1-MH assignment.

7.8.19- Dr. [REDACTED] Consults with Central Office regarding Epstein and Risk Factors and R&D was instructed to place him on psychological observation when he returns from court pending a SRA. He is placed on psychological observation at 6:00 p.m. Log book reflects he was asking I/C about how life is in GP and the crazy things he has seen as an I/C., about prison life, sleeping, pacing

7.9.19- Dr. [REDACTED] – Suicide Risk Assessment (placement on Psych Obs after court proceeding as a precaution/precautionary SRA) – No mental health history, no substance abuse history, no suicide history, no suicidal thoughts. Clear mental status. Denies suicidality, future oriented, wants to make phone calls and speak with his lawyer, enjoys life, learning and teaching, has a business in the community, spoke about being a mathematician and about his post graduate studies, good sense of humor, no acute sx's, Was eating when I arrived (cereal) and his log book was not significant for any symptoms. Recommended that he remain on psychological observation pending a suitable housing arrangement. (This writer spend 45 minutes interviewing him) – Log Book: he leaves for his legal visit at 8:20 am, returns at 2:00 pm and eats as well as goes to medical... leaves again around 3 pm and returns to cell around 8 pm from attorney visit. Talks to companion about the escort business, how to handle prison, about celebrities he knows, about prison food

7.10.19 – Dr. [REDACTED] – Psychological Observation Contact (remained on psy obs pending suitable housing placement with a cellmate) – indicated he did not like SHU because he is not comfortable there and said he wanted to be single celled. He expressed numerous needs: Colace instead of Ducolax, being able to walk around, no orange uniform, phone call, shower and towel, placement on the cadre unit, paper, pen, and property. Log book indicated he has been eating, sleeping and interacting with companions, went to his legal visit. Looking forward to bail hearing, realizes he will be here for a couple of weeks even if he gets bail. Inmate Epstein is to return to SHU with a cellmate (this is documented).

7.11.19- Dr. [REDACTED] – Psychological Observation Follow-up – Saw him in Attorney Conference area- he listed numerous concerns related to his confinement including receiving his property, feeling cold in his cell, not getting Colace, not having enough water in the attorney conference area and desire for more recreation, dislike of orange jumper and wanted brown one. This writer told him she would address in the SHU meeting. (I did not put in clinical note but It is worth noting he was kind of mocking me in the atty conference area about being placed on watch...he was smirking and said, "why would you ever think I would be suicidal, I am not suicidal and I would never be." – he said it in front of his attorney (palm beach one)...) ✓

7.18.19- Dr. [REDACTED] - Attempted SHU Review but he was in legal visit. ✓

7.23.19 – Dr. [REDACTED] – Suicide Risk Assessment – Epstein placed on SW after a string was found loosely hanging from around his neck. He said he does not remember what occurred that he had a drink of water, went back to bed, and then just remembers hearing himself snore. Epstein told the staff member watching him early this morning that his cellmate tried to kill him, but did not tell this to Dr. [REDACTED]. He denied any mental health symptoms or suicidality, denied feeling hopeless, reported future

plans including having fun, enjoying life and to learn. He wants to fight his case and go back to his normal life. At this time, it was not clear if he placed the string around his neck or whether someone else did. Remaining on SW for further observation and safekeeping.

7.24.19- Dr. [REDACTED] – Post Suicide Watch Report – Nature of incident unclear. Said he is fearful of returning to the cell with his previous cellmate. Recently, was denied bail. He said his cellmate was agitated and called him a pedophile and he had read a newspaper article about him. His cellmate threw away the newspaper photograph of him by crumbling it up and flushing it down the toilet. He thought it was strange he even had the article. He said he remembers his cellmate was “playing with a bed sheet” and he does not remember the events thereafter. “maybe he put it there as a joke” He just remembers eating and drinking and that waking up to hear himself snore up on a stretcher.

Epstein adamantly denied suicidality, “lots to do for legal case, wonderful life, interesting people and projects in life, it would be crazy to take my life, I would not do that to myself.” He did report feeling depressed and unhappy with his situation. He reported he slept well last night and was future oriented. Talked to companions about having taught math and physics and has been eating, sleeping, drinking. He wanted hygiene products and to shower.

Log book: talking about jail to I/C, sleeping, brushes teeth, drinking. Goes to legal visit all morning. Discussing investment strategies, inmate safety, and prison adjustment with the I/C. He washes his face, rests, and sleeps.

7.25.19 – Dr. [REDACTED] – Psychological Observation Contact – Smiled “welcome back”; good spirits. He says he still does not remember how he got markings on his neck. “maybe you can give me cues.” He remembers going for a drink of water and the next thing he knew he woke up to the sound of his own snoring. Reported being unhappy with SHU due to the restrictions and noise and he said his requests have not been granted for phone calls and recreation. He is unhappy that he is not taken to the bathroom enough during attorney/conference visits. Denied suicidality, stated he is too vested in case to fight it and I have a life and I want to go back living my life.” No acute mental health symptoms were noted.

