

To: Inland Psych : Confirming Timestamp
[Rancho Cucamonga] **From:** James Martin Driskill

Fax: 1-909-941-4875 **Date:** Jan 16/22 12:29 PM

Organization: Inland Pych

Subject: Please Forward to [Doctor Hozair Mohammed Syed MD]

The San Bernardino Office Fax Number at one time worked. It is now blocked from my use.


With no responses in any kind of way to direct me to another proper exchange with your organization, there is a simple equation here that needs to be LEGALLY ENABLED and APPLIED.

I am demanding this to be observed and professionally speaking, communications is a DUAL DIRECTION process of conversation.

So far that has not occurred and that is wrong.

Thank You,

James Driskill

 <p>#9Scourges12Steps @gruwup #9Scourges12Steps @Gruwup @Gruwup @Gruwup #9Scourges12Steps</p>	<p>@gruwup.net : Peacebuilding and Trustbinding Ideal 3260 Grande Vista, San Bernardino CA 924 San Bernardino, CA 92405 Tel: 909-882-8759 Fax: 909-277-7893 #Kramobone : ##Nyansapo : ##Mpatapo</p>	<h1>Fax</h1>
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To: Inland Psych : Confirming Timestamp [Doctor Hozair Mohammed Syed MD] **From:** James Martin Driskill

Fax: 1-909-887-4565 **Date:** Jan 16/22 12:14 PM

Organization: Inland Psych

Subject: Patient-Centered Communcations --- Fwd Fax Sent To HIV Doctor

Dear Doctor Syed,

I am trying to be patient but I believe that I have messages sent to you that should be considered and responded to.

I do not really see the intention to fully oppress these messages into oblivion.

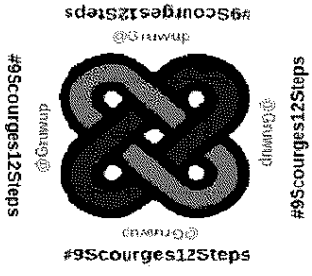
The Graphics in this fax has been sent to you in full resolution via the Kareo Patient Portal messaging.

Thank you for your time to review these materials before our Appointment on the 20th of January.

Thank you.

James Martin Driskill

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	<p>@gruwup.net : Peacebuilding and Trustbinding Ideal 3260 Grande Vista, San Bernardino CA 924 San Bernardino, CA 92405 Tel: 909-882-8759 Fax: 909-277-7893 #Kramobone : #Nyansapo : #Mpatapo</p>	<h1>Fax</h1>
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To: @RealUpHuman Dr. Sohanjeet S Bassi **From:** James Martin Driskill
 MD

Fax: 1-626-851-8001 **Date:** Jan 16/22 11:35 AM

Organization: Foothills Infectious Disease

Subject:

Good New Week Doctor Bassi.

Thank you for providing me with an email during our last session.

I realize that I may be unique in my assessment of my needs. But these are very important to me. There is a time issue involved to review what has happened to me.

I just do not see how I am asking too much of my doctor/medical provider care in all of this.

<https://www.cdc.gov/ncbddd/disabilityandhealth/disability-inclusion.html>

What is Disability Inclusion?

Including people with disabilities in everyday activities and encouraging them to have roles similar to their peers who do not have a disability is *disability inclusion*. This involves more than simply encouraging people; it requires making sure that adequate policies and practices are in effect in a community or organization.

Inclusion should lead to increased participation in socially expected life roles and activities—such as being a student, worker, friend, community member, patient, spouse, partner, or parent.

Socially expected activities may also include engaging in social activities, using public resources such as transportation and libraries, moving about within communities, receiving adequate health care, having relationships, and enjoying other day-to-day activities.

[adequate health care]

Disability Inclusion and the Health of People with Disabilities

Disability inclusion allows for people with disabilities to take advantage of the benefits of the same health promotion and prevention activities experienced by people who do not have a disability. Examples of these activities include:

- Education and counselling programs that promote physical activity, improve nutrition or reduce

- the use of tobacco, alcohol or drugs; and
- Blood pressure and cholesterol assessment during annual health exams, and screening for illnesses such as cancer, diabetes, and heart disease.

Including people with disabilities in these activities begins with identifying and eliminating barriers to their participation.

[begins with identifying and eliminating barriers to their participation.]

The materials that have been composed and directed into your office, does indeed carefully consider that equation of identifying the barriers in my way.

and I already sent this --- and you completely ignored this. You can not fault me for demanding this to be a part of my care.

