

Summary of events and exhibits from the papers I received from the Hospital

My husband was a very proud to be a veteran, and serve the country he loved. He never complained of his health, which was 100% service connected. He talked often about if something happened to him, he knew his beloved country would take care of me. He was very proud of that. We had bought some land and were in the process of purchasing a modular home with ramps and enlarged doorways so he could come home. He was getting excited about setting in the garden and watching the deer. I was planning healthy meals to prepare to get some of that wt. off of him. My life was about to be just about perfect. I live in an apartment at the top of many steps, so after the VA talked him in to having one leg removed, he had to live in the nursing home. The day Frank passed away, the lawyers were doing a title search for our VA loan for our house, another 45 days Frank would have been home.

On June 14, 2006 Frank called me and said they were taking him on a day trip to the Washington VA Hospital, because they have a skin doctor there. Said he would be back to the nursing home that evening. Who could have imagined that 8 days later he would be dead. ~~In exhibit A~~ I show they were aware he had been sitting up sleeping for a year, because of his wt he had trouble breathing laying flat. The first thing they did was put him in a bed flat on his back, exhibit B will show they stored his wheelchair, they figured he would never need it again. When they checked him in they asked questions. Exhibit C show he had no advance directives, ~~Exhibit D~~ shows Code status not checked, .

Exhibit E Shows that Frank was having a hard time breathing My question why wasn't something done for him ? Why wasn't he put he put in ICU? That was on 6/16/2006 ~~Exhibit F~~ show his bed still low , so he can't breathe and no phone available.

Frank woke me up every morning at 6 we talked about my day plans and every night I called him to say goodnite and I love you. When they put Frank in a private room, with no phone. When I called him I had to call the nurses station they would make me wait, I might add it was long distance from WV for 30 min or better, when they gave him the phone they would stand over him and listen. I asked him, what's wrong he wouldn't say anything, then I would say are they standing there he would say Yes. He told me he was really upset and that he was going to talk to his patient advocate, To Frank that was his lawyer when he didn't like what was going on. After his death, I called the Patient Advocate, they had no record he was in the hospital. You can check. He was asking for the patient advocate and they didn't get him, why? The very people that was suppose to be watching out for Franks rights, didn't even know he was in the Hospital. Because they had him locked behind closed doors, no phone, laying flat on his back, naked with just a sheet, no PJs remember he didn't bring anything with him. He told me was cold, like a stupid person, unaware what they were trying to do, I said ask for a blanket. I believe they (they skin doctor) was and succeeded to put my husband in PTSD, which he had. He couldn't stand a door closed, he couldn't breathe laying flat on his back, he had to have a phone to talk, refusing to get the patient advocate, all things that would put him in PTSD. ~~Exhibit G~~ He pulled his IV out, another sign PTSD. Please tell me in a VA hospital they couldn't recognize PTSD? ~~Exhibit H~~ pt prefers to stay in bed, No way only if his PTSD was working.

~~Exhibit I~~ pt feels depressed asked for chaplain again PTSD WHY WASN'T SOMETHING DONE FOR MY HUSBAND? The signs were there. Why didn't they call his wife?

Exhibit J The morning of his death the doctor walks in and says Frank told me yesterday he wanted DNR, what conversation did they have? if you are going to torture me to death let me die? Where was the written paper? I truly believe the doctor for Frank saw a over wt man living in a nursing home and said to himself "the best way to deal with the fact I can't heal the leg is to bury the patient "after all he is in a nursing home. The skin doctor treated the leg and didn't care if he killed the patient doing it. Why else would he lay him Flat on his back when he knew he couldn't breathe, and when it took its toll, why not move him to ICU? When PTSD became apparent why not stop the treatment and deal with the PTSD? I truly believe my husband was tortured to death. A veteran in American Hospital in our Nations Capital. My husband wanted to live and come home to me, and for what ever reason the doctor had made sure that did not happen. I feel it was a wrongful death and I worry how many other patients under his care have met with similar fate. If you can't help me please do an investigation of the other patients under their care, see how many deaths.

