

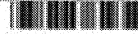
Psychiatric Report - Lilah Ex Girlfriend
September 13th, 2020

Mental Health History: Lilah has a history of living with major mood swings throughout her childhood. She experienced episodes of extreme highs, being very happy and content with her life. Sometimes this evolves into a major attachment towards people quite quickly. For example, one time in high school she stalked a teacher to the point where they had to get a restraining order towards her. On another occasion, she had a full mental breakdown in the school parking lot because her crush had asked another person to prom instead of her. On the opposing side to the highs, Lilah also experiences major lows where she becomes extremely introverted and distant for extended periods of time.

Current State: Although I have been working with Lilah for quite some time now, she doesn't appear to be making as much progress as I had hoped. Lilah is still struggling with her previously diagnosed bipolar disorder. Although the "higher" moods seem as though she presents a normal state of mind, the "lows" are effecting her much more, and she appears to be in that downwards spiral for longer. Throughout the lower spiral of her mood swings she seems to be presenting much more impulsive and reckless behavior resulting in a general disregard for her safety as well as others.

Diagnosis: It is my professional opinion that her previously diagnosed bipolar disorder is developing into more of an erotomanic delusional disorder. During her psychotic breaks, Lilah does not seem to know the difference between reality and delusions. It has also been brought to my attention that Lilah is now depending on alcohol as well as drugs. This is extremely concerning considering the severity of her current disorder. If she continues down this path, it may be in her best interest to be admitted to a psych ward where she can get more fluent, twenty-four hour treatment.

Medical Condition Report



Section 203 of the Highway Traffic Act requires that all legally qualified medical practitioners must report to the Registrar of Motor name, address and clinical condition of any patient sixteen years of age or older who, "is suffering from a medical condition that may dangerous for the person to operate a motor vehicle". To simplify the reporting process, the Ministry of Transportation has created Mail or fax to: Registrar of Motor Vehicles, Medical Review Section, Ministry of Transportation, 2680 Keele Street, Downsview, ON M3M 3E6. No.: 416-235-1773 or 1-800-268-1481. Fax No.: 416-235-3400 or 1-800-304-7889.

Patient Information

Last Name	First Name	Middle Initial	Fee Sche
Policicchio	Lilan	G	KK
Street No. and Name or Lot, Con. and Twp.			Apt. No.
Eckhardt 1378			
City, Town or Village			Postal Code
Penticton			V2B 5E1
Date of Birth	Male	Female	Driver's Licence No. (if available)
2004 10 29	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

For your convenience, the following is a list of the more common medical conditions that are reported to M marked with an "X". If the condition you are reporting is not listed, please indicate it in the section marked "O"

- | | |
|--|---|
| <input checked="" type="checkbox"/> Alcohol Dependence | <input type="checkbox"/> Visual Field Impairment |
| <input checked="" type="checkbox"/> Drug Dependence | <input type="checkbox"/> Diabetes or Hypoglycemia or other metab Uncontrolled |
| <input type="checkbox"/> Seizure(s)-Cerebral | <input checked="" type="checkbox"/> Mental or Emotional Illness-Unstable |
| <input type="checkbox"/> Seizure(s)-Alcohol related | <input type="checkbox"/> Dementia or Alzheimer's |
| <input type="checkbox"/> Heart disease with Pre-syncope/Syncope/Arrhythmia | <input type="checkbox"/> Sleep Apnea-Uncontrolled |
| <input type="checkbox"/> Blackout or Loss of consciousness or Awareness | <input type="checkbox"/> Narcolepsy-Uncontrolled |
| <input type="checkbox"/> Stroke/TIA or head injury with significant deficits | <input type="checkbox"/> Motor Function/Ability Impaired |
| <input type="checkbox"/> Both Visual Acuity and Visual Field Impairment | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Visual Acuity Impairment | |

Optional

To expedite your patient's file, please provide further elaboration of clinical condition (if available) or attach as a separate report: Diagno Relevant Clinical Information (i.e. current status - including results of investigations, medication(s), treatment and prognosis); and whether or the condition is a serious risk to road safety, threat to road safety is unknown or condition is temporary - weeks/months.

Date of examination upon which this report is based: 2020 | 11 | 9 How long has this person been your patient?