Log Book: He had been eating, drinking, and sleeping. Also showers, brushes teeth, and goes to legal visit. Talks to I/C about business and investing, life lessons, and tells I/C he does not want to go to SHU in lieu of GP and wants to know about the conditions of various housing units.

7.26.19 – Dr. [REDACTED] - Psychological Observation Contact- Smiling and cracking some jokes. Disappointed in writer that his various requests in the prison have not been adhered to. “I have to trust you if you want to trust me” He elucidated many complaints with legal visiting procedures, his constipation medication, and conditions of SHU confinement and prison restrictions. He stated he still does not know how he got the marks on his neck, that he did not remember if he did something or his cellmate did. He denied any symptoms of psychosis, depression, or anxiety. Denied suicidality; He stated he would never harm himself as he wants to be alive to fight his legal case and go back to live his life. He remarked he is “a coward... I am Jewish.” He said he does not like pain and never attempt to harm himself.

Log Book: sleeping, talks to I/C about BOP policy including phone visits and usage, Talks to I/C about business and investing, life lessons, and tells I/C he does not want to go to SHU in lieu of GP and wants to know about the conditions of various housing units.

✓ 7.27.19- Dr. [REDACTED] - **Psychological Observation Contact** - reports no memory of events that caused marks on his neck; did report difficulty sleeping in SHU due to noise; anxious about returning to the SHU because he does not know how he got the marks or why it happened. He ate, drank, went to legal visit, and interacted with the inmate companions talking about business and investing topics. Reported good support from friends and lawyers, denied mental health sxs or suicidality, said he felt dehydrated and medical was notified. Provided with self-help handouts.

Log book: eating, sleeping, sitting on bed, legal visit, asking for toilet tissue, talking about life in GP

✓ 7.28.19- Dr. [REDACTED] - **Psychological Observation Contact** - noted he is in attorney visits 12 hours a day, logs indicate he speaks about life in general population; reported his right arm felt numb and he had been seen by medical. Flushing of the toilet in his cell was aversive; told writer maybe he has Autism because sounds/noise are aversive to him like "the Rain Man." Mildly anxious mood; provided with Turning point handouts and supportive interventions. Eating when in the cell, but otherwise, eating in Attorney conference.

Log Book: Upset about non-stop flushing of toilet, goes to legal visit most of day, talks to I/C later about who is best cook on 11N, investments, driving a taxi in NY, sleeping.

✓ 7.29.19- Dr. [REDACTED] - **Psychological Observation Contact** - continues to report no memory of the event which lead up to him being placed on SW/Psych Obs. He requested to stay on psychological observation another day so that he could get a good night's sleep. NO mental health sxs or suicidality was reported or noted, he ate and has been attending legal visits. Wanted to remain on psychological observation because it is more comfortable and not noisy like SHU. It was explained that psychological observation cannot be continued long-term for the purposes of being more comfortable and that the purpose of psych obs is to stabilize mental health problems. His only concerns are getting his various needs met in the prison including more phone calls, recreation, and being placed in a comfortable and safe place. He was informed he would be housed in a safe situation in the SHU.

Log Book: showers, eats, writes in note pad, drinks water, legal visit, talks to I/C about investment options, his jail appeal, sleeps.

✓ 7.30.19- Dr. [REDACTED] - **Psychological Observation Contact and Discontinuation** - waiting to go to SHU to get CPAP machine as he did not sleep well without it. Said SHU is noisy and he is concerned about sleeping well there and he said he did not get one of his medications yet that day. He ate meals, drank liquids, showered, no mental health sxs, no suicidality. SHU Lt. informed inmate Epstein needs to be housed with an appropriate cellmate while in SHU. (Dr. Imeri followed up with an e-mail). Inmate remained on observation until brought to his attorney conference visit.

Log book: Sleeping, eats breakfast, talks about jail life, taken off of psych obs status at 8:15 a.m., goes to his legal visit, and later to SHU.

7.31.19- Dr. [REDACTED] - **Psychological Observation Follow-up Session** - denied suicidality, no mental health sxs, slept well and was getting reading for court hearing. Reported getting along with cellmate in SHU.

8.1.19- Dr. [REDACTED] - SRA was conducted– Court sent a form “suicidal tendencies” Denied any suicidality; friends and lawyers supportive; Jewish-against his religion; still denies knowing what happened to him on 7/23/19 when he was discovered with a string loosely tied around his neck. Said his incident report for self-mutilation was expunged. His cellmate is talkative but he will give it a chance. Noisy in SHU. He lives for fighting this case and going back to his normal life.

8.8.19- Dr. [REDACTED] - for a follow-up session to assess adjustment in SHU. No acute symptoms, distress or mental health concerns; denied suicidality, some concerns with sleep. Happy he received his PAC # to make phone calls and requested to speak with someone without it being on a speakerphone. Wanting his books he left in the suicide watch area. Interacting and getting along with his cellmate. Getting ready of this attorney visit.

8.10.19 – Found Unresponsive and Hanging in SHU at 6:30 a.m. (10 days after his removal from a constant observation)