Sincerely

Ella La Jaye Marie Oglesby

Progress Note

Printed On Jan 15, 2008

Pt has red sacrum, perineum and scrotum.

/es/ ROSE MYLES

rn

Signed: 06/15/2006 07:57

Exhibit B

LOCAL TITLE: MHS� NURSING INITIAL ADMISSION ASSESSMENT
 DATE OF NOTE: JUN 15, 2006@02:18 ENTRY DATE: JUN 15, 2006@02:18:14
 AUTHOR: MYLES, ROSE EXP COSIGNER:
 URGENCY: STATUS: COMPLETED

NURSING INITIAL ADMISSION ASSESSMENT
 (may be completed by any level of nursing)
 DATE AND TIME OF ARRIVAL TO UNIT: 1900 15 Jun, 06

DEMOGRAPHICS:

Age : 57
 Sex : MALE
 Race : WHITE
 Religion : METHODIST
 Language : English
 Marital Status: Married

Emergency notification:

Name : Ellen Oglesby
 Relationship to patient: wife
 Home phone: 304-822-7444
 Other phone Number:
 Work phone:

VALUABLES:

jewelry (list) : none
 money (list) : none
 clothing (list): tee shirt, cap
 glasses
 dentures : None
 other (list) : electric scooter which was taken down by EMS

Disposition of valuables: Patient

REASON FOR ADMISSION: Patient states infection

ADMITTING DIAGNOSIS : Cellulitis

HEALTH HISTORY : diabetes, hypertension, renal insufficiency, other:venous insufficiency

LIST MEDICATIONS (OTC, homeopathic, from outside MDs):

Other med : insulin
 Last taken : yseterday

ALLERGIES:

NKDA

Level of consciousness: oriented, verbally responsive

PATIENT NAME AND ADDRESS (Mechanical imprinting, if available)

OGLESBY, FRANCIS
 97 S MAIN ST
 SEATTLE, WASHINGTON 98104
 5 8607670

VISTA Electronic Medical Documentation

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Progress Note

Exhibit ~~1~~ C 7 ~~8~~
Printed On Jan 15, 2008

VITAL SIGNS:

Temp : 96 F [35.6 C] (06/14/2006 19:30)
Pulse : 87 (06/14/2006 19:30)
Resp : 20 (06/14/2006 19:30)
BP : 148/64 (06/14/2006 19:30)
Pain : 4 (06/14/2006 19:30)

Advance Directives:

- a. Do you have an Advance Directive? No
- b. Would you like to complete an Advance Directive? No
- c. Would you like additional information about advance directives?
No
- d. Would you like information about becoming an organ donor?
No

INTERDISCIPLINARY ASSESSMENT / DISCHARGE SCREENING

- 1. Do you live alone? No; if no, who do you live with? nsg home
- 2. Do you anticipate a need for assistance with ADLs on discharge? Yes
- 3. Are you a caregiver for a significant other? No
- 4. Have you been followed by Home Care? Yes
- 5. Have you been hospitalized in the past 90 days? Yes
- 6. Does patient show any signs/symptoms of abuse or neglect? No
- 7. Are there any cultural/religious practices that we need to be aware of? No
- 8. Would you like to see a chaplain? No

Source of information obtained from: patient, other: medical record
Patient/Family oriented to room/protocols: Bathroom, Bed controls, Call light, Pain Scale/Management, Patient Handbook, Patient rights and responsibilities, Smoking, TV/Phone, Visiting hours, Unit policies
Level of understanding: fair

/es/ ROSE MYLES

rn

Signed: 06/15/2006 02:32

LOCAL TITLE: NURSING TRANSFER NOTE

DATE OF NOTE: JUN 14, 2006@19:59

ENTRY DATE: JUN 14, 2006@20:00:03

AUTHOR: ADELEYE, JOHN A

EXP COSIGNER:

URGENCY:

STATUS: COMPLETED

NURSING TRANSFER SUMMARY

Admission Date: JUN 14, 2006 15:11

Transfer From: AEC

To: 4 E

Isolation Status:

PATIENT NAME AND ADDRESS (Mechanical imprinting, if available)