Patient-Centered Communication: Basic Skills

Communication skills needed for patient-centered care include eliciting the patient's agenda with open-ended questions, especially early on; not interrupting the patient; and engaging in focused active listening.

Understanding the patient's perspective of the illness and expressing empathy are key features of patient-centered communication. Understanding the patient's perspective entails exploring the patient's feelings, ideas, concerns, and experience regarding the impact of the illness, as well as what the patient expects from the physician. Empathy can be expressed by naming the feeling; communicating understanding, respect, and support; and exploring the patient's illness experience and emotions. Before revealing a new diagnosis, the patient's prior knowledge and preferences for the depth of information desired should be assessed. After disclosing a diagnosis, physicians should explore the patient's emotional response. Shared decision making empowers patients by inviting them to consider the pros and cons of different treatment options, including no treatment. Instead of overwhelming the patient with medical information, small chunks of data should be provided using repeated cycles of the "ask-tell-ask" approach. Training programs on patient-centered communication for health care professionals can improve communication skills.

I have placed reference to the email that I have sent into a public view. This is a web location where I need everyone's participation.

<http://doctor-sohanjeet-singh-bassi-md.realuphuman.net/>

[Audio]

This is it! Indclinable Deliverance

Written To Doctor Alfiee M Breland Noble - Board of Directors of @CrisisTextLine

She Blocked me Twitter and Instagram Unjustly!

I sent the first email to the email address you provided me. It bounced, but I did call your office to ask for a correction which they provided.. Do I need to send the full email via fax?

I hope not -- the title is true:

@RealityAudit-Outrageous-Facts-Don't-Lie-Hated-On-I-Died.pdf

<http://doctor-alfiee-m-breland-noble.fuckeduphuman.life/PDF/@RealityAudit-Outrageous-Facts-Don't-Lie-Hated-On-I-Died.pdf>

and I need these changes to apply to all of my medical care providers.

So, I have already created an introduction graphic -- [introducing you two] united for all of us begins this new journey for complete wholeness.

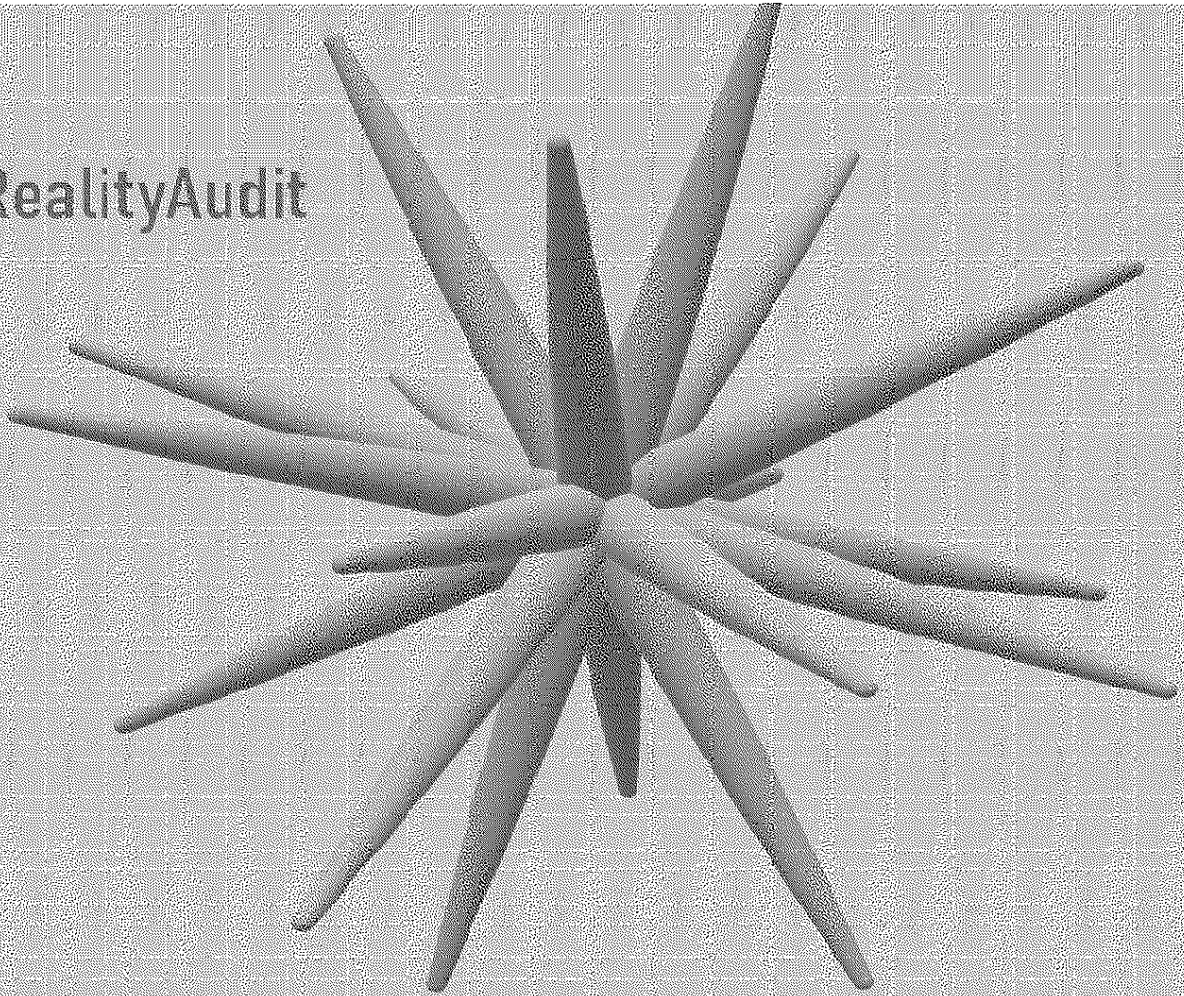
Thank You.