- ☒ Patient is aware of this report.
- ☐ I wish to be notified if my patient requests a copy of this report, as releasing this report pursuant to a request under the Freedom of Information Act may threaten the health or safety of the patient or another individual.

Physician's Last Name, First Name and Middle Initial

For MTO L
030

Minor Incident Report / Data Collection

Student Name Lilah Policchio **Student ID** 2206240 **Grade Level** 11 **Date** _____
Referring Staff Mr. Fitton **Class** Law 12 **Period** 1 **Day** 2 **Time** _____

Location

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> Classroom | <input type="checkbox"/> Upper Commons | <input type="checkbox"/> Library | <input type="checkbox"/> Hallway (Art/Music/Library/Math/Café) |
| <input checked="" type="checkbox"/> Restroom | <input type="checkbox"/> Lower Commons | <input type="checkbox"/> Annex Breezeway | <input type="checkbox"/> Bus Loading Zone |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Gym | <input type="checkbox"/> 1 st Floor Annex | <input type="checkbox"/> On Bus |
| <input type="checkbox"/> Courtyard | <input type="checkbox"/> Gym Lobby | <input type="checkbox"/> 2 nd Floor Annex | <input type="checkbox"/> Parking Lot |
| <input type="checkbox"/> Special Event/Assembly/ Field Trip | | <input type="checkbox"/> Other: _____ | |

Teacher Motivation for Writing Referral (Minor Infraction)

- ☒ To Inform Parent
 ☐ To Create Paper Trail
 ☒ To Inform Administration

MINOR INFRACTIONS

- | | |
|---|--|
| <input type="checkbox"/> Inappropriate Language | <input checked="" type="checkbox"/> Minor Vandalism |
| <input type="checkbox"/> Horseplay | <input type="checkbox"/> Technology Violation |
| <input type="checkbox"/> Tardy | <input type="checkbox"/> Defiance/Disrespect/ Non-Compliance |
| <input type="checkbox"/> Minor Disruption | <input type="checkbox"/> Other: _____ |

MAJOR INFRACTION

- ☒ Further Disciplinary Action (Complete ps74 on other side)

Possible Motivation for Student Behavior

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Obtain Peer Attention | <input type="checkbox"/> Obtain Adult Attention | <input type="checkbox"/> Obtain Items/Activities | <input checked="" type="checkbox"/> Don't know |
| <input type="checkbox"/> Avoid Tasks/Activities | <input type="checkbox"/> Avoid Peer(s) | <input type="checkbox"/> Avoid Adult(s) | <input type="checkbox"/> Other |

Others Involved

- ☐ None
 ☒ Peers
 ☐ Staff
 ☐ Teacher
 ☐ Substitute
 ☐ Unknown

Administrative Decision (Office Use Only)

- | | | |
|--|---|--|
| <input type="checkbox"/> AM/PM Detention | <input type="checkbox"/> Saturday School | <input type="checkbox"/> In-school Suspension Days _____ |
| <input type="checkbox"/> Loss of Privilege | <input type="checkbox"/> Parent Contact | <input checked="" type="checkbox"/> Out-of-School Suspension Days <u>5</u> |
| <input type="checkbox"/> Conference with Student | <input type="checkbox"/> Individualized Instruction | <input type="checkbox"/> Other: _____ |

Comments:

Prince George's County Public Schools
Upper Marlboro, MD 20772
PUPIL DISCIPLINE REFERRAL

School: Laurel High School Pupil: _____ Pupil ID #: _____ Grade: _____

Teacher: _____ Subject: _____ Time Referred: _____ Period: _____ Date: _____

CHECK CONDUCT OF PUPIL BELOW

- ☒ Alcoholic Beverage(s)
- ☐ Arson
- ☐ False Alarms
- ☐ Possession of Fireworks or Explosives
- ☐ Inciting Others to Violence or Disruption
- ☒ Physical Attack and/or Threat Thereof
- ☒ Possession or Use of Weapons
- ☐ Possession, Use, or Distribution of a Controlled Substance
- ☐ Vandalism and/or Destruction of Property
- ☒ Fighting
- ☐ Theft
- ☐ Continued Class Disruption
- ☒ Disrespect
- ☐ Distribution of Unauthorized Printed Materials
- ☐ False Reports
- ☐ Forgery
- ☐ Gambling
- ☐ Insubordination
- ☐ Loitering
- ☐ Smoking
- ☐ Unauthorized Sale or Distribution
- ☐ Other

☐ Reason for Referral:

Describe Circumstances Of Conduct:

Lilian Stormed
out of class to the
bathroom and drank a bottle
of vodka, then she kicked a stall
door with a student peeing in
it and punched them in the
face.