OGLESBY, FRANCIS
97 S MAIN ST
SEATTLE, WASHINGTON 98104
508607670

VISTA Electronic Medical Documentation

Printed at WASHINGTON

VistaWeb
OGLESBY, FRANCIS A JR

Progress Notes
***-**-7670

9/19/2011
DOB: 05/21/1949

NURSING TRANSFER NOTE

Site: Washington, DC

Date: 06/14/2006 19:59 Author: JOHN A ADELEYE Location: 4E MED

LOCAL TITLE: NURSING TRANSFER NOTE

STANDARD TITLE: NURSING TRANSFER SUMMARIZATION NOTE

DATE OF NOTE: JUN 14, 2006@19:59

ENTRY DATE: JUN 14, 2006@20:00:03

AUTHOR: ADELEYE, JOHN A

EXP COSIGNER:

URGENCY:

STATUS: COMPLETED

NURSING TRANSFER SUMMARY

Admission Date: JUN 14, 2006 15:11

Transfer From: AEC

To: 4 E

Isolation Status:

Code Status:

Full Code

DNAR

Advanced Directive:

None

Sent with chart

Next of Kin: OGLESBY, ELLEN

Relationship:

Home Phone No: 304-822-7444

Work Phone No:

Patient Problem List:

Chronic Renal Insuff

Diabetes Mellitus Type II or unspecified

Hypercholesterolemia

Hypertension

Impotence, Organic Origin

Pemphigoid, Bullous

Medications/IV:

Oxycodone 5mg/Apap 325mg (Percocet Inp) Two Tablets PO Q6H prn

Heparin Inj, Soln SC TID

Acetaminophen 325mg Tab 650mg PO Q6H prn

Docusate 100mg Cap, Oral 200mg PO Qdaily

Hydrochlorothiazide Tab 50mg PO Qdaily/Hold if Sbp <90

Insulin Nph Human Inj 48 Units SC BID Insulin

Metoprolol Tab 50mg PO Bid/Hold if Sbp <90 or Hr <50

Nystatin Oint, Top Liberally Topical Bid/Apply to groin area

Polyethylene Glycol 3350 Powder, Oral 2 Tablespoonfuls PO Qdaily/Dissolved in cup of water.

Sertraline Tab 100mg PO Qdaily

Exhibit D

Risperidone Tab PO QHS
in Sodium Chloride 0.45% Inj. 1000 Ml/75 ml/hr
in Vancomycin 1000mg In D5w 200 Ml/Infuse Over 120 Min. BID
in Ciprofloxacin 400mg In D5w 200 Ml/Infuse Over 60 Min. BID
in Zosyn 3.375 Dextrose 5% 50 Ml/Infuse Over 30 Min. Q6H

Wandering bracelet removed: Yes Not applicable

Allergies: Patient has answered NKA

VITAL SIGNS:

WEIGHT 277.2 lb [126.0 kg] (12/01/2005 19:35)
PULSE 87 (06/14/2006 19:30)
RESP 20 (06/14/2006 19:30)
TEMP 96 F [35.6 C] (06/14/2006 19:30)
BP 148/64 (06/14/2006 19:30)
Pain 4 (06/14/2006 19:30)

Diet:

Behavioral Status:

- appropriate
- not appropriate
- cooperative
- not cooperative

Mobility Status:

- Moves all extremities
- Limitations (list):

Treatments/Therapies: Antibiotics

Protocols/SCP:

Reason for transfer: Cellulitis

Transfer Note: Report given to Mr. Mapanao RN

/es/ JOHN A ADELEYE

RN

Signed: 06/14/2006 20:03

User Class: Nursing Service Providers (03/15/2002 00:00 to 10/09/2008 00:00)

Printed by: LILLA , BARBARA A

Sensory perception :3 - slightly limited
Moisture :2 - moist
Activity :1 - bedfast
Mobility :3 - slightly limited
Nutrition :3 - adequate
Friction and stress:2 - potential problem
Braden score (total) :14

At risk : < or = 18 (initiate the Potential Pressure Sore Protocol)

Preventive measures initiated: air mattress

Color : mottled

Character: warm, clammy

Skin problems:

Vascular ulcer : LLE

Other:

edema : RLE, LLElower back

rash/lesion : location : l leg, r leg, abdomen, buttocks, scrotum
describe : red, thickened skin with open draining

lesions

Pressure ulcer :

No

SURGICAL /TRAUMATIC WOUND:

not applicable

CARDIAC:

Vitals: stable

Peripheral vascular:

edema, warm

NEURO/PSYCH:

LOC: alert

Orientation:

oriented

Behavior:

agitated

MOTOR:moves all extremities or at patient's baseline

FUNCTIONAL:

needs assist

SAFETY/RISK FACTORS:

Yes - falls, other:

Please describe briefly and identify intervention.

assist with ADLs

MEDICAL IMMOBILIZATION OR SAFETY DEVICES:

Present :No

PATIENT EDUCATION:

Teaching considers patient's readiness to learn and other factors that may affect learning. Patient received verbal information about:

- Medications, purpose, common side effects, drug-food interactions, if any, and current dose:
ambien

Level of understanding:fair

PATIENT CLASSIFICATION: 3

NURSING CARE PLAN:

Progression towards Nursing Care Plan Outcomes/Goals: moderate

Nursing Care Plan: current

Initial or revised Nursing Care Plan has been discussed with patient or significant other: Yes

PROGRESS NOTE: Pt c/o inability to breathe. He was pursed lip breathing, with audible wheezing. His lips were dusky and face mottled red. Pt was satting 100% on O2 5L. HC examined the pt. Pt received ambien for sleep. Will monitor pt's comfot and breathing pattern.

/es/ ROSE MYLES

Exhibit J

Progress Note

Printed On Jan 15, 2008

LOCAL TITLE: CONSULT DERMATOLOGY OUTPT
 DATE OF NOTE: JUN 27, 2006@19:13 ENTRY DATE: JUN 27, 2006@19:13:36
 AUTHOR: GAINES, MICHELLE J EXP COSIGNER:
 URGENCY: STATUS: COMPLETED

DERM CONSULT COMPLETED. SEE DERM NOTE DATED 4/4/06.

/es/ MICHELLE J. GAINES
 ADMISSION COORDINATOR
 Signed: 06/27/2006 19:13

LOCAL TITLE: MED: ATTENDING ON SERVICE NOTE
 DATE OF NOTE: JUN 21, 2006@17:00 ENTRY DATE: JUL 31, 2006@12:25:04
 AUTHOR: FASELIS, CHARLES EXP COSIGNER:
 URGENCY: STATUS: COMPLETED

Medical Attending On Service Note:

I have written this note after Mr. Oglesby has died.

On June 21 Mr. Oglesby was found unresponsive in his room. The Code Team was called to intubate the patient and I was contacted at this time. I informed them that Mr. Oglesby had told us that he wanted to be DNR/DNI and the code team was called off.

Earlier that morning we had round on him and he was doing much better in terms of his infection. His vitals were stable and he was in no distress.

When I spoke extensively to his wife later that night I informed her that we did not know the exact cause of death but I would assume that this had to be possibly a cardiac event (ischemia, malignant arrhythmia) and less likely pulmonary embolus since he was on DVT prophylaxis.

/es/ CHARLES FASELIS, MD
 ASST CHIEF MEDICAL SERVICE
 Signed: 07/31/2006 12:32

LOCAL TITLE: NURSING RN REASSESSMENT (REV)
 DATE OF NOTE: JUN 21, 2006@13:42 ENTRY DATE: JUN 21, 2006@13:42:53
 AUTHOR: MARAH, FEREMUSU I EXP COSIGNER:
 URGENCY: STATUS: COMPLETED

RN REASSESSMENT

VITAL SIGNS: Please see vital signs tab on CPRS.

PATIENT NAME AND ADDRESS (Mechanical Imprinting, if available)

OGLESBY, FRANCIS
 97 S MAIN ST
 SEATTLE, WASHINGTON 98104
 508607670

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Drug not FDA approved
*Check Ref***Lab Result**

Printed On Jan 15, 2008

3. This real-time PCR assay was developed and its performance characteristics determined by the Infectious Diseases Laboratory, VAMC, Washington, DC. It has not been cleared or approved by the U.S Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This Laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high complexity clinical laboratory testing.

06/21/2006 11:12	BLOOD	WBG:	107	mg/dl	70 to 121
BU 4EN					
Test performed Marah, Feremusu					
06/21/2006 05:20	BLOOD	WBG:	70	mg/dl	70 to 121
BU 4EN					
Test performed Stroman, Theres					
06/21/2006 04:30	SERUM	VANCOMY:	11.1	mcg/ml	
06/20/2006 17:50	BLOOD	WBG:	110	mg/dl	70 to 121
BU 4ES					
Test performed Lubin, Brenda					
06/20/2006 04:44	BLOOD	WBG:	77	mg/dl	70 to 121
BU 4ES					
Test performed Pelatiah, Fonba					
06/20/2006 04:30	SERUM	VANCOMY:	15.7	mcg/ml	
06/20/2006 04:30	SERUM	FE:	24 L	mcg/dl	44 to 136
06/20/2006 04:30	SERUM	FERRITIN:	45.0	ng/mL	20 to 300
06/20/2006 04:30	SERUM	TRNSFR:	188.6 L	mg/dl	191 to 304
06/20/2006 04:30	SERUM	IBC CAL:	226.3 L	mcg/dl	229 to 365
06/19/2006 21:55	BLOOD	WBG:	73	mg/dl	70 to 121
BU 4EN					
Test performed Liser, Verna					
06/19/2006 16:34	BLOOD	WBG:	55 L	mg/dl	70 to 121
BU 4ES					
Test performed Liser, Verna					
06/19/2006 11:41	BLOOD	WBG:	69 L	mg/dl	70 to 121
BU 4EN					
Test performed Lubin, Brenda					
06/19/2006 05:41	BLOOD	WBG:	71	mg/dl	70 to 121
BU 4EN					
Test performed Muena, Catherin					
06/19/2006 04:30	SERUM	VANCOMY:	10.3	mcg/ml	
06/18/2006 21:12	BLOOD	WBG:	60 L	mg/dl	70 to 121
BU 4EN					
Test performed Price, Mary					
06/18/2006 18:22	BLOOD	WBG:	80	mg/dl	70 to 121
BU 4ES					
Test performed Price, Mary					
06/18/2006 16:15	BLOOD	WBG:	42 L*	mg/dl	70 to 121
Repeated Test					

PATIENT NAME AND ADDRESS (Mechanical Imprinting, if available)

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508607670

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Progress Note

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PULMONARY:

Breath sounds: clear

PROGRESS NOTE: Noted pt was alert and verbally responsive but sleepy that was 0800, pt was then monitored, rn went in to give pt iv abx and noted pt was unresponsive with no respiration and no pulse, charge nurse notified at 1130-45, code was call stat unable to see pt code status in MD's order, team unable to resusuite the pt, head nurse was also present during the code.

/es/ FEREMUSU I MARAH

RN Agency Nurse

Signed: 06/21/2006 13:58

LOCAL TITLE: CONSULT ECHO INPT

DATE OF NOTE: JUN 21, 2006@11:58

ENTRY DATE: JUN 21, 2006@11:59:01

AUTHOR: GREENBERG, MICHAEL D EXP COSIGNER:

URGENCY:

STATUS: COMPLETED

Interpretation Summary

A two-dimensional transthoracic echocardiogram with M-mode and Doppler was performed. Limited study. Normal LV cavity size with normal wall thickness and unable to evaluate systolic function due to poor acoustic windows. The LA is dilated. The aortic root is not well seen. The MV leaflets are thickened, particularly the posterior leaflet; there is mild MR. The aortic valve opens normally. There is some TR with estimated PA systolic pressure at least 35 mmHg. There may be a small pericardial effusion.

/es/ MICHAEL D. GREENBERG, MD

Cardiology Attending

Signed: 06/21/2006 11:59

LOCAL TITLE: ANESTHESIOLOGY NOTE (E)

DATE OF NOTE: JUN 21, 2006@11:39

ENTRY DATE: JUN 21, 2006@11:39:58

AUTHOR: EDWARDS, KAREN D EXP COSIGNER:

URGENCY:

STATUS: COMPLETED

Responded to the Code Blue. The patient was being ven. tilted with ambu bag and mask. He was immediately intubated using a MAC#4 Blade and a #8 ET tube. Bilateral breath sounds were equal and the CO2 Color indicator was positive. The ET tube was taped at 22cms at the crease of the lips. The patient was left to the care of the code blue team.

/es/ KAREN D. EDWARDS

PATIENT NAME AND ADDRESS (Mechanical imprinting, if available)

OGLESBY, FRANCIS
97 S MAIN ST
SEATTLE, WASHINGTON 98104
508607670

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Ellen LaFaye Massie Oglesby
HC65 Box 1350
Romney, West Virginia 26757

3-4-10

Subject: Administrative Tort Claim

To Whom It May Concern

This is my request for reconsideration of my claim for wrongful death of my husband Frank Oglesby. On June 21, 2006 the code team was called to intubate the patient and was working on him when Charles Faselis walked in and stopped them. He said that the patient had told him the night before he wanted to be DNR?DNI and the code teamed stopped. THE LAW SAYS A DNR HAS TO BE IN WRITING AND WITNESSED BY TWO PEOPLE IN WRITING. THE TEAM WORKED ON MY HUSBAND BECAUSE THERE WAS NO DNR ON FILE. There for the team broke the law listening to this horrid Doctor, and the Doctor broke the law. If they had continued, Frank could be alive today. I have also gotten paperwork showing drugs that were not FDA approved were being experimented on Frank. I do not believe my case was ever looked at, because my witness said she was never interviewed. Our President has said to the reporters that he is against torture of terrorist. I am sure he will be against the torture of a veteran of the U.S. received at the hands of Dr. Charles Faselis in a Washington VA Hospital. Anyone who reads what they did to him would find in my favor.

Ellen La Faye Massie Oglesby

JS 44 (Rev. 12/07)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON THE REVERSE OF THE FORM.)

I. (a) PLAINTIFFS

ETIEN LAFAYE Massie Oglesby

DEFENDANTS

United States

(b) County of Residence of First Listed Plaintiff Hamshire Co
(EXCEPT IN U.S. PLAINTIFF CASES) Romney N.V.

County of Residence of First Listed Defendant United States
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE LAND INVOLVED. **FILED**

(c) Attorney's (Firm Name, Address, and Telephone Number)
NONE

Attorneys (If Known)

NOV 17 2011

US DISTRICT COURT

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- 1 U.S. Government Plaintiff
- 3 Federal Question (U.S. Government Not a Party)
- 2 U.S. Government Defendant
- 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- | | | | | | |
|---|---------------------------------------|----------------------------|---|----------------------------|----------------------------|
| | PTF | DEF | | PTF | DEF |
| Citizen of This State | <input checked="" type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business In This State | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

IV. NATURE OF SUIT (Place an "X" in One Box Only)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES	
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excl. Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input checked="" type="checkbox"/> 360 Other Personal Injury <u>Wrongful Death</u>	PERSONAL INJURY <input type="checkbox"/> 362 Personal Injury - Med. Malpractice <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 610 Agriculture <input type="checkbox"/> 620 Other Food & Drug <input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 630 Liquor Laws <input type="checkbox"/> 640 R.R. & Truck <input type="checkbox"/> 650 Airline Regs. <input type="checkbox"/> 660 Occupational Safety/Health <input type="checkbox"/> 690 Other LABOR <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Mgmt. Relations <input type="checkbox"/> 730 Labor/Mgmt. Reporting & Disclosure Act <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Empl. Ret. Inc. Security Act IMMIGRATION <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 463 Habeas Corpus - Alien Detainee <input type="checkbox"/> 465 Other Immigration Actions	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 840 Trademark SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 810 Selective Service <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 875 Customer Challenge 12 USC 3410 <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 892 Economic Stabilization Act <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 894 Energy Allocation Act <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 900 Appeal of Fee Determination Under Equal Access to Justice <input type="checkbox"/> 950 Constitutionality of State Statutes
REAL PROPERTY	CIVIL RIGHTS	PRISONER PETITIONS			
<input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	<input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 444 Welfare <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 440 Other Civil Rights	<input type="checkbox"/> 510 Motions to Vacate Sentence Habeas Corpus: <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition			

V. ORIGIN

(Place an "X" in One Box Only)

- 1 Original Proceeding
- 2 Removed from State Court
- 3 Remanded from Appellate Court
- 4 Reinstated or Reopened
- 5 Transferred from another district (specify)
- 6 Multidistrict Litigation
- 7 Appeal to District Judge from Magistrate Judgment

VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

WRONGFUL Death

Brief description of cause:

A Veteran, my husband was killed in Washington VA Hospital

VII. REQUESTED IN COMPLAINT:

CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23

DEMAND \$ 1,000,000,000 CHECK YES only if demanded in complaint:

JURY DEMAND: Yes No

VIII. RELATED CASE(S) IF ANY

(See instructions):

JUDGE _____

DOCKET NUMBER _____

DATE

SIGNATURE OF ATTORNEY OF RECORD

11/17/11 Etien Lafaye Massie Oglesby pro se

FOR OFFICE USE ONLY

RECEIPT # _____ AMOUNT _____ APPLYING IFP _____ JUDGE _____ MAG. JUDGE _____

IN THE UNITED STATES DISTRICT COURT FOR THE
NORTHERN DISTRICT OF WEST VIRGINIA

Ellen LaFaye Massie Oglesby

Plaintiff,

COMPLAINT

CIVIL ACTION NO. 3:11-cv-00100

United States

Defendant,

My husband Francis Alexander Oglesby Jr. (7670) was admitted on June 14, 2006, to Washington VA Hospital. Eight days later he was murdered by Dr. Charles Faselis, a doctor on staff at the Washington VA hospital. I was informed by the Department of Veteran Affairs, Washington D.C. that my proper defendant would be the United States.

I have gathered evidence, my husband was admitted into the hospital to be a lab rat for Dr. Charles Faselis with his famous clinical studies. I have also pieced together he was tortured, no phone in his room, no wheelchair in his room, naked, just a sheet, door shut. Ripping out the IV that carried the test drug. He was layed flat on his back in the bed, for over one year he had been sleeping sitting up to be able to breathe. My husband asked to see the patient advocate. After his death, I contacted the advocate, he had no knowledge my husband was in the hospital. Since I have no income, and had to go on food stamps. I cannot afford an attorney to fight all I have meantioned. I did have a friend loan me the \$350 to bring to court the case of WRONGFUL DEALTH. The Federal Law requires hospitals, nursing homes and other institutions to

CIVIL ACTION NO _____

get WRITTEN information regarding advance care directives to all patients upon admission. I have paperwork from the hospital proving that my husband refused to sign a DNR, did not want it, Eight days later when he was found unresponsive, code blue was called and the started to revive him(a standard procedure when no DNR is on file). The paperwork shows my husband was showing pink and Dr Charles Faselis told them to stop, causing my husbands death. The doctor said my husband had told him the night before he did not want to be revived. The doctor abiding with the law should have gotten it in writing and put it on file, IF it even happened. It is my strong belief Dr Faselis did not want my husband to survive, because they would had been taken from his care and put him in ICU , then my husband could tell them what Dr.Faselis had been doing to him. At the moment of my husbands death there was no written DNR on file at WASHINGTON VA HOSPITAL, the code blue team should NOT have been ordered to stop. It resulted in a WRONGFUL DEATH.

In the Tort claim I filed I asked for ONE MILLION, FIVE HUNDRED THOUSAND DOLLARS. I believe that is all I can ask for now. But I would like to beg the court to consider punitive damages, for everything I have suffered, and with the Department of Veteran Affairs office of the General Counsel doing their COVERUP.

Ellen LaFaye Massie

Ellen LaFaye Massie Oglesby

Plaintiff, Pro Se

November 16, 2011