This FAX better transmits -- as any other patient can fax,. I think I will have a problem with Inland Psych offering that same opportunity which they are going to have to change,

Confidentiality Warning: This message is intended only for the use of the individual or entity to which it is addressed, and may contain information which is privileged, confidential, proprietary or exempt from disclosure under applicable law. If you are not the intended recipient or the person responsible for delivering the message to the intended recipient, you are strictly prohibited from disclosing, distributing, copying or in any way using this message. If you have received this communication in error, please notify the sender, and destroy and delete any copies you may have received.

@RealityAudit

@Gruwup.net 2022



Medical-Mental-Health-LawMatters

StandardsOfCare

PDF: Fri, Jan 14, 2022 at 9:18 PM
 @RealityAudit- Outrageous-Facts-
 Dcn't-Li2- Hated-Or-I-Died.pdf

OGG: Audio Media 44min
 @RealityAudit- ATTENTION - PUBLIC-
 ANNOUNCEMENT- OF- A- PENDING- HUMAN-
 DEATH- - PREVENTABLE- IF- YOU- LISTEN- AND-
 GET- INVOLVED .ogg

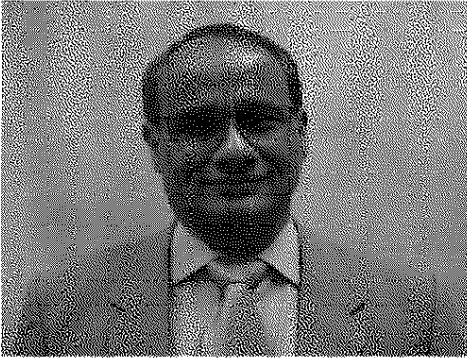
8
 1 2 3
 4 5 6
 7 8 9
 * 0 #

0:00 / 1:05:04

@GRUWUP.NET : PEACEBUILDING WEBSITE HEADQUARTERS
 I am going to die! A cold-heart community will just let me die! #UnNaturalLaw #StaterEros #HugeFall

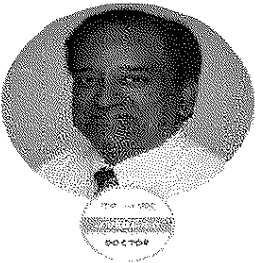
31 news · May 30, 2021

0 DISLIKE SHARE SAVE



Hozair Syed, MD

General Psychiatry.
 Graduated Dow Medical University, Karachi, Pakistan (1994)
 Residency University of Texas, Houston.
 Dr. Syed earned a Fellowship in Neuro Surgery from Royal College of Surgeons of Edinburgh, U.K., and a Fellowship from University of Michigan, Detroit, Medical Center in Neuro-Critical Care. Dr. Syed has been a provider with IPMG since 2010.
 Practicing locations : **Chino** **San Bernardino** **Heeporia** **Palm Desert**



Dr. Sohanjeet Singh Bassi MD
 Infectious Disease Specialist | Infectious Disease
 5/5 ★★★★★ (3)
 1135 S Sunset Ave Suite 208 West Covina CA, 91790

Write A Review

I REQUIRE RESPONDING CONFIRMATION
Disability Inclusion
 &
Patient-Centered Communication: Basic Skills
A DEAFENING SILENCE FROM YOU ALL

DOCTORS IS NOT TRUSTWORTHY!