INDICATE PRIOR ACTION TAKEN BY TEACHER TO RESOLVE PUPIL PROBLEMS

- ☒ Conference with Student ☒ Conference with Parent ☒ Administrative Conference

☐ Other Disciplinary Action Taken: _____

Teacher: _____

CHECK ACTION TAKEN BY ADMINISTRATION BELOW

- ☒ Teacher-Student Conference
- ☐ Teacher-Parent Conference or Contact
- ☒ Teacher-Counselor Conference
- ☐ Teacher-Administrator Conference
- ☐ Counselor-Student Conference
- ☐ Counselor-Parent Conference
- ☐ Administrator-Student Conference
- ☐ Administrator-Parent Conference
- ☐ Student Program Adjustment
- ☐ Referral to Pupil Services
- ☐ Pupil Services - Student/Parent Contact
- ☐ Detention Hall
- ☐ Behavioral Probation
- ☐ Temporary Removal from Class
- ☐ Short-term Suspension
- ☐ Long-term Suspension

☐ Other Discipline Action Taken:

Minor Incident Report / Data Collection

Student Name Lilah Student ID 20305 Grade Level 11 Date 11/1/11

Referring Staff Mr. [unclear] Class 11th Period 1 Day Mon Time 8:00

Location

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Classroom | <input type="checkbox"/> Upper Commons | <input type="checkbox"/> Library | <input type="checkbox"/> Hallway (Art/Music/Library/Math/Café) |
| <input type="checkbox"/> Restroom | <input type="checkbox"/> Lower Commons | <input type="checkbox"/> Annex Breezeway | <input type="checkbox"/> Bus Loading Zone |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Gym | <input type="checkbox"/> 1 st Floor Annex | <input type="checkbox"/> On Bus |
| <input type="checkbox"/> Courtyard | <input type="checkbox"/> Gym Lobby | <input type="checkbox"/> 2 nd Floor Annex | <input checked="" type="checkbox"/> Parking Lot |
| <input type="checkbox"/> Special Event/Assembly/ Field Trip | <input type="checkbox"/> Other: _____ | | |

Teacher Motivation for Writing Referral (Minor Infraction)

- ☐ To Inform Parent ☐ To Create Paper Trail ☒ To Inform Administration

MINOR INFRACTIONS

- | | |
|--|--|
| <input checked="" type="checkbox"/> Inappropriate Language | <input type="checkbox"/> Minor Vandalism |
| <input type="checkbox"/> Horseplay | <input type="checkbox"/> Technology Violation |
| <input checked="" type="checkbox"/> Tardy | <input type="checkbox"/> Defiance/Disrespect/ Non-Compliance |
| <input checked="" type="checkbox"/> Minor Disruption | <input type="checkbox"/> Other: _____ |

MAJOR INFRACTION

- ☒ Further Disciplinary Action (Complete ps74 on other side)

Possible Motivation for Student Behavior

- | | | | |
|---|---|--|-------------------------------------|
| <input checked="" type="checkbox"/> Obtain Peer Attention | <input type="checkbox"/> Obtain Adult Attention | <input type="checkbox"/> Obtain Items/Activities | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Avoid Tasks/Activities | <input type="checkbox"/> Avoid Peer(s) | <input type="checkbox"/> Avoid Adult(s) | <input type="checkbox"/> Other |

Others Involved

- ☐ None ☒ Peers ☐ Staff ☐ Teacher ☐ Substitute ☐ Unknown

Administrative Decision (Office Use Only)

- | | | |
|---|---|--|
| <input type="checkbox"/> AM/PM Detention | <input type="checkbox"/> Saturday School | <input type="checkbox"/> In-school Suspension Days _____ |
| <input type="checkbox"/> Loss of Privilege | <input type="checkbox"/> Parent Contact | <input type="checkbox"/> Out-of-School Suspension Days _____ |
| <input checked="" type="checkbox"/> Conference with Student | <input type="checkbox"/> Individualized Instruction | <input type="checkbox"/> Other _____ |

Comments:

Prince George's County Public Schools
Upper Marlboro, MD 20772
PUPIL DISCIPLINE REFERRAL

School: Laurel High School Pupil: _____ Pupil ID #: _____ Grade: _____
Teacher: _____ Subject: _____ Time Referred: _____ Period: _____ Date: _____

CHECK CONDUCT OF PUPIL BELOW

- ☐ Alcoholic Beverage(s)
- ☐ Arson
- ☐ False Alarms
- ☐ Possession of Fireworks or Explosives
- ☐ Inciting Others to Violence or Disruption
- ☒ Physical Attack and/or Threat Thereof
- ☐ Possession or Use of Weapons
- ☐ Possession, Use, or Distribution of a Controlled Substance
- ☐ Vandalism and/or Destruction of Property
- ☐ Fighting
- ☐ Theft
- ☐ Continued Class Disruption
- ☐ Disrespect
- ☐ Distribution of Unauthorized Printed Materials
- ☐ False Reports
- ☐ Forgery
- ☐ Gambling
- ☐ Insubordination
- ☐ Loitering
- ☐ Smoking
- ☐ Unauthorized Sale or Distribution
- ☐ Other

☐ Reason for Referral:

Describe Circumstances Of Conduct:

Lilah's crush asked someone else to prom and she had a full mental breakdown in the middle of the parking lot. This resulted in foul language and a major disruption to other students. Lilah then skipped two weeks of school.

INDICATE PRIOR ACTION TAKEN BY TEACHER TO RESOLVE PUPIL PROBLEMS

☐ Conference with Student ☐ Conference with Parent ☒ Administrative Conference

☐ Other Disciplinary Action Taken: _____

Teacher: _____

CHECK ACTION TAKEN BY ADMINISTRATION BELOW

- ☐ Teacher-Student Conference
- ☐ Teacher Parent Conference or Contact
- ☐ Teacher-Counselor Conference
- ☐ Teacher-Administrator Conference
- ☒ Counselor-Student Conference
- ☒ Counselor-Parent Conference
- ☐ Administrator-Student Conference
- ☐ Administrator-Parent Conference
- ☐ Student Program Adjustment
- ☐ Referral to Pupil Services
- ☐ Pupil Services - Student/Parent Contact
- ☐ Detention Hall
- ☐ Behavioral Probation
- ☒ Temporary Removal from Class
- ☐ Short-term Suspension
- ☐ Long-term Suspension

☐ Other Discipline Action Taken:

Minor Incident Report / Data Collection

Student Name Lilab. P Student ID 2205240 Grade Level 11 Date Nov. 19, 2020
 Referring Staff Nelia De Kock Class LAW Period 2 Day Mon Time 12:35

Location

- | | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> Classroom | <input type="checkbox"/> Upper Commons | <input checked="" type="checkbox"/> Library | <input checked="" type="checkbox"/> Hallway (Art/Music/Library/Math/Café) |
| <input type="checkbox"/> Restroom | <input type="checkbox"/> Lower Commons | <input type="checkbox"/> Annex Breezeway | <input type="checkbox"/> Bus Loading Zone |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Gym | <input type="checkbox"/> 1 st Floor Annex | <input type="checkbox"/> On Bus |
| <input type="checkbox"/> Courtyard | <input type="checkbox"/> Gym Lobby | <input type="checkbox"/> 2 nd Floor Annex | <input type="checkbox"/> Parking Lot |
| <input type="checkbox"/> Special Event/Assembly/ Field Trip | | <input type="checkbox"/> Other: _____ | |

Teacher Motivation for Writing Referral (Minor Infraction)