How Exactly Can I trust You?

You have to help me with the reality of this!

Patient @RealityAudit Proceeds....Undeclinable!

#StopGangStalking

F

FREELY GIVEN

Consenting is a choice you make without pressure, manipulation, or under the influence of drugs or alcohol.

R

REVERSIBLE

Anyone can change their mind about what they feel like doing, anytime. Even if you've done it before, and even if you're both naked in bed.

I

INFORMED

You can only consent to something if you have the full story. For example, if someone says they'll use a condom and then they don't, there isn't full consent.

E

ENTHUSIASTIC

When it comes to sex, you should only do stuff you WANT to do, not things that you feel you're expected to do.

S

SPECIFIC

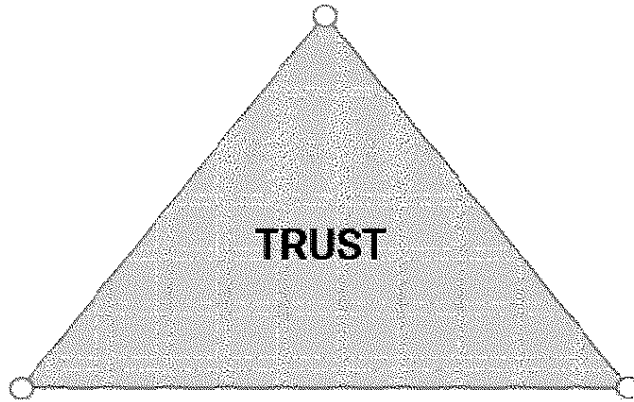
Saying yes to one thing (like going to the bedroom to make out) doesn't mean you've said yes to others (like having sex).

@SOYOUWANTTOTALKABOUT
SOURCE: PLANNEDPARENTHOOD.ORG



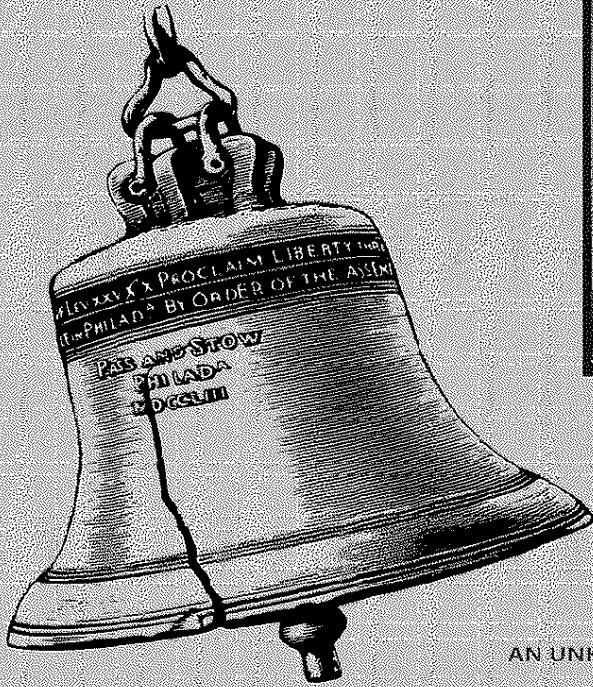
Authenticity
*I experience
the real you.*

Logic
*I know you
can do it; your
reasoning
and judgment
are sound.*



Empathy
*I believe
you care
about me
and my
success.*

From: "Begin with Trust," by Frances Frei
and Anne Morriss. May–June 2020



Most recent research on GANSTALKING has demonstrated the activity that TARGETED INDIVIDUALS report is a real existence and not delusional. Three research findings on the National Institutes of Health reflect this conclusion.

Given that, how would you consider the impact of what is a sustained cumulative affect upon the collective effort of these gangstalker's activity that is negatively targeting an uncountable number of targeted individuals?

AN UNKNOWN AND UNCOUNTABLE NUMBER OF TARGETED INDIVIDUALS ARE BEING GANGSTALKED 24/7 DAY TO DAY IN OUR COUNTRY. DON'T YOU THINK THAT MIGHT BE SOURCED TO BE ACTS OF WAREFARE? I DO!