- ☐ To Inform Parent ☐ To Create Paper Trail ☒ To Inform Administration

MINOR INFRACTIONS

- | | |
|--|--|
| <input checked="" type="checkbox"/> Inappropriate Language | <input checked="" type="checkbox"/> Minor Vandalism |
| <input checked="" type="checkbox"/> Horseplay | <input type="checkbox"/> Technology Violation |
| <input checked="" type="checkbox"/> Tardy | <input type="checkbox"/> Defiance/Disrespect/ Non-Compliance |
| <input type="checkbox"/> Minor Disruption | <input type="checkbox"/> Other: _____ |

MAJOR INFRACTION

- ☒ Further Disciplinary Action (Complete ps74 on other side)

Possible Motivation for Student Behavior

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Obtain Peer Attention | <input checked="" type="checkbox"/> Obtain Adult Attention | <input type="checkbox"/> Obtain Items/Activities | <input type="checkbox"/> Don't know |
| <input checked="" type="checkbox"/> Avoid Tasks/Activities | <input type="checkbox"/> Avoid Peer(s) | <input type="checkbox"/> Avoid Adult(s) | <input checked="" type="checkbox"/> Other |

Others Involved

- ☒ None ☐ Peers ☐ Staff ☒ Teacher ☐ Substitute ☐ Unknown

Administrative Decision (Office Use Only)

- | | | |
|--|---|--|
| <input type="checkbox"/> AM/PM Detention | <input type="checkbox"/> Saturday School | <input type="checkbox"/> In-school Suspension Days _____ |
| <input type="checkbox"/> Loss of Privilege | <input type="checkbox"/> Parent Contact | <input type="checkbox"/> Out-of-School Suspension Days _____ |
| <input type="checkbox"/> Conference with Student | <input type="checkbox"/> Individualized Instruction | <input type="checkbox"/> Other <u>Expelled</u> |

Comments:

She tried to seduce teachers and planned ruin their marriages. Crazy obsession. Stalked teachers online and in person.

Prince George's County Public Schools
Upper Marlboro, MD 20772
PUPIL DISCIPLINE REFERRAL

School: Laurel High School Pupil: Lilah P. Pupil ID #: 2206240 Grade: 11
Teacher: Nelia De Kock Subject: Law Time Referred: ? Period: 2 Date: 05/04/10

CHECK CONDUCT OF PUPIL BELOW

- ☒ Alcoholic Beverage(s)
- ☐ Arson
- ☐ False Alarms
- ☐ Possession of Fireworks or Explosives
- ☐ Inciting Others to Violence or Disruption
- ☒ Physical Attack and/or Threat Thereof
- ☐ Possession or Use of Weapons
- ☐ Possession, Use, or Distribution of a Controlled Substance
- ☐ Vandalism and/or Destruction of Property
- ☐ Fighting
- ☐ Theft
- ☐ Continued Class Disruption
- ☐ Disrespect
- ☐ Distribution of Unauthorized Printed Materials
- ☐ False Reports
- ☐ Forgery
- ☐ Gambling
- ☐ Insubordination
- ☐ Loitering
- ☐ Smoking
- ☐ Unauthorized Sale or Distribution
- ☒ Other

☒ Reason for Referral:

Trying to seduce teacher. Could cost them their job.

Describe Circumstances Of Conduct:

The teacher is my hubby. Drinking in class constantly.

INDICATE PRIOR ACTION TAKEN BY TEACHER TO RESOLVE PUPIL PROBLEMS

- ☐ Conference with Student ☐ Conference with Parent ☐ Administrative Conference

☒ Other Disciplinary Action Taken: Expell the student.

Teacher: Nelia De Kock

CHECK ACTION TAKEN BY ADMINISTRATION BELOW

- ☐ Teacher-Student Conference
- ☐ Teacher-Parent Conference or Contact
- ☐ Teacher-Counselor Conference
- ☐ Teacher-Administrator Conference
- ☐ Counselor-Student Conference
- ☐ Counselor-Parent Conference
- ☐ Administrator-Student Conference
- ☐ Administrator-Parent Conference
- ☐ Student Program Adjustment
- ☐ Referral to Pupil Services
- ☐ Pupil Services - Student/Parent Contact
- ☐ Detention Hall
- ☐ Behavioral Probation
- ☐ Temporary Removal from Class
- ☐ Short-term Suspension
- ☐ Long-term Suspension

☒ Other Discipline Action Taken: