

EXHIBIT 1

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
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WARRANT OF ARREST—MISDEMEANOR (LOCAL)

COMMONWEALTH OF VIRGINIA Va. Code § 19.2-71, -72

Martinsville
CITY OR COUNTY

General District Court Criminal Traffic
 Juvenile and Domestic Relations District Court

Martinsville

City County Town

TO ANY AUTHORIZED OFFICER:

You are hereby commanded in the name of the Commonwealth of Virginia forthwith to arrest and bring the Accused before this Court to answer the charge that the Accused, within this city or county, on or about 09/21/2018 DATE did unlawfully in violation of Section

13-17/18.2-387

Code or Ordinances of this city, county or town: intentionally make an obscene display of the accused's person or private parts in a public place or in a place where others were present.

I, the undersigned, have found probable cause to believe that the Accused committed the offense charged, based on the sworn statements of

SGT. R.D. JONES MPD, Complainant.

Execution by summons permitted at officer's discretion. not permitted.

09/21/2018 05:35 AM

DATE AND TIME ISSUED

Courtney D. Reid

CLERK MAGISTRATE JUDGE
Courtney D. Reid

VIRGINIA
of Martinsville Circuit Court
Clerk's Office.

Received and Filed this the
9th Day of January 2019
at 12:21 P.M.

Teaser: [Signature]

DNA SAMPLE (on file)

*Case
Appealed
Please & Remove
H*

None may be required

CR19000097

(5)

L

9.21.18
4:00 PM

Hearing Date/Time
10-05-18 (BT)
3:00 PM
12-21-18
10:45 AM

CASE NO. C18-3138

ACCUSED:

Hill, Brian David

LAST NAME, FIRST NAME, MIDDLE NAME

310 Forest St Apt 2

ADDRESS/LOCATION

Martinsville, VA 24112

To be completed upon service as Summons

Mailing address Same as above

RACE	SEX	BORN	HT.	WGT.	EYES	HAIR
W	M	MO. DAY YR. 05/26/1990	FT. IN. 6' 00"	150	BLU	BRO

SSN

DL#

STATE

Commercial Driver's License

CLASS 1 MISDEMEANOR

- EXECUTED by arresting the Accused named above on this day:
- EXECUTED by summoning the Accused named above on this day:
- For legal entities other than individuals, service pursuant to Va. Code § 19.2-76.

9/21/18 0538

DATE AND TIME OF SERVICE

R Jones

ARRESTING OFFICER

22 MPD 113

BADGE NO., AGENCY AND JURISDICTION

for

SHERIFF

Attorney for the Accused:

Pub. Def.

Short Offense Description (not a legal definition):
INDECENT EXPOSURE

Offense Tracking Number:

690GM1800003560

FOR ADMINISTRATIVE USE ONLY

Virginia Crime Code:

OBS-3713-01

LOCAL

The Accused was this day:

tried in absence present

Hall

PROSECUTING ATTORNEY PRESENT (NAME)

Alkove

DEFENDANT'S ATTORNEY PRESENT (NAME)

NO ATTORNEY ATTORNEY WAIVED

If convicted, no jail sentence will be imposed

INTERPRETER PRESENT

Certified pursuant to § 19.2-190.1.

Plea of Accused:

not guilty Witnesses sworn

nolo contendere

guilty Plea voluntarily and intelligently entered after the defendant was apprised of his right against compulsory self-incrimination and his right to confront the witnesses against him.

Plea and Recommendation

And was TRIED and FOUND by me:

not guilty guilty as charged

guilty of
VCC

facts sufficient to find guilt but defer adjudication/disposition to

DATE AND TIME

and place accused on probation, §§ 4.1-305, 18.2-57.3, 18.2-251 or 19.2-303.2.

A separate order for First Offender is attached and incorporated in this order.

Costs imposed upon defendant.

DATE

JUDGE

And was FOUND by me to be:

driving a commercial motor vehicle

carrying hazardous materials

I ORDER a nolle prosequi on prosecution's motion

I ORDER the charge dismissed with prejudice

conditioned upon payment of costs and

successful completion of

traffic school

mature driver school, § 16.1-69.48:1.

accord and satisfaction, § 19.2-151.

under §§ 4.1-305, 18.2-57.3, 18.2-251 or 19.2-303.2.

Guilty – upon a violation of a term or condition of a deferred adjudication/disposition.

I impose the following Disposition:

FINE CIVIL PENALTY of \$

with \$ suspended

JAIL SENTENCE of *30 days*

imposed, of which days

mandatory minimum, with suspended

for a period of, conditioned upon being of good behavior, keeping the peace, obeying this order and paying fines and costs. Credit is allowed pursuant to § 53.1-187 for time spent in confinement.

Serve jail sentence beginning

on weekends only

Work release authorized if eligible required

not authorized

Public work force authorized not authorized

on PROBATION for

VASAP local community-based probation agency

Monitoring by GPS/other tracking device

DRIVER'S LICENSE suspended for

Restricted Driver's License per attached order

Ignition Interlock for

RESTITUTION order incorporated

Restitution payment is a condition of suspended sentence

COMMUNITY SERVICE hours to be

completed by

and supervised by

to be credited against fines and costs

Contact prohibited between defendant and victim/ victim's family or household members

Other:

Reimburse Commonwealth for investigatory medical fees

Pay \$50 to the Court for Trauma Center Fund

Bail on Appeal \$

Remanded for CCRE Report

DRIVER'S LICENSE/PRIVILEGE TO DRIVE IN VIRGINIA SUSPENDED EFFECTIVE IN 30 DAYS IF FINES, COSTS, FORFEITURES, PENALTIES OR RESTITUTION ARE NOT PAID. Va. Code § 46.2-395.

12-21-2015

DATE

JUDGE

Offense Tracking Number: 690GM1800003560

FINE

LOCALITY

COSTS

223 LIQUIDATED DAMAGES

461 FIXED MISD FEE *61-00*

462 FIXED DRUG MISD FEE

001 INT CRIM CHILD FEE *15-00*

113 WITNESS FEE

113 IGNITION INTERLOCK

113 DUI FEE

113 *DNA* *38-00*

121 TRIAL IN ABSENCE FEE *233* *15-00*

133 BLOOD TEST FEE

137 TIME TO PAY *10-00*

192 TRAUMA CENTER FEE

202 WITNESS FEE

217 CT. APPT. ATTY *120-00*

228 COURTHOUSE CONSTRUCTION FEE

234 JAIL ADMISSION FEE *25-00*

243 LOCAL TRAINING ACADEMY FEE

244 COURTHOUSE SECURITY FEE *10-00*

OTHER (SPECIFY):

241 *5.00*

TOTAL \$ *299-00*

Stay of the proceedings pursuant to § 16.1-131.1

DATE

JUDGE

CRIMINAL COMPLAINT

RULES 3A:3 AND 7C:3

Commonwealth of Virginia

General District Court

Juvenile and Domestic Relations District Court

Martinsville

CITY OR COUNTY

Under penalty of perjury, I, the undersigned Complainant swear or affirm that I have reason to believe that the Accused committed a criminal offense, on or about

09/21/2018

in the City County Town

DATE OFFENSE OCCURRED

of Martinsville

I base my belief on the following facts: (Print ALL information clearly.)

On the above date I responded to the area of Pine St. at the steps for the Dick and Willie Trail due to a naked white male that had been seen running on Hooker St from Church St. Officers were in the area of Hooker St and had not located the male. I walked down the steps to the trail where i herd foot steps coming towards me. I could see a person walking on the trail and they stopped. I signed my light on the male and he turned and ran. He was naked except for his shoes and socks. The male had items in his hand when he ran. I chased the suspect off the left side of the trail down a bank and into the creek. I was yelling stop and show me your hands during the chase. When the male was detained he was read Miranda and started talking about a black male in a hoodie made him get naked and take pictures of himself. He was transported to the hospital due to knee pain. While at the Hospital he stated that he was alone when he took the photos of himself and he gave Ofc. Warnick promising to view his camera. On the Camera was several photo of himself naked around the city. He was medically and psychologically cleared. He was arrested for indecent Exposure. Mr. Hill's clothing was located in his bag. All took place in the city.

The statements above are true and accurate to the best of my knowledge and belief.

In making this complaint, I have read and fully understand the following:

By swearing to these facts, I agree to appear in court and testify if a warrant or summons is issued.

The charge in this warrant cannot be dismissed except by the court, even at my request.

Sgt. R. Jones #220

NAME OF COMPLAINANT (LAST, FIRST, MIDDLE)
(PRINT CLEARLY)

[Signature]
SIGNATURE OF COMPLAINANT

Subscribed and sworn to before me this day.

Courtney D Reid
SIGNATURE OF CLERK/MAGISTRATE/JUDGE

09/21/2018 05:35 AM

DATE AND TIME

CLERK MAGISTRATE JUDGE

x

Courtney D. Reid

CRIMINAL COMPLAINT

ACCUSED: Name, Description, Address/Location

Hill, Brian David

LAST NAME, FIRST NAME, MIDDLE NAME

310 Forest St Apt 2

Martinsville, VA 24112

COMPLETE DATA BELOW IF KNOWN

RACE	SEX	BORN			HT.		WGT.	EYES	HAIR
		Mo.	DAY	YR.	FT.	IN			
W	M	05	26	90	6	0	150	BLU	BRN
SSN [REDACTED]									

Complainant is not a law-enforcement officer or animal control officer. Authorization prior to issuance of felony arrest warrant given by
 Commonwealth's attorney
 Law-enforcement agency having jurisdiction over alleged offense

NAME OF PERSON AUTHORIZING ISSUANCE OF WARRANT

DATE AND TIME AUTHORIZATION GIVEN

13-17 Indecent Exposure

EXHIBIT 2

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RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
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IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF NORTH CAROLINA

UNITED STATES OF AMERICA) CASE NO. 1:13CR435-1
)
vs.)
) Winston-Salem, North Carolina
BRIAN DAVID HILL) September 12, 2019
_____) 3:37 p.m.

TRANSCRIPT OF THE **SUPERVISED RELEASE REVOCATION HEARING**
BEFORE THE HONORABLE THOMAS D. SCHROEDER
UNITED STATES DISTRICT JUDGE

APPEARANCES:

For the Government: ANAND RAMASWAMY, AUSA
Office of the U.S. Attorney
101 S. Edgeworth Street, 4th Floor
Greensboro, North Carolina 27401

For the Defendant: RENORDA E. PRYOR, ESQ
Herring Law Center
1821 Hillandale Road, Suite 1B-220
Durham, North Carolina

Court Reporter: BRIANA L. BELL, RPR
Official Court Reporter
P.O. Box 20991
Winston-Salem, North Carolina 27120

Proceedings recorded by mechanical stenotype reporter.
Transcript produced by computer-aided transcription.G1

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1 P R O C E E D I N G S

2 (The Defendant was present.)

3 **THE COURT:** All right. Mr. Ramaswamy, good
4 afternoon, sir.

5 **MR. RAMASWAMY:** Good afternoon, Your Honor. The
6 Government calls for hearing on a supervised release violation
7 United States versus Brian David Hill in 1:13CR435-1,
8 represented by Ms. Pryor.

9 **MS. PRYOR:** Good afternoon, Your Honor.

10 **THE COURT:** Good afternoon, Ms. Pryor. How are you?

11 **MS. PRYOR:** I'm wonderful, Your Honor. Thank you.

12 **THE COURT:** Mr. Hill, good afternoon to you.

13 Mr. Alligood and Mr. McMurray are here from the
14 Western District of Virginia, welcome, here on behalf of
15 Probation.

16 We're here today because the petition and the
17 supplemental report allege that Mr. Hill violated the terms of
18 supervision.

19 Did you receive a copy of the petition and the
20 supplement?

21 **MS. PRYOR:** We did, Your Honor.

22 **THE COURT:** Have you reviewed those with your client?

23 **MS. PRYOR:** I have, Your Honor. And Mr. Hill is
24 actually requesting a continuance of this matter today, Your
25 Honor. I believe it was -- I won't said filed because we don't

1 have an actual clerk's office here, but I think he did provide
2 it on I believe the 8th floor, Your Honor, and because of the
3 time that he drafted it, it seems like last night, he didn't
4 have an opportunity to file it. So he did provide it to me, a
5 copy, today.

6 He's asking for a continuance because his matter in
7 state court was actually -- his appeal hearing was continued to
8 December 2. It was in order -- the first hearing that he had,
9 I believe he -- his attorney was released from that. He has a
10 new attorney in state court, and so they continued it out to
11 December 2.

12 And so Mr. Hill is asking, based on his rights here,
13 that he would like for his hearing to be heard -- in
14 Martinsville, Virginia, to be heard before this hearing today.

15 **THE COURT:** So explain to me exactly what is set for
16 hearing in Virginia.

17 **MS. PRYOR:** So, Your Honor, he was found guilty of
18 indecent exposure in Martinsville, Virginia. He appealed that
19 matter. That matter was scheduled for --

20 **THE COURT:** Let me stop you.

21 **MS. PRYOR:** I apologize, yes.

22 **THE COURT:** So he's found guilty in the trial court?

23 **MS. PRYOR:** He was found guilty at trial, yes, Your
24 Honor.

25 **THE COURT:** So he's appealed it to whom?

1 **MS. PRYOR:** He's appealed it to their -- which would
2 be their next level, which would be their superior court. In
3 that case, when he went to court on -- I think that was two
4 weeks ago, they continued that matter to December 2 to be heard
5 at that time, and he now has a new attorney.

6 **THE COURT:** And what's the nature of that appeal?

7 **MS. PRYOR:** It is the underlining matters that are
8 here on this case.

9 **THE COURT:** I understand. Is it a de novo review, or
10 is it an appeal?

11 **MS. PRYOR:** It would be a de novo review, Your Honor.

12 **THE COURT:** All right. What was he found guilty of?

13 **MS. PRYOR:** He was found guilty of the charges that
14 he's here for today, Your Honor, which was in violation of
15 indecent exposure. I think it's 137 -- I think it's 20-137,
16 which is indecent exposure. It is a misdemeanor, Your Honor.

17 **THE COURT:** According to the petition, it's Virginia
18 Code 18.2-387.

19 **MS. PRYOR:** I apologize, Your Honor. That's correct.

20 **THE COURT:** All right. Okay. Anything else on that?

21 **MS. PRYOR:** That's it, Your Honor. And then, of
22 course, you know, Your Honor, if you would not continue it,
23 we're prepared to proceed.

24 **THE COURT:** Well, I've also reviewed apparently today
25 a pro se emergency notice of interlocutory appeal. Are you

1 aware of that?

2 **MS. PRYOR:** That's what I actually have, Your Honor,
3 and I was referencing it as a continuance. Your Honor, I did
4 receive that. I believe it might be couched in the wrong -- in
5 what he's requesting. So, Your Honor --

6 **THE COURT:** This one says he's appealing to the
7 Fourth Circuit; is that not right?

8 **MS. PRYOR:** That is correct, Your Honor.

9 **THE COURT:** What he's appealing?

10 **MS. PRYOR:** Your Honor, he is appealing --

11 **THE COURT:** I haven't ruled yet.

12 **MS. PRYOR:** I know, Your Honor.

13 **THE COURT:** Okay. All right.

14 Mr. Ramaswamy?

15 **MR. RAMASWAMY:** As to this -- addressing this motion

16 --

17 **THE COURT:** Which "this"?

18 **MR. RAMASWAMY:** I'm sorry. There's no file number on
19 it, but the petition for notice of interlocutory appeal, it
20 would appear to the Government he's appealing Document 183,
21 that's in the second paragraph, which is the Court's order on
22 the motion to continue. That was a motion to continue by the
23 defense, which the Court granted and the Government didn't
24 oppose. So it would appear Mr. Hill's attempting pro se to
25 appeal an order that was in the Defendant's favor.

1 **THE COURT:** Hold on just a minute.

2 (Pause in the proceedings.)

3 **THE COURT:** Okay. What's your position on the other
4 motion? They want to continue this because he's appealing
5 Virginia -- the court's -- the trial court's determination.

6 **MR. RAMASWAMY:** I don't believe there is a motion --
7 unless it's one made orally, there is a motion to continue.

8 **THE COURT:** Do I have a written one?

9 **MS. PRYOR:** You do not have a written one, Your
10 Honor. That was an oral motion just now, Your Honor. That's
11 correct.

12 **THE COURT:** What's your view on that?

13 **MR. RAMASWAMY:** We would oppose, Your Honor. The
14 officer is here under subpoena. The Defendant is here. The
15 supervising officer is also here from Martinsville, Virginia.

16 **THE COURT:** Let me ask a question. When did the
17 court in Virginia rule?

18 **MS. PRYOR:** Your Honor, do you mind if I get a second
19 just to ask that question?

20 **THE COURT:** That's fine. I am going to want to know
21 when he took the appeal, too.

22 **MS. PRYOR:** Okay. Yes, Your Honor.

23 (Ms. Pryor conferred with the Defendant.)

24 **MS. PRYOR:** I apologize. Thank you, Your Honor.

25 Your Honor, he actually was found guilty on

1 December 21 of 2019. He filed a pro se appeal on December 21,
2 but it was mailed, so they did not have it couched as a pro se
3 appeal until December 26 of 2019 -- I mean, I'm sorry, 2018. I
4 apologize.

5 **THE COURT:** Okay. And then when was that scheduled
6 for hearing?

7 **MS. PRYOR:** Well, Your Honor, when he did have the
8 first hearing, they then -- he, of course --

9 **THE COURT:** When was the appeal scheduled to be
10 heard, the original?

11 **MS. PRYOR:** Oh, the original, it was not scheduled
12 until May and then -- that's only because he went off -- and I
13 know that's probably longer than what you are asking me for,
14 but they sent him to Butner for competency. He came back in
15 May. They did couch the first hearing for May, and then they
16 continued that one because he released that attorney. And then
17 in July, he had a hearing, which is the one that you gave us
18 permission to continue to this date for that hearing, but then
19 that hearing was then rescheduled. He has another attorney who
20 is going to be handling that hearing on December 2.

21 **THE COURT:** Okay. Well, the motion is dennen. The
22 standard before this Court on a potential revocation of a
23 petition is a preponderance standard, which is a different
24 standard. So even if he were found not to be guilty beyond a
25 reasonable doubt in a criminal court, that would not

1 necessarily preclude this Court from finding him guilty on a
2 preponderance basis because that's the burden of proof. So it
3 is also a late-blooming motion, so on timeliness grounds as
4 well, I am going to deny the motion.

5 **MS. PRYOR:** Thank you, Your Honor.

6 **THE COURT:** All right. I read this emergency
7 petitioner's notice of interlocutory appeal. To the extent
8 that's even pending before me, it's not an impediment to my
9 moving forward. He's purporting to appeal an order that, as
10 the Government says, was one I granted in his favor, extending
11 him more time to proceed. So he's not been harmed by that
12 order, but, in any event, it's interlocutory.

13 So are you prepared to proceed?

14 **MS. PRYOR:** Yes, sir.

15 **THE COURT:** Did you say you reviewed the petition and
16 the supplement with your client?

17 **MS. PRYOR:** I did review it with him, yes, Your
18 Honor.

19 **THE COURT:** Do you have access to his original
20 presentence report?

21 **MS. PRYOR:** I do, Your Honor.

22 **THE COURT:** And are you confident that he understands
23 the charges pending against him?

24 **MS. PRYOR:** I am confident that he understands the
25 charges that are here today.

1 **THE COURT:** All right. Mr. Hill, I need to speak
2 with you for a moment, if you would stand, please, sir.

3 How are you this afternoon?

4 **THE DEFENDANT:** I'm all right.

5 **THE COURT:** Good. Did you receive a copy of the
6 petition and supplement?

7 **THE DEFENDANT:** I did.

8 **THE COURT:** Did you review those with Ms. Pryor?

9 **THE DEFENDANT:** Yes.

10 **THE COURT:** Do you understand the charge against you?

11 **THE DEFENDANT:** I am.

12 **THE COURT:** You may have a seat, sir.

13 The allegation in the petition is that Mr. Hill was
14 arrested by the Martinsville, Virginia Police Department for a
15 misdemeanor indecent exposure on September 21, 2018. He
16 reportedly was running around a public park nude at the time.

17 Does the Defendant admit or deny this allegation?

18 **MS. PRYOR:** He denies, Your Honor.

19 **THE COURT:** All right. Is the Government prepared to
20 proceed?

21 **MR. RAMASWAMY:** Yes, Your Honor.

22 **THE COURT:** All right. You may call your witnesses.

23 **MR. RAMASWAMY:** Thank you. The Government would call
24 Robert Jones.

25 **SERGEANT ROBERT JONES,** GOVERNMENT'S WITNESS, being first duly

1 sworn, testified as follows at 3:48 p.m.:

2 **THE COURT:** Before you begin, give me a chance to
3 look at one thing.

4 **MS. PRYOR:** Your Honor, may I have just one moment
5 with my client?

6 **THE COURT:** Yes, you may.

7 (Ms. Pryor conferred with the Defendant.)

8 **THE COURT:** Okay. I was just confirming that it's
9 Docket Entry 176, that the U.S. Court for the Western District
10 of Virginia in Roanoke did, in fact, find Mr. Hill to be
11 competent. That appears to be the case.

12 **MS. PRYOR:** That is correct, Your Honor.

13 **THE COURT:** Thank you. All right.

14 Mr. Ramaswamy, you may proceed, sir.

15 DIRECT EXAMINATION

16 **BY MR. RAMASWAMY**

17 Q Would you state your name and occupation for the record,
18 please.

19 A Robert Jones, patrol sergeant in the Martinsville City
20 Police Department.

21 Q How long have you been with the Martinsville PD?

22 A Just over 17 and a half years.

23 Q And were you on duty on September 21st of last year?

24 A I was.

25 Q And what were your duties on that date?

1 A I was the supervisor for the patrol shift that evening.

2 Q Did you receive a call from dispatch that evening?

3 A We did.

4 Q What was that call in reference to?

5 A Radio traffic came across as a male subject with no
6 clothes on running down the side of the street at Hooker Street
7 near the Henry County Public Safety building.

8 Q And what did you do in response to that call?

9 A Several of the officers that work for me went to that area
10 and were trying to locate that individual. I came from another
11 part of the town. As I came across, they were not having any
12 luck locating him. I went to an area of Pine Street. At the
13 dead end section of that, there is a set of steps that go onto
14 the walking trail that connects where the individual was first
15 seen to where I was coming from.

16 Q You mentioned Hooker Street was the original place of the
17 report; correct?

18 A Correct. It's Hooker Street and Church Street there at
19 Burger King. It's an intersection right there at that area.

20 Q You mentioned the walking trail. What's the name of that
21 trail?

22 A It is the Dick and Willie Trail.

23 Q And do you know approximately how long that trail is?

24 A It's several miles long.

25 Q And in reference to Martinsville, where does it go in

1 reference -- is it remote or is it residential or a mixture?

2 A A mixture.

3 Q I believe you said you went to a set of steps near Pine
4 Street; is that correct?

5 A Yes, sir.

6 Q Would you tell the Court what happened next?

7 A I went down the steps around the edge of the intersection
8 there where the trail splits off back towards the direction
9 where the individual had been seen. As I was coming up the
10 trail, I could hear footsteps coming towards me; at which
11 point, I stopped to see if the individual would come closer to
12 me before I made contact.

13 Q On that trail, is that trail open at night?

14 A It is.

15 Q Is it a park?

16 A It's a walking trail that goes from the county through the
17 city back out into the county.

18 Q And you said you heard the footsteps before you saw
19 someone?

20 A Correct.

21 Q Did you eventually see someone?

22 A I did.

23 Q Did you see him -- did you have a flashlight?

24 A I did.

25 Q Did you see him by your flashlight or by other light?

1 A By my flashlight.

2 Q And do you see the person that you saw that night?

3 A I do.

4 Q And is he in the courtroom?

5 A He is. It's the Defendant sitting at the table with his
6 attorney.

7 Q Mr. Hill?

8 A Correct.

9 Q Describe Mr. Hill when you saw him.

10 A When I shined my light on Mr. Hill, he was completely
11 naked other than a backpack, his tennis shoes and socks, and a
12 stocking cap.

13 Q How far away was he when you first saw him?

14 A About the length of the courtroom.

15 Q And when you -- after you saw him, what did you do?

16 A I yelled at him to stop. When I shined my flashlight on
17 him, he took off, which would have been where I was facing to
18 my left into the wood line and down the hill into the creek.

19 Q Did you see him holding anything?

20 A He did. He had a yellow flashlight in his hand and then
21 also another black object, which was later found to be another
22 flashlight in his other hand.

23 Q I'm sorry. After he ran down the hill and into the wooded
24 area, did you pursue?

25 A I did.

1 Q Describe that for the Court, please.

2 A We run through the brush, through the thicket down into
3 the creek; at which point, he jumped over a log into the creek.

4 Q Was he still holding the objects?

5 A One of the objects had fell. The small black flashlight
6 had fallen. That was picked up by one of the other officers
7 that came to assist me.

8 Q And what did you do next?

9 A He was handcuffed at that point and was walked out of the
10 wooded area back to the patrol cars that met us at -- off of
11 Hooker Street on one of the side streets.

12 Q You mentioned two flashlights in a backpack. Did he have
13 anything else with him?

14 A Yes, there was -- in his backpack was located a camera.

15 Q Did Mr. Hill make any statements to you at that time?

16 A He was complaining of knee pain; at which point, we
17 transported him to the hospital to get him checked out to make
18 sure he was okay. While there, he proceeded to explain to me
19 that the reason he was out there like that was because a male
20 subject -- a black male in a hoodie had threatened him and
21 forced him to take pictures of himself.

22 Q What -- did he gave any more detail than that, a black
23 male in a hoodie forced him to take photos?

24 A He did. He said that the male subject threatened him and
25 his family and told him that he needed to take these photos of

1 himself naked; otherwise, they were going to hurt his family.

2 Q Did he make any statement as to whether or not this person
3 knew his family?

4 A When questioning him if the male subject was with him when
5 he took the photos and stuff that were on the camera, he stated
6 he was not with him. And when questioned about that and why he
7 didn't come to see us and asked him -- he proceeded to explain
8 to us that this subject was working for law enforcement and
9 other individuals in reference to his prior charges.

10 Q So it was a story that his original child pornography
11 charge -- that this unknown person was somehow affiliated with
12 that charge?

13 A Correct.

14 Q What did he say about the camera itself?

15 A He said that the -- originally said that the male subject
16 had given him the camera to go take the photos. I had seized
17 the camera during this time. A search warrant was issued for
18 it, and on the camera card -- on the SD card inside the camera
19 was a Word document that belonged to Mr. Hill.

20 Q Were there other things on the camera card?

21 A Photos from that evening.

22 Q Did he say what he was supposed to do with the camera
23 after he took these pictures?

24 A He did. He was supposed to leave it on one of the benches
25 on the walking trail.

1 Q Now, did you obtain a search warrant for the contents of
2 the camera?

3 A I did.

4 Q And did you later find the photographs and document you
5 mentioned on the camera?

6 A Correct.

7 **MR. RAMASWAMY:** May I approach?

8 **THE COURT:** Yes.

9 **BY MR. RAMASWAMY**

10 Q Officer Jones, I'm going to show what's marked as
11 Government's Exhibit 1, which is a two-page exhibit, a contact
12 sheet. Do you recognize what's on Government's Exhibit 1?

13 A Yes. These are thumbnails of the photos that were found
14 on that card.

15 Q I'm going to ask you to look at Government's Exhibit 1,
16 and on the photographs themselves, does there appear to be a
17 time/date stamp?

18 A It is.

19 Q Is that time/date stamp consistent with the day that the
20 incident occurred?

21 A It is.

22 Q And also below each photograph is some text that begins
23 with the word "Sanyo," and the first one at the top left of
24 Government's Exhibit 1 says sanyo001.jpg. Do you know what
25 that is?

1 A That's the -- normally, that's the stamp that the camera
2 puts onto the card for the photo that's stored on it.

3 Q So that's the file name for each of the photographic files
4 on the camera?

5 A Correct.

6 Q Is what's shown in Government's Exhibit 1 all of the
7 photographs found on Mr. Hill's camera?

8 A Yes.

9 Q And I know there are --

10 **MR. RAMASWAMY:** I would ask that Government's
11 Exhibit 1 be admitted, Your Honor.

12 **MS. PRYOR:** Your Honor, we have no objection. Just
13 ask that it be sealed because of the nature of it.

14 **THE COURT:** All right. It's admitted.

15 **BY MR. RAMASWAMY**

16 Q I'm going to ask you about Government's Exhibit 1 in
17 relation to this trail, the Dick and Willie Passage. In your
18 further investigation or knowledge, were you able to determine
19 whether these photographs were taken in reference to that
20 trail?

21 A Further investigation from the initial incident, it looks
22 like all of these were taking place at the Greene Company right
23 behind the Mexican restaurant right in that area, Virginia
24 Avenue, Memorial Boulevard, and Commonwealth Boulevard.

25 Q What type of area is that?

1 A It's the Wal-Mart -- it's our Wal-Mart intersection.
2 There's several restaurants, a gas station right here in this
3 little area, along with a hotel there as well.

4 Q In terms of Martinsville, or Henry County, is it -- how
5 would you describe it in terms of car traffic? Foot traffic?

6 A Heavy traffic.

7 **THE COURT:** Any objection to sealing these, given the
8 nature of them?

9 **MR. RAMASWAMY:** I don't have any objection.

10 **MS. PRYOR:** Thank you.

11 **THE COURT:** I'll order that they be sealed, that is,
12 Government's Exhibit 1.

13 **BY MR. RAMASWAMY**

14 Q It's Detective Jones; correct?

15 A Sergeant Jones.

16 Q I'm sorry.

17 A No problem.

18 Q Sergeant Jones, I'm going to show what's marked as
19 Government's Exhibit 2. Do you recognize Government's
20 Exhibit 2?

21 A Yes, sir.

22 Q In Government's Exhibit 2 is a map, arrows, and some text.
23 Have you previously reviewed this in relation to the
24 photographs and file names?

25 A Yes, sir.

1 Q And as it describes in numbered sequence one through five,
2 does that accurately show, as to the files in Government's
3 Exhibit 1, the locations where those photographs were taken?

4 A Yes, sir. These are consistent with the photographs.

5 Q Those photographs I mentioned before have a time stamp;
6 correct?

7 A Correct.

8 Q And for the record, on Government's Exhibit 2, on the
9 first number there, under No. 1, when do the photographs begin,
10 as far as the time stamp?

11 A At 12:29 a.m.

12 Q Sergeant Jones, I'm showing you what's marked as
13 Government's Exhibit 3, and I want you in reference to -- what
14 does Government's Exhibit 3 show?

15 A This is photographs of the Greene Company from Virginia
16 Avenue over the bridge, along with the beginning of the walking
17 trail there for parking, the bike rack, and the little bulletin
18 board there at the beginning of the trail.

19 Q You mentioned that bike rack and bulletin board. That's
20 approximately in the center of the large photograph; correct?

21 A Correct.

22 Q And the bike rack is that the green --

23 A Just the little -- right beside the green trash can and
24 bulletin board.

25 Q Do you see those same -- that bulletin board and bike rack

1 and trash can in Government's Exhibit 1, in those photographs?

2 A Yes.

3 Q And I'll show you what's marked Government's Exhibit 4.

4 Again, another large photograph in the daytime -- taken in the
5 daytime. Do you recognize that?

6 A Yes, sir. That is the backside of the Greene Company and
7 their parking lot, along with the Taco Bell old truck --
8 transfer truck that they have there.

9 Q That says Taco Bell?

10 A Minus a few letters.

11 Q Okay. On the second page of Government's Exhibit 1, is
12 there are also a Taco Bell truck with the B and final L missing
13 from Bell?

14 A Correct.

15 Q Is that what you were able to determine was the location
16 of the photographs shown on the back -- the second page of
17 Government's Exhibit 1?

18 A Yes, sir.

19 Q I'll show you what's marked Government's Exhibit 4 --
20 Government's Exhibit 5. Would you tell us what's shown in that
21 photograph?

22 A That is the intersection for the Commonwealth, Virginia
23 Avenue, Memorial Boulevard intersection.

24 Q And that's a photograph taken in the daytime; correct?

25 A Correct.

1 Q Now, in relation to Martinsville, Henry County -- well,
2 strike that.

3 Is that the same intersection that has the Wal-Mart on the
4 one side and other businesses on the other?

5 A Correct.

6 Q In relation to Martinsville and Henry County, how busy of
7 an intersection is that? Is it a -- it's in the top?

8 A It's one of our busiest intersections for that area.

9 Q I am going to show you a photograph marked Government's
10 Exhibit 6.

11 **MR. RAMASWAMY:** And I have no objection if counsel
12 moves to seal this one as well, Your Honor.

13 **MS. PRYOR:** That would be my request, Your Honor.

14 **THE COURT:** All right. It's granted.

15 **BY MR. RAMASWAMY**

16 Q I have some questions related to Government's Exhibit 6.
17 What is shown in that exhibit?

18 A This is the grassy section just up from the intersection
19 behind the gas station. The Wal-Mart intersection is here with
20 the stoplights. The signs for all the stores down there in the
21 strip mall just below Wal-Mart is here in the smaller, lower
22 right-hand corner.

23 Q And you're pointing to the lower right-hand corner of
24 Government's Exhibit 6. Is there also a yellow sign with a
25 semicircular top about in the center near the bottom?

1 A Yes, sir.

2 Q What business is that?

3 A That's one of the businesses right here on the main strip.
4 I think it's a Midas or Monro, something to that effect, and
5 then Hill Chiropractic is right there as well.

6 Q Is that a tire store?

7 A Correct.

8 Q And is that visible? Is this intersection visible in
9 Government's Exhibit 5?

10 A Yes, sir. It's right here.

11 Q And you're pointing to -- in Government's Exhibit 5, on
12 the right, you're pointing to where there's a Lowe's sign, in
13 between the Lowe's and the Wal-Mart?

14 A Right. The Hill Chiropractic sign is here just at the
15 stoplight, the Monro Muffler shop is here, and the Wal-Mart
16 intersection is all right there together.

17 **MS. PRYOR:** Your Honor, do you mind if I move closer
18 just so I can see where they're pointing? I am unable to see
19 it from here.

20 **THE COURT:** Why don't you hold it up so counsel can
21 see it.

22 **THE WITNESS:** The Wal-Mart intersection is here where
23 the blue sign is. We've got the yellow building, which is the
24 muffler shop, tire shop there, and then just past that one with
25 this other brick building behind it is the Hill Chiropractic

1 building.

2 **BY MR. RAMASWAMY**

3 Q I have a couple more.

4 Directly -- is Mr. Hill shown in this Government's
5 Exhibit 6?

6 A He is.

7 Q In the space between his arm, is there a sign visible?

8 A It is.

9 Q Do you see that same sign in Government's Exhibit 5?

10 A Yes, sir.

11 Q What sign is that in Government's Exhibit 5?

12 A It's the Mexican restaurant sign, the El Parral.

13 Q And do you also see behind Mr. Hill in Government's
14 Exhibit 6 what appears to be a yellow curb?

15 A I do.

16 Q Do you see that yellow curb in Government's Exhibit 5?

17 A I do. That is actually the Stultz Road intersection.

18 Q Can you tell on Government's Exhibit 5 the vantage point
19 from which Government's Exhibit 6 was taken?

20 A That appears to be the grassy section behind the gas
21 station, which is Fast Fuels.

22 Q I'm going to give you a pen. If you would mark on there,
23 if you're able.

24 A Fast Fuels would be up here just out of camera view, and
25 it would be down here in this corner in Photo 6.

1 Q So you placed a small dot on each photograph, which is the
2 apparent vantage point on Government's Exhibit 5 from which
3 this photo was taken; correct?

4 A Correct.

5 Q Do you see anything other than the store lights in
6 Government's Exhibit 6?

7 A Yes, sir. There appears to be taillights from a vehicle
8 passing at the intersection.

9 Q And that is on the photograph just to the right of the
10 Defendant's leg with the black sock?

11 A Correct, which would be roughly two-thirds down the page,
12 middle of the page.

13 Q In relation to this trail, do you -- strike that.

14 Let me show what's marked as Government's Exhibit 7, and I
15 ask you to take a moment and look at that.

16 Have you seen that exhibit before?

17 A I have.

18 Q Would you describe what's in the exhibit?

19 A It's a roadmap of the city and locations of where the
20 photos were originally started and a location of the time of
21 the original call that we received from dispatch and
22 approximate arrest location.

23 Q So there's four annotations on here. This 310 Forest
24 Street, do you know what that is?

25 A That's down where the suspect lived, Mr. Hill.

1 Q And everything -- as far as the photographs, were those
2 taken where it says photos taken here, 12:29 to 1:20 a.m.?

3 A Correct.

4 Q And I may not have asked you the time that the call came
5 in to the police, but do you know what time that call came in?

6 A It was 3:12 in the morning.

7 Q And is this -- can you review the place where it says
8 "arrest"? Is that accurate as to the place to which the
9 Defendant was arrested?

10 A Yes, sir.

11 Q The distance between where the photographs were taken and
12 where it shows the 911 call location was made, can you tell
13 even approximately what distance was that?

14 A It's a couple of miles.

15 **MR. RAMASWAMY:** One moment, please.

16 **THE COURT:** Sure. While you're going through that,
17 just so counsel has an idea, I can go until about 5:15 today.
18 So if you think you need to go beyond that, we'll have to make
19 arrangements.

20 **MR. RAMASWAMY:** I don't anticipate -- thank you, Your
21 Honor. I am sorry to interrupt. I don't anticipate more than
22 two other exhibits, and my evidence will be all through this
23 witness.

24 **THE COURT:** All right.

25

1 **BY MR. RAMASWAMY**

2 Q I'm going to show you a four-page exhibit marked as
3 Government's Exhibit 8, and I ask that you take a moment and
4 look at that, please.

5 Sergeant Hill [sic], can you tell -- have you seen
6 Government's Exhibit 8 before?

7 A I have.

8 Q What is it?

9 A It's the document that was found on the SD card in printed
10 version that belonged to Mr. Hill that was on the camera when
11 we did the search warrant.

12 Q So this document was on the same card as the photographs?

13 A Correct.

14 Q And I will show what's been marked as Government's
15 Exhibit 9. I'll ask that you take a look at that.

16 In your examination of the contents of the camera card,
17 did you observe the properties for that four-page document I
18 just showed you?

19 A I did.

20 Q And is this a screenshot of the properties?

21 A It is.

22 Q And under the author, what does it say?

23 A Brian D. Hill.

24 Q Did you ever see anyone else on the trail that night
25 besides Mr. Hill?

1 A No, that's the only person that I came into contact with.

2 Q Other than September 21, were you -- of last year, were
3 you aware of other calls in reference to a naked person on that
4 trail or in that area?

5 A We have had other calls in the city in reference to a
6 white male running naked with a stocking cap on, which was
7 consistent with Mr. Hill.

8 Q Did you get similar calls after Mr. Hill was arrested in
9 this case?

10 A We've had, I know, two other calls for indecent exposure
11 incidents, but they were both identified as not being Mr. Hill.

12 Q And you mentioned he was -- he was charged with indecent
13 exposure; correct?

14 A Correct.

15 Q Are you familiar with the Virginia statute?

16 A Yes, sir.

17 Q I will show you what's been marked as Government's
18 Exhibit 10, and ask that you take a look at that and see if you
19 recognize that.

20 A Yes, sir.

21 Q What is Government's Exhibit 10?

22 A That is a printout of our state statute for indecent
23 exposure.

24 Q And that's under your Virginia Code Section 18.2-387;
25 correct?

1 A Correct.

2 Q That's what Mr. Hill was charged with?

3 A He was charged under our local statute, which mimics this
4 just for funding purposes.

5 Q There was mention before about a trial. Was that a bench
6 trial?

7 A Yes, sir.

8 Q So the current matter on appeal was on appeal for jury
9 trial; correct?

10 A It was slated for a jury trial, yes, sir, it was.

11 Q Do you know when that was set for trial?

12 A It was a couple of weeks ago. It was continued. I'm not
13 sure of the exact date. I don't have my calendar.

14 **MR. RAMASWAMY:** I have no other questions.

15 **THE COURT:** All right. Are you moving any of these
16 in?

17 **MR. RAMASWAMY:** I'm sorry. I believe I moved for
18 Government's Exhibit 1. For the remainder of the exhibits,
19 we'd asked that they be admitted, and I believe two of them are
20 under seal, Your Honor.

21 **THE COURT:** Any objection?

22 **MS. PRYOR:** No objections, Your Honor.

23 **THE COURT:** They are admitted, and Exhibit 1 and
24 Exhibit 5 are under seal.

25 Ms. Pryor, any questions?

1 it to us at that point.

2 Q Was there anyone on the trail at that time?

3 A I did not make any contact with anybody else at that time.

4 Q And you said what when you approached him? He was -- that
5 he did -- he did lead you on a pursuit?

6 A Correct.

7 Q Do you recall about how long that pursuit was?

8 A It wasn't far. He made it to the bottom of the hill
9 through the vines and brush and, like I said, jumped over a log
10 into the creek out of my sight, which I was trying to give him
11 commands to show me his hands at that point.

12 Q And you didn't see anyone when you were on that pursuit?

13 A No.

14 Q At the time -- these photos are clearly taken during the
15 daytime with many cars, of course, on this, but at 3:12 a.m.
16 when you were traveling, based on that call, did you see --
17 about approximately how many cars was on the road at that time?

18 A This was not at -- when he was taken into custody, it was
19 not at that intersection. It was farther up the trail towards
20 the other side of the city.

21 Q Okay. So farther up the trail -- are there any
22 restaurants farther up that trail?

23 A That actually comes out to another intersection where
24 there's restaurants, some other businesses, and stuff like
25 that. Those were not open during this particular time. It

1 proceeds up past the access for the hospital and continues on
2 out to the Public Safety building, which is -- somebody's
3 staffing that 24 hours a day.

4 Q Okay. And you said that the caller, based on the diagram
5 on -- I believe that's Government's Exhibit No. 7. The caller
6 that called in at 3:12 a.m., that was near I believe -- that
7 looks like a Burger King; is that correct?

8 A Correct. Right there at that intersection for the Burger
9 King is a 24-hour laundromat and just around -- if you take a
10 right from there, you are in sight of the CVS that's open 24
11 hours a day.

12 Q And that's not pictured here on Exhibit No. 5; correct?

13 A No.

14 Q And when you approached -- or when you did ask him to
15 stop, did you have on your uniform at the time?

16 A I did.

17 Q And did you tell him that you were police at the time?

18 A I do not recall if I actually said I was police or not
19 when I told him to stop; at which point, he went straight into
20 the woods, and I began chasing him.

21 Q And once you did arrest him, you said that he had a
22 flashlight and a book bag, and I believe you said one other
23 item?

24 A There was a backpack on him. He had a large flashlight,
25 like a square battery one, in his hand, and he also dropped a

1 small black flashlight while running.

2 Q And you were able to recover all of those things?

3 A We did.

4 Q Did he voluntarily provide you with his camera as well?

5 A He did. When he was explaining the situation, his first
6 story as to what had -- the reason why he was out there that
7 late, he gave us permission to look at -- one of the officers
8 to look at the photos, and that's how we came about those.

9 Q Okay. And one of the things that he said at the time is
10 that there was a male that was in a hoodie, that he was told
11 that he had to take those pictures?

12 A Correct.

13 Q And did he tell you any other information about the male
14 in the hoodie?

15 A He proceeded to explain to me that during this time frame,
16 during questioning him and trying to get some more information
17 about that -- he provided more information as to that male
18 subject with the hoodie was working for the people that were --
19 that had originally been in his original charges.

20 Q Okay. And did you investigate whether he -- whether there
21 was some threat to his family or anything?

22 A Talking with him, the time frame didn't really add up to
23 me at that point. We made contact with his -- tried to make
24 contact with his mother that night. I don't know if anybody
25 actually spoke to her. I don't recall.

1 Q Okay. But as part of your investigation, have you been
2 able to find out whether there were some threatening matters
3 that was sent to him or his family?

4 A I have not heard anything of that, no.

5 Q But do you -- but you didn't do the investigation?

6 A No.

7 Q Did Mr. Hill -- when you approached him, did he tell you
8 that he had autism?

9 A He did.

10 Q And do you guys -- does your -- I would say does your --
11 does the department train you on how to approach someone with
12 autism?

13 A We deal with some academy-wise and not much follow-up
14 after that.

15 Q Did he also tell you that he was a diabetic as well?

16 A I do not recall him telling me that, no.

17 Q Did he tell you that he was also OCD?

18 A Not that I recall.

19 Q And when you took him to the hospital, did they admit him
20 into the hospital that night?

21 A No, they cleared him medically and psychologically and
22 released him to us.

23 Q Okay. Did you get those reports from -- the medical
24 reports?

25 A No, I did not do a subpoena for his hospital records.

1 Q Okay. Did you speak to a doctor or anyone regarding his
2 condition or anything of that nature that night?

3 A We -- other than just checking with him to see if they
4 were going to be releasing him or admitting him, no.

5 Q Do you recall any tests that were taken that night besides
6 just checking, I believe you said, his knee?

7 A No, ma'am. Like I said, when we -- we also checked him
8 for mental health issues is the reason why they cleared him
9 psychologically, to make sure there was nothing going on there.
10 Once they do that, they do lab work and other stuff. I didn't
11 ask about his medical history.

12 Q Was there any tests dealing with his blood alcohol content
13 or anything of that nature?

14 A I don't know if they did. Like I said, I did not get his
15 records. They normally do, but I do not have that.

16 **MS. PRYOR:** No further questions, Your Honor.

17 **THE COURT:** Any redirect?

18 **MR. RAMASWAMY:** Briefly, Your Honor.

19 REDIRECT EXAMINATION

20 **BY MR. RAMASWAMY**

21 Q Counsel asked you about certain businesses and whether or
22 not they were open in this time frame. Are there residences
23 along this trail?

24 A It is.

25 Q Were there residences close to the trail?

1 A There are.

2 Q Are there residences where there's no obstruction between
3 the residence and the trail?

4 A Yes, sir.

5 Q And this did, in fact, come in on a call of a report of a
6 naked man; correct?

7 A Correct.

8 **MR. RAMASWAMY:** No other questions.

9 **MS. PRYOR:** I just have a follow-up on that.

10 **THE COURT:** All right.

11 RE-CROSS-EXAMINATION

12 **BY MS. PRYOR**

13 Q Were any pictures taken in front of any houses?

14 A Not on the camera that I saw, no.

15 Q And the residences that he mentioned, are those residences
16 behind trees on the trail?

17 A There's some that back up to it that you can see the trail
18 from, along with -- the original call that came in, the trail
19 actually runs right up the side of the road where the original
20 call came in.

21 Q And did that call come in from a resident?

22 A No, it was a passerby in a car.

23 **MS. PRYOR:** Thank you. No further question.

24 **THE COURT:** What time did you say you were on the
25 scene there the first time?

1 A Yes, sir, I have supervised him Mr. Hill since about
2 July 1, 2015.

3 Q Okay. And as long as you have been supervising Mr. Hill,
4 has he had any infractions besides the one that we are
5 presently here for today?

6 A The only one was when shortly after he was released from a
7 prior revocation hearing, for which he was not revoked, he was
8 referred to sex offender specific treatment. After a short
9 time of enrollment, the counselor advised that he was not
10 amenable to treatment and recommended that he be terminated. I
11 advised the probation office in this district, who had, in
12 turn, advised the Court, and the determination was made that if
13 he was otherwise stable with no other concerns or issues, we
14 could just continue with supervision.

15 Q Okay. And so he continued on supervision.

16 Did he have the occasion to attend any mental health
17 treatment?

18 A He saw a private counselor named Preston Page that was
19 paid for by his Medicaid, I do believe. He maintained contact
20 with Mr. Page, and I would check with Mr. Page occasionally to
21 see how things are going.

22 Q Are you aware that Mr. Hill is diagnosed with autism?

23 A I am aware, yes.

24 Q And with your reaction and your interaction with him, have
25 you found -- have you found to determine that you do see some

1 level of weaknesses when it comes to -- when it comes to your
2 communication with him?

3 A Sometimes it can be difficult to communicate with
4 Mr. Hill. So I have on many occasions -- he resides with his
5 mother, and I have spoken with Roberta, is his mother's name,
6 to see how things are going. And Mr. Hill has always been
7 respectful. It is hard to communicate with him on --
8 sometimes, but I will speak with his mother, and I have spoken
9 with his grandparents on occasion as well.

10 Q Okay. And when you've talked to Mr. Hill, I think you
11 stated it, has he been respectful with you?

12 A He has.

13 Q And did Mr. Hill tell you -- did you get an opportunity to
14 speak to him about this particular violation hearing?

15 A In what regard?

16 Q Just has he talked to you about what happened or anything,
17 that he spoke to the police officers and that nature?

18 A When he was incarcerated, he had submitted some letters.
19 We have not spoken face to face or on the telephone regarding a
20 violation.

21 Q And other than this violation that we're here today,
22 Mr. Hill, to your recollection, has been in compliance with all
23 of the conditions of his release?

24 A He's been in compliance since I have supervised him until
25 his arrest.

1 Q Okay. Did you --

2 **MS. PRYOR:** Can I have one moment, Your Honor?

3 **THE COURT:** Yes.

4 (Pause in the proceedings.)

5 **BY MS. PRYOR**

6 Q Do you recall what date he was arrested for these matters?

7 A September 21, 2018.

8 Q Okay. And do you recall what date the federal -- that the
9 federal Government -- or, let me say, the probation office
10 filed their violation?

11 A I'm not aware of the exact date that the petition in North
12 Carolina -- this district was filed, but I notified the
13 probation office, and they proceeded to request the violation
14 warrant. I'm not exactly sure of the date.

15 Q Okay. And do you recall whether Mr. Hill, once he was --
16 once he was found guilty in Martinsville, did the Federal
17 Government have a hold on his -- on his detainer?

18 A That is correct, because he was brought into magistrate
19 court in Roanoke for his initial appearance on the violation
20 proceedings.

21 Q Okay. And can you tell the Court what happened at the
22 particular proceeding? Did you attend that proceeding?

23 A Yes, ma'am, I did.

24 Q First, did you attend that proceeding?

25 A Yes, ma'am, I was there.

1 Q And can you tell the Court what the judge recommended
2 based on that proceeding that day?

3 A This took place on December 26, 2018. Magistrate Judge
4 Ballou ordered that he be sent to Butner for a psychological
5 evaluation.

6 Q And how many days was he supposed to be at that -- or go
7 through that process?

8 A He was not returned to court until May 14th of this year,
9 2019.

10 Q Okay. After he returned May 14th of this year, was he
11 released at that time?

12 A Yes, ma'am, he was.

13 Q Okay. And he was released back home?

14 A Yes, to the home that he shares with his mother.

15 Q And did that Court find that he was not a flight risk at
16 the time?

17 A Yes.

18 Q And since he's been home, I believe you said May 14, 2019,
19 has he been in violation of that particular conditions of that
20 release?

21 A No, ma'am.

22 Q Okay. And based on that release, that was -- based on
23 that release on May 14, 2001 [sic], have you had a chance to
24 visit him at home?

25 A Yes, monthly.

1 pictures.

2 Q Let me ask you -- I believe it's Government's Exhibit 8
3 was the monthly supervision report for the month of
4 August 2018.

5 A Yes, sir.

6 Q Have you -- did you previously see that exhibit?

7 A Yes, I have previously seen the exhibit.

8 Q Had you seen it before today?

9 A It is a copy of our monthly supervision report, which we
10 receive timely every month from Mr. Hill, and it was
11 representative of one that he sends me every month.

12 Q As far as being a registered sex offender and the
13 conditions of his supervision, would that prevent him from
14 going to parks and places where children congregate?

15 A I would have to review his conditions of supervision, but
16 our standing order in the Western District of Virginia would
17 require permission for someone to go to places that are
18 primarily used by children.

19 Q Did Mr. Hill ever seek such permission in relation to the
20 Dick and Willie Passage?

21 A In the past, he has asked for permission during the
22 daytime hours to go on the trail to take pictures of wildlife
23 and nature.

24 Q Now, the probation office's recommendation in this case is
25 revocation; correct?

1 A That's correct.

2 Q Has that changed, to your knowledge, since the time the
3 report has come up?

4 A To my knowledge, it has not.

5 **MR. RAMASWAMY:** No other questions.

6 **THE COURT:** Any redirect?

7 **MS. PRYOR:** Yes, just one.

8 REDIRECT EXAMINATION

9 **BY MS. PRYOR**

10 Q Did -- we've mentioned about the sexual offense program.
11 Was there a workbook that was provided to Mr. Hill?

12 A To my knowledge, there was, and he completed it very
13 quickly, which the workbook, as it's been explained to me, it
14 takes quite some time to complete. There are numerous phases
15 that you must go through, and it's not something that can be
16 completed without presenting the material to the group and
17 receiving feedback. It's not something that can be completed
18 in a couple of weeks or even a month.

19 Q Okay. And every time that Mr. Hill has went out, Mr. Hill
20 does inform you that he is traveling, or any of that nature;
21 correct?

22 A Yes, ma'am.

23 **MS. PRYOR:** Thank you. No further questions, Your
24 Honor.

25 **THE COURT:** You may step down, sir.

1 (At 4:37 p.m., witness excused.)

2 **THE COURT:** Any other evidence for the Defendant?

3 **MS. PRYOR:** Yes, Your Honor.

4 **THE COURT:** All right.

5 **MS. PRYOR:** I call Ms. Roberta Hill, Your Honor.

6 **ROBERTA HILL,** DEFENDANT'S WITNESS, being first duly sworn,
7 testified as follows at 4:37 p.m.:

8 DIRECT EXAMINATION

9 **BY MS. PRYOR**

10 Q Can you tell us your name for the record.

11 A Roberta Ruth Hill.

12 Q And what is your relationship with Mr. Brian Hill?

13 A I'm his mother.

14 Q Okay. And where does Mr. Hill stay in comparison to where
15 you stay?

16 A In the apartment below my apartment at 310 Forest Street,
17 Apartment 2.

18 Q And so is this a type of duplex type of home?

19 A Yeah, it is.

20 Q Okay. And so do you work during the daytime?

21 A No. I'm at home, and I can check on him any time during
22 the day and night.

23 Q Okay. And so at one time, you guys were having some
24 issues in the same home that Mr. Hill lives in dealing with the
25 chimney; correct?

1 A Yes. There was damage in his apartment with water damage
2 on his wall and ceiling in his living room.

3 Q Did you call someone to get that fixed?

4 A Yeah, I did.

5 Q Do you recall what the name of that company was that you
6 called to get that fixed?

7 A No, I can't recall the name of the company.

8 Q Do you recall how much you paid for getting it fixed,
9 getting the chimney fixed?

10 A They put -- he found out that it had been -- are you
11 talking about the first time before --

12 Q Yes, I'm talking about the first time that you got your
13 home --

14 A Yeah, that was \$300 to get it fixed. I was trying to keep
15 birds from going into the chimney.

16 Q Okay. And so you had a professional come out to get that
17 fixed?

18 A Yes.

19 Q And was there an occasion that you had that same
20 professional come back out to review it because of some issues
21 that you stated?

22 A Yeah, there was another fireplace company that came out to
23 take a look at it in January 30 of 2019.

24 Q Okay. And when they came out to fix it, did they tell you
25 of anything that might have been happening in the home at the

1 time?

2 A Yeah, he said that he found out that all three flues of
3 the chimney had been completely sealed off, and that means that
4 my furnace and hot water heater was venting out through our
5 apartments into -- he said that we would have had carbon
6 monoxide coming into our apartments.

7 Q Okay. And do you recall what date that you had that
8 particular professional come out and say that?

9 A January 30, 2019.

10 Q Okay. And Mr. Hill was -- and you do recall that Mr. Hill
11 was arrested for indecent exposure in Martinsville, Virginia?

12 A Yes.

13 Q Okay. And do you recall what that date was?

14 A September 21, 2018.

15 Q Okay. Did Mr. Hill -- and do you recall Mr. Hill having a
16 trial in Martinsville, Virginia?

17 A Uh-huh.

18 Q And were you present for that trial?

19 A Not the first trial. I was present for the trial in
20 December, December 21, I think.

21 Q Okay. Did he get a chance to come home?

22 A No, he did not.

23 Q Okay. And do you recall the first time that Mr. Hill got
24 a chance to come home after that particular -- after the first
25 time he was arrested?

1 A He came home on May 14, 2019.

2 Q Okay. And did Mr. Hill -- do you recall if Mr. Hill went
3 to the doctor any time in between that time?

4 A Yeah, he fell down one night. I guess he passed out and
5 hit his head on a desk in his office and managed to somehow get
6 back to his bedroom and fall asleep and whenever -- I set my
7 alarm at 4:30 in the morning to check on him, check his blood
8 sugar. I went down there. I saw all the blood on the pillow
9 and realized something had happened, checked his blood sugar,
10 treated an insulin reaction, and then I called 911 because I
11 didn't know what had happened to him, and I saw that there was
12 a gash above his eye. So the paramedics came out. They
13 recommended for him to go to the hospital. He refused to go in
14 the ambulance. So it took four hours for him to go through his
15 OCD routines before I could get him to the emergency room.

16 Q Do you recall when that occurred, about the date when that
17 occurred?

18 A That was during the winter, right after I first got the
19 chimney fixed to keep birds from going into the chimney. It
20 happened right after that.

21 Q Okay. And you stated that it took about four hours for
22 you to get him to the hospital. I believe you mentioned OCD?

23 A Yeah, he has obsessive-compulsive disorder, and he does
24 lengthy hand-washing routines and shower routines.

25 Q Okay. And how long has he been doing that?

1 A He's been doing that since he was in 6th grade.

2 Q Okay. And is Mr. -- has Mr. Hill been diagnosed with
3 autism?

4 A Yes.

5 Q When was he diagnosed with autism?

6 A When he was four years old, he was diagnosed by Teacch in
7 Greensboro.

8 Q And does he have -- and based on him being diagnosed with
9 autism, do you have difficulty communicating with him?

10 A Yeah.

11 Q And what do you -- tell the -- can you tell the Court what
12 that means for you and your family?

13 A Yeah, communication problems. Sometimes when I try to
14 explain something to him, he doesn't quite understand what I'm
15 saying, or he's unable to see my perspective, and sometimes he
16 will get a little upset about it, which isn't unusual for
17 people with autism. So I have to further explain things, or I
18 have to be quiet and let him cool down --

19 Q Okay.

20 A -- before I can talk to him.

21 Q Does he get treatment for autism?

22 A No. There really -- when he was a kid, he was put on two
23 or three different medications that never really helped him.
24 So we had -- Teacch was coming out to help a little bit with
25 the school, but other than that --

1 Q Does he get any treatment now for any mental health or
2 autism now?

3 A No, not for the autism. He is going to a counselor.

4 Q Okay. And what does he go to the counselor for?

5 A He goes to Piedmont Counseling a couple times a month
6 because that's what they wanted -- a condition of his bond.

7 Q And does he -- is he taking any medication at this time?

8 A Yeah, he's taking a medication to help with the OCD and
9 anxiety. I think it's called Zoloft. I'm not sure.

10 Q Okay. That's okay.

11 And as far as -- you mentioned carbon monoxide. Is he
12 taking any -- do you recall if he took any medication for the
13 carbon monoxide treatment?

14 A No, no, he didn't. We didn't know until four months after
15 he was arrested that we had carbon monoxide in our home.

16 Q Okay. And once you found out that you had carbon monoxide
17 in your home, have that been treated in your home at this time?

18 A Yeah, we got it fixed. He unplugged the flue that went to
19 the heater and the hot water heater, and he put a chimney cap
20 on the top. So we don't have any more problems with that.
21 And, plus, we got two carbon monoxide detectors in my apartment
22 and in his apartment.

23 Q Okay.

24 **MS. PRYOR:** I have no further questions, Your Honor.

25 **THE COURT:** Any examination from the Government?

1 take these pictures?

2 A Yes, I am.

3 Q That's a story that he repeated for some time, wasn't it?

4 A Yes.

5 Q And it's also in documents that he filed with the court,
6 isn't it?

7 A Yes.

8 Q And at some other time, we have his story that carbon
9 monoxide was to blame; correct?

10 A Right.

11 Q Does that coincide about when Mr. Hill found out there was
12 a probation report on the same memory card?

13 A I don't know.

14 Q You live in the same house with Mr. Hill; correct?

15 A I'm in the apartment above his apartment.

16 Q It's a house?

17 A Yes, connected.

18 Q Yes. You live in the same house with Mr. Hill; correct?

19 A Yes.

20 Q And you claim -- or you're stating there was some type of
21 carbon monoxide problem for which you're trying to relate
22 Mr. Hill's conduct on September 21, 2018; right?

23 A Right. I saw some things with his behavior prior to that
24 time, that I didn't know what was going on, but I thought that
25 he was acting oddly. But, also, I was being exposed, too, and

1 I had some problems that I was dealing with, and I didn't
2 understand what was going on.

3 Q So this wasn't fixed until, I believe you said,
4 January 30, 2019; correct?

5 A That's whenever it was inspected and we found out about
6 the problem, and he removed the tin, yes.

7 Q So from September 21, 2018, to January 30, 2019, if you
8 had such a problem, nothing was done to fix it; right?

9 A Right.

10 **MR. RAMASWAMY:** No other questions.

11 **MS. PRYOR:** Just a follow-up.

12 REDIRECT EXAMINATION

13 **BY MS. PRYOR**

14 Q So from September of 21, 2019 -- I mean, 2018, to, I
15 believe you said, January of 30 of 2019, did you see some
16 problems in your home that was happening?

17 A Yeah. The water damage in my son's apartment got
18 increasingly worse. The ceiling started falling down. I
19 didn't know what was going on because my apartment is right
20 above his, and I wasn't getting any water damage. So I thought
21 initially it has to be the foundation. So I called the
22 foundation place, and they could only come three months later.
23 So I waited for that, and they said it's not the foundation.
24 They thought maybe it's the chimney or the roof. I got a
25 roofing company in. They recommended putting a chimney cricket

1 in front of the chimney. They thought that would stop it. So
2 I got that done. That didn't stop it. So then I called a
3 fireplace expert out to take a look at it, and he found out
4 that it had been sealed up.

5 Q And also -- you mentioned that there was also some things
6 that were affecting Mr. Hill during that time that you couldn't
7 figure out. Can you describe some of those things for the
8 Court?

9 A He was saying that he couldn't think, he couldn't focus,
10 and he was extremely tired. I also was extremely tired, and I
11 didn't know why. I was complaining to my parents. So both of
12 us were complaining about things like not being able to think
13 clearly.

14 Q Okay.

15 **MS. PRYOR:** No further questions, Your Honor.

16 **MR. RAMASWAMY:** One follow-up.

17 RECROSS-EXAMINATION

18 **BY MR. RAMASWAMY**

19 Q Would those things happen more often when you were inside
20 the home with the carbon monoxide?

21 A Yes.

22 Q You've heard the testimony about the conduct; correct?

23 A Yes.

24 Q That happened outside, didn't it?

25 A Yes, but, I mean, I was always tired for that period of

1 time. So, I mean -- and my son was constantly complaining
2 about not being able to think. I can't really say that that
3 was inside the house or outside the house. It was just
4 continually during that time span that we were having problems.

5 Q As a matter of fact, the testimony showed, based on the
6 camera card time, he was outside for several hours on
7 September 21, doesn't it?

8 A Yeah.

9 Q That's not consistent with inhaling carbon monoxide, is
10 it?

11 A Well, from what I've read online, it can cause a lot of
12 different problems. That can -- it could affect your
13 neurological system. I also was having a lot of head shaking
14 going on. My parents noticed that. So it can affect
15 neurological problems in the body.

16 **MR. RAMASWAMY:** No other questions.

17 **THE COURT:** All right. You may step down.

18 (At 4:51 p.m., witness excused.)

19 **MS. PRYOR:** No further evidence, Your Honor.

20 **THE COURT:** Since the Government's got the burden
21 here, I would be happy to hear from the Government.

22 **MR. RAMASWAMY:** Your Honor, in this case, the
23 violation is the Defendant committed the criminal violation of
24 the Virginia Code for indecent exposure. I have given the
25 Court the statute, but, here, if it had only been the phone

1 call and the arrest, that's one thing, but we have a series of
2 photographs which are just plainly inexplicable.

3 As to the violation itself --

4 **THE COURT:** Let me ask a question about the
5 photographs. They are taken from a distance. How does
6 somebody take a photograph from a distance like that?

7 **MR. RAMASWAMY:** I would ask the Court to note a
8 couple of things. One is the officer's testimony about
9 flashlights. He had two flashlights. And, second, in the
10 vantage point of the photographs themselves, note the proximity
11 of the ground, and it would be our contention the camera is
12 simply set on the ground and a timer is used. As a matter of
13 fact, some of them appear to be retakes. Where Government's
14 Exhibit 1, for instance, the top right photo, sanyo096, is too
15 dark, the next photograph in sequence sanyo097 is well lit. In
16 effect, it supports the inference that he repositioned the
17 lights in order to more clearly take the photographs.

18 There's no one else depicted in these photographs.
19 In every one of them, they appear to be taken with the camera
20 set on the ground.

21 **THE COURT:** All right.

22 **MR. RAMASWAMY:** In this case, as to the conduct
23 itself -- I'm not at this point addressing anything else -- two
24 things. His initial story is clearly impossible, that someone
25 gave him a camera and told him to take these pictures under

1 threat of his family, the fact that his violation -- his report
2 to his probation officer is found on the same memory card with
3 him being shown as the author, the conduct for a registered sex
4 offender convicted of child pornography offenses to be naked,
5 not just exposing himself -- this would be a different matter
6 if Mr. Hill had simply been walking and chose to relieve
7 himself and could have technically violated the statute, but
8 Mr. Hill was wearing socks, sandals, and a hat, and that's all.

9 As shown on Government's Exhibit 7, the map with the
10 annotations, the photographs are taken some distance away, not
11 only from his residence, but where he was observed and reported
12 to the police naked and where he's arrested, that the duration
13 of the conduct, the nature of the conduct, photographing the
14 conduct for whatever reason all support the violation. We
15 would ask that he be found in violation.

16 **THE COURT:** All right.

17 Ms. Pryor?

18 **MS. PRYOR:** Thank you, Your Honor.

19 Your Honor, we, of course, would ask that he does not
20 be found in violation, Your Honor. As you've had the
21 opportunity to hear, Your Honor, the statute does indeed state
22 that every person who intentionally makes an obscene display or
23 exposure of his person shall be found guilty of a Class 1
24 misdemeanor.

25 Your Honor, I believe that we presented evidence here

1 today that would discredit the intent of the party, or the
2 intent of Mr. Hill. One of the elements that we are faced here
3 with is the intent element here. Your Honor, I believe that
4 the Government, one, has not provided the intent and, two, that
5 this Court has the opportunity to determine the facts that were
6 presented today to determine whether the intention of the party
7 was to make an obscene display or expose himself -- exposure of
8 himself.

9 Your Honor, you had the opportunity to hear from his
10 mother, who stated that at the time of this incident that there
11 has been evidence that there was some carbon monoxide that had
12 been displayed in their home, and based on that, Your Honor,
13 she went further to state that in her research, Your Honor,
14 when it comes to carbon monoxide, that based on that research,
15 that it does causes some level of delusion, some level of --
16 they even talked about -- she even discussed possibly that they
17 were beginning to have some headaches, that there were some
18 things that --

19 **THE COURT:** How do I rely on that in this hearing?
20 That's hearsay, and it's --

21 **MS. PRYOR:** It is hearsay.

22 **THE COURT:** I mean, it's not -- it's scientific
23 evidence, and there's no indication she's qualified to -- I
24 don't even know what her source was, whether it was Wikipedia
25 or what have you. So I am concerned about whether there's

1 enough scientific foundation for any conclusions about the
2 effect of carbon monoxide.

3 **MS. PRYOR:** Your Honor, we do understand that, Your
4 Honor, but the factual part of what she did state was the
5 things that affected her, Your Honor, and the things that she
6 did, who has been his caretaker -- the things she saw affect
7 him.

8 So, Your Honor, we would state that there was some
9 level of affect that was going on that can be determined just
10 to Mr. Hill presently, Your Honor, that would show some level,
11 and then to actually have the evidence that there was some
12 carbon monoxide and to begin to start the process of fixing it.

13 So, Your Honor, we would state that Mr. Hill, based
14 even on this -- based on this statute, that the intent factor
15 has not been met here today, Your Honor, and that he should not
16 be found in violation of his release conditions, Your Honor.

17 **THE COURT:** Okay. I am going to find that the
18 preponderance of the evidence demonstrates that Mr. Hill did
19 violate the condition of release by violating the Virginia Code
20 18.2-387. As the officer testified, it's actually the local
21 version, but it's apparently the same statute, and that's what
22 he's charged with in that he did intentionally expose himself
23 and make an intentional either obscene display and actually
24 exposure -- intentional exposure of his person. The
25 photographs are evidence of that.

1 He's also seen, by the officer's independent
2 testimony, to have been naked at the time and was running
3 around the neighborhood. So I credit the testimony of Sergeant
4 Jones and find him to be credible and that about September 21,
5 2018, that the Defendant was naked and running around
6 Martinsville, Virginia, taking pictures, which are indicated in
7 the Government's exhibits.

8 As to the testimony about intent -- or the argument
9 about intent, the evidence on a preponderance basis
10 demonstrates that Mr. Hill intended to do this. The story
11 about him being forced to do this by another individual finds
12 no support in the record. It's also inconsistent with some of
13 the information that's testified to by Sergeant Jones, who -- I
14 went back and was just checking his testimony, who did say that
15 the other individual, the male, asked him to -- or demanded he
16 take pictures. There's no testimony by anybody that there was
17 any kind of threat like that made, and the camera that
18 allegedly was given to Mr. Hill to take these photos, it
19 strikes me as virtually impossible that it would contain a copy
20 of the Defendant's own court records. So that's inconsistent
21 with that story as well.

22 So I'm going to find the preponderance of the
23 evidence demonstrates the Defendant violated Virginia law by
24 indecently exposing himself at the time alleged. So I'm going
25 to find as well that the violation was willful and without

1 lawful excuse.

2 He originally was convicted of a Class C felony.
3 He's a Criminal History Category I. This is a Class C
4 violation. The guidelines provide a 3- to 9-month advisory
5 imprisonment range. The most that can be imposed on him is 24
6 months.

7 As to supervised release, the original term of
8 supervised release available under the statute is, I believe, 5
9 years to life. He had had 10 years of supervised release
10 imposed by Judge Osteen, but the term that's available could be
11 5 years to life under the statute.

12 I will say it would be my intention to work off the
13 10 years and work -- and consider nothing more than the 10
14 years that Judge Osteen -- that's the maximum that I would
15 consider for supervision. Does that make that clear?

16 **MS. PRYOR:** Thank you, Your Honor.

17 **THE COURT:** That would be my intention, but I would
18 be glad to hear from you all as to that.

19 So do you agree or disagree that those are the proper
20 guidelines?

21 **MS. PRYOR:** That was the proper guidelines, Your
22 Honor.

23 **THE COURT:** Mr. Ramaswamy?

24 **MR. RAMASWAMY:** Yes, Your Honor.

25 **THE COURT:** So I've got about 10 minutes, and we can

1 continue this, if we need to, in the morning or on another
2 date. I would be happy to hear from you as to an appropriate
3 disposition in this case.

4 **MS. PRYOR:** Thank you so much, Your Honor.

5 Your Honor, today we are asking Your Honor -- I would
6 note, and I think you heard on testimony as well, that Mr. Hill
7 was on a federal detainer. I believe it began on December --
8 we tried to come to a date about, but I believe it was around
9 December 21 of 2018, and he was held into custody until May 14
10 of '19. So, Your Honor, that's give or take about 6 months
11 already.

12 This violation, as you note from the guidelines, Your
13 Honor, is a -- falls within that period of time, Your Honor. I
14 believe 6 months is, I believe, in the revocation that they
15 were asking for. It was around the middle, which would put us
16 right at that 6-month period.

17 Your Honor, we would ask that you would give him
18 credit for time served for that particular time, to continue
19 him on supervised probation that you've -- I mean, I'm sorry,
20 supervised release, Your Honor, pending that, but, Your Honor,
21 I do believe that he has served and he was -- as we can recall,
22 he was on that detainer, Your Honor. He could not leave, of
23 course, or if he even -- with the bond. So we can conclude
24 that he definitely was on a federal detainer at that time. He
25 did get released on conditions from the Virginia -- from

1 Virginia, and so that would also conclude that he did have that
2 time and it was through the Federal Government.

3 **THE COURT:** Will the Bureau of Prisons give him
4 credit for the time that he was sent to Butner as time-served
5 credit or not?

6 **MS. PRYOR:** I'm not sure, Your Honor. I actually
7 called the Bureau of Prisons before so I could know that
8 answer. That was actually my question as well. Your Honor,
9 I'm not sure how that process works, and I was waiting on
10 someone to call me back from the Bureau of Prisons. And I
11 believe the attorney was supposed to call me back in order to
12 conclude that or give us an estimation of whether the Bureau
13 does consider time when you're determining competency, whether
14 that time is conclusive or does it even give them credit for
15 that when it comes to a sentencing term.

16 So, Your Honor, I don't have that answer. I would
17 like to, of course, get that answer, Your Honor, because as I'm
18 standing here asking for you to use it as credit, I can't
19 factually or be able to --

20 **THE COURT:** I understand.

21 **MS. PRYOR:** Okay. Thank you.

22 **THE COURT:** Anything further?

23 **MS. PRYOR:** So, Your Honor, I would ask -- of course,
24 that is the sentence that they have requested, but, Your Honor,
25 we would ask the Court for the bottom of the guidelines, Your

1 Honor.

2 I would remind the Court that he does have autism. I
3 remind the Court that he has OCD. I remind the Court that he
4 does have some debilitating health issues that he does have
5 that deals with his diabetes.

6 Your Honor, Mr. Hill in custody or in prison is very
7 destruction to him as a person, who does see things and
8 perceive things, of course, differently than we do as being on
9 the autism spectrum.

10 **THE COURT:** Is he still in custody now?

11 **MS. PRYOR:** He is not in custody now.

12 **THE COURT:** He was released May 14?

13 **MS. PRYOR:** He was, Your Honor.

14 **THE COURT:** From Butner?

15 **MS. PRYOR:** No, he was released from court, Your
16 Honor. He actually got out of Butner I believe it was around
17 February, and then he was -- then he went back to court, and
18 then he was released on conditions.

19 **THE COURT:** So he was released from Butner in
20 February?

21 **MS. PRYOR:** He was released from Butner in February.
22 They sent him to another custody situation, I guess, just in
23 the process, and some things -- and this is why I bring this
24 up, too. Because of his autism, he has some issues in the jail
25 with one of the wards, and they were supposed to send him back

1 directly after, but they put him in some level of solitary in
2 another jail.

3 All in all, he didn't get back, of course, until
4 May 14, and so that's why I stand here and ask for the credit,
5 because I would hope that the Court would -- and I say that
6 because we do understand that you've made that he has violated
7 this, and based on that, there is a punishment that must go
8 with it; but, Your Honor, I would state because of his
9 condition and because of OCD and because of autism, the courts
10 and BOP, having to learn to deal with someone with autism, I
11 don't believe that they are there yet, which makes it difficult
12 on the person. And because of -- you know, because of that,
13 Your Honor, I would ask that if you do find that you want to
14 sentence him, there are some other alternative ways of
15 sentencing him. He's been successful, as you heard from his
16 probation officer, being at home, home detention where he
17 cannot leave --

18 **THE COURT:** Before you go on further, let me just see
19 what the Government's position is, but I don't know if they're
20 opposing. He's essentially been incarcerated now for close to
21 6 months, in some form or another.

22 Are you opposing some kind of sentence that would be
23 in effect a time-served sentence?

24 **MR. RAMASWAMY:** Yes, Your Honor.

25 **THE COURT:** Okay.

1 **MS. PRYOR:** And so, Your Honor, there are some other
2 alternative ways of doing prison -- or doing punishment. As
3 you heard, Mr. Hill has been successful with being at home. He
4 can be placed on home detention. He can have an electronic
5 monitor. He can be placed on home detention for up to 6
6 months, even up to a year, if Your Honor so requires.

7 Him being at home, he has the opportunity to -- I
8 mean, he won't have the opportunity to leave. His family does
9 travel, and they do enjoy traveling. He won't have the
10 opportunity to travel, some of the things that he takes -- some
11 of the things that he enjoys doing.

12 Your Honor can also make it any other conditions
13 that, of course, Your Honor would provide, but, Your Honor, I
14 would ask because of what he -- because he's been successful
15 through his probation of showing that he is consistent about
16 sending his report, he's consistent about contacting them, he's
17 consistent about making sure that they know where he is at all
18 times, he's consistent about being respectful to the officer,
19 so I would state that having him at home with his family and
20 even if -- like I say, even if it's more closed in where he
21 cannot leave the home I think would still satisfy the
22 punishment that is here.

23 As you heard, he does -- I believe they stated that
24 he walks that trail even during the daytime. So he does enjoy
25 going outdoors. So having the -- where the Court would tell

1 him he could not go outdoors anymore is a punishment as well.

2 So, Your Honor, I do believe that you can satisfy the
3 factors here of the condition of him being at home on
4 detention. Whether 6 months to a year, you can satisfy the
5 condition of whether it would be a deterrence because, as you
6 note, Mr. Hill does like to travel with his family. So that is
7 the deterrence, that he won't be able to travel.

8 And being with his autism, his mindset and what he
9 thinks is differently than what it is for us or any other
10 prisoner that we could sentence to custody. His punishment is
11 just the violation, being sentenced to -- him being violated.
12 That's the difference of the sentence that he gets here today.

13 So, Your Honor, I would just ask that you would
14 consider those other alternative ways of punishment today and
15 that you would sentence him within the guidelines but through
16 alternatives ways of doing it.

17 **THE COURT:** All right.

18 **MS. PRYOR:** Thank you.

19 **THE COURT:** All right. Mr. Ramaswamy?

20 **MR. RAMASWAMY:** Your Honor, I don't wish to
21 prolong -- I don't wish to speak so long that the Court is
22 going to miss any deadlines.

23 **THE COURT:** Well, how long do you want to speak?
24 What is it the Government's arguing for?

25 **MR. RAMASWAMY:** I would first say that the Defendant

1 is a registered sex offender who spent at least three hours out
2 that night naked, photographing himself for some unknown
3 reason. And the Court has also heard testimony that there were
4 other reports of a naked man in a stocking cap, and he's shown
5 wearing a stocking cap prior to this, and that there were no
6 such reports after Mr. Hill's arrest.

7 This is not Mr. Hill's first violation. He was not
8 revoked last time, and I'm not saying that would have been
9 appropriate; but on these facts, it is completely appropriate.
10 The probation officer is recommending the high end here. Under
11 the Chapter 7 limits and not going into Protect Act, I would
12 concur with that. I would ask the Court to sentence him to the
13 9 months. I don't know if whatever time he spent in the
14 evaluation counts. I can't say.

15 **THE COURT:** Should I take that into account? I mean,
16 he was essentially locked up for 6 months.

17 **MR. RAMASWAMY:** Yes. I'm not saying it's not
18 appropriate that the Court take it into account, but I don't
19 think simply telling Mr. Hill to stay at home and make him wear
20 a monitor -- he's proven he can't self-regulate. He's
21 consistently denied the offense conduct of the original
22 offense, of the other violation. It's always some nefarious,
23 outside force that makes Mr. Hill do things, now from someone
24 handing him a camera until, here, carbon monoxide. Mr. Hill
25 has consistently shown he doesn't take responsibility for what

1 he does, and he's inappropriate to trust in the form of
2 self-regulation.

3 **THE COURT:** What role does his autism play in all of
4 this?

5 **MR. RAMASWAMY:** I think we're all familiar with
6 what's in the reports as to his mental state. More than the
7 autism, there is the diagnosis of delusional disorder. That is
8 in his prior records. I think the Court has dealt with persons
9 with autism before, and that's a larger topic to get into than
10 here. I think we've all been considerate. The Government, the
11 Court, the Court in the original case, counsel has been
12 considerate of the Defendant's mental condition, but on this
13 conduct, there is an overriding concern of public safety.

14 Even at the high end of what's recommended, it's
15 likely lower than someone without Mr. Hill's condition would
16 have gotten on these facts.

17 **THE COURT:** So what's the punishment for this in
18 Virginia? He's been convicted. What has he been sentenced to?
19 Do you know?

20 **MR. RAMASWAMY:** I don't know what the original
21 sentence was.

22 **THE COURT:** Ms. Pryor probably knows. What was his
23 sentence?

24 **MS. PRYOR:** Your Honor, he was given credit for
25 time -- he was given credit for time served. I believe it was

1 a 60-day sentence, Your Honor, because it's less than a year.

2 **THE COURT:** Okay. Was that in addition to the 6
3 months he was in federal custody?

4 **MS. PRYOR:** No, that was not, Your Honor.

5 **THE COURT:** All right.

6 **MR. RAMASWAMY:** Thank you, Your Honor.

7 **THE COURT:** Mr. Hill, is there anything you would
8 like to say on your own behalf before I make a decision as to a
9 disposition of your case? Let me say to you that you have no
10 obligation to speak. You enjoy the right to remain silent
11 under our Constitution. If you wish to remain silent, I will
12 not hold that against you. On the other hand, if you would
13 like to say anything before I make a decision, this would be
14 the right time.

15 **THE DEFENDANT:** Respectfully, yes, I do, Your Honor.
16 I would like to bring up that I have been involved in a 2255
17 motion since 2017. If I have to admit guilt to something I did
18 not do, I would be committing over five acts of perjury. So am
19 I going to be required by the probation office to commits acts
20 of perjury, because I kept saying under penalty of perjury, I'm
21 innocent? I filed something that the guilty plea cannot be
22 valid if I withdrew it. The 2255 is still pending before
23 this Court, and to force me to admit guilt to something I did
24 not do is detrimental and puts me at risk of multiple perjury
25 charges.

1 And the carbon monoxide -- I have a lot of proof,
2 Your Honor. I've got sinus tachycardia. I've got abnormal red
3 blood cell count, abnormal white blood cell count. All these
4 are in medical records, and the National Institute of Health --
5 my mom has documents from the National Institute of Health and
6 government agencies saying that carbon monoxide can be linked
7 to all kinds of problems that I had had last year, like
8 psychosis and hallucinations. And I have credible government
9 documents that all backs up everything I'm saying. That's why
10 I sent a letter to Martinsville Police Department on the
11 conduct, apologizing and saying that, look, carbon monoxide
12 caused this.

13 There might be a guy in a hoodie. There was a
14 threatening greeting card that my mother did receive that said
15 they will do a controlled action against my mother if she
16 doesn't stop putting stuff on YouTube. If she doesn't stop
17 what she's doing, they're going to commit a controlled action
18 against her. That was July 2018.

19 Your Honor, there's a lot more evidence that couldn't
20 be presented at this hearing. We needed more time. That's why
21 I filed the notice of interlocutory appeal. We would have had
22 witnesses to come and testify. We need more time, and I need
23 to go through the state appeal because I am actually innocent.
24 According to my lawyer, Scott Albrecht, the public defender of
25 Martinsville, he said, you are innocent because you did not

1 engage in obscene-type conduct. And that means, you know, I
2 never masturbated. I never did anything sexual. I was just
3 naked. So he said that I am legally innocent under the
4 Commonwealth of Virginia. That's why I'm appealing it so that
5 I could be found actually innocent, and I plan to file a motion
6 for the writ of actual innocence in Virginia. Even though it's
7 normally sent to -- you know, felonies, I'm going to try to
8 push for it, and I'm going to ask the Attorney General to have
9 me found actually innocent because I am actually innocent.

10 **THE COURT:** All right, sir.

11 Can I speak to the probation officers briefly,
12 please?

13 (Off-the-record discussion.)

14 **THE COURT:** All right. I've already found by the
15 preponderance of the evidence that the Defendant violated the
16 valid conditions of his supervised release, and the violation
17 was willful and without lawful excuse. I'm going to order that
18 the supervised release term be revoked.

19 I've considered the factors under 3553(a) that apply
20 under 3583(e) in this case, and one of the factors is the
21 nature and circumstances of the offense. Here, the Defendant
22 was exposing himself throughout the city of Martinsville, and
23 the photos are part of the record in this case, which indicate
24 how he exposed himself, which is proof of the exposure, which I
25 found to be a violation of the indecent exposure law in

1 Virginia.

2 Another factor is the history and characteristics of
3 the Defendant. I've considered the multiple factors here
4 indicated, including the Defendant's autism and his OCD, the
5 diabetes, his age.

6 And I'm concerned about deterrence because this is
7 the second hearing we've had on revocation. The exposure in
8 this case was intentional and purposeful. There's really no
9 way to explain otherwise. He's running around naked, taking
10 pictures of himself and posing for the pictures of his
11 genitals, and he's doing it in the open in the public. How he
12 would have thought he'd never have been caught by this is kind
13 of hard to fathom, but maybe because it's 3:00 in the morning.

14 I'm trying to take into account and give heavy
15 deference to the fact that I know he has autism. On the other
16 hand, he's extremely articulate in his various filings with the
17 court and his allocution. Mr. Hill is very capable of
18 explaining things. It may not always be rational, but he's
19 capable of explaining things. So I am trying to distance all
20 of that.

21 In this case, I'm taking into account the fact that
22 he's been in federal custody since December 21st.

23 **MS. PRYOR:** Yes, Your Honor.

24 **THE COURT:** I'm going to impose the 9 months. That's
25 within the guideline range that the probation office has

1 recommended. That is the high end of the guidelines.

2 As a practical matter, that's, I think, 3 months from
3 now, roughly 3 months from now, because I am anticipating that
4 he should be getting credit for all of his time since
5 December 21st because he's been in federal custody. Whether
6 he's been at Butner being evaluated or wherever he was, he was
7 in still in federal custody.

8 So my sentence of 9 months is under the understanding
9 that he's getting credit for his time since December 21. It's
10 also acknowledging that he's been in state custody before that
11 and was punished in state custody, but the violations of
12 supervised release, generally speaking, run consecutive to
13 state punishment. And in this case, I think that's an
14 appropriate punishment.

15 The willfulness of this violation is what still
16 strikes me. Even though I know he's autistic and he has
17 issues, it's hard to deny the willful, intentional conduct
18 here.

19 So I'm going to order that Mr. Hill be committed to
20 the custody of the United States Bureau of Prisons for 9
21 months. As I've said, that's with the intention that that
22 would essentially be running from December 21, 2018, to the
23 present because he would be getting federal credit for that
24 time.

25 I am going to reimpose 9 years of supervision in this

1 case under the same terms and conditions already disclosed in
2 this case.

3 All right?

4 **MS. PRYOR:** Your Honor, I do have a question. If the
5 attorney or -- once they do return my call, if they do not give
6 him credit for that 5 months that he was in custody, is that
7 still Your Honor's position?

8 **THE COURT:** No. My belief is he should get that
9 credit. So my sentence is based on the understanding that he
10 will be getting credit since then. What I guess I would tell
11 you is it will take me a few days to get the judgment prepared.

12 **MS. PRYOR:** Yes, Your Honor.

13 **THE COURT:** I would encourage you to check with the
14 Bureau of Prisons and be sure about that. If that's a problem,
15 let me know, and under Rule 35, I think it is, I will regard
16 that to be a mistake in fact.

17 **MS. PRYOR:** That's correct.

18 **THE COURT:** Unless there is an objection by the
19 parties, I would consider making that change to reflect that.

20 **MS. PRYOR:** Thank you, sir.

21 **THE COURT:** Anything else? Have you had an
22 opportunity speak -- oh, is he in custody now?

23 **MS. PRYOR:** He is not in custody, Your Honor.

24 **THE COURT:** He's been out of custody at the present
25 time. Is this a case where he can self-report, and is there

1 any objection?

2 **MS. PRYOR:** Your Honor, that would be my request,
3 Your Honor. His family did come all the way from Martinsville,
4 Virginia, and the probation officer and him have a great, great
5 relationship.

6 **THE COURT:** Let me ask: Is there any objection to
7 self-reporting?

8 **MR. RAMASWAMY:** For the Government, I do oppose it,
9 Your Honor. I understand Probation's position, if I'm not
10 mistaken, is he be allowed to self-report.

11 **THE COURT:** What is the Probation's view?

12 **THE PROBATION OFFICER:** Your Honor, he's followed
13 instructions thus far. I don't see why he wouldn't now.

14 **THE COURT:** Is he on location monitoring?

15 **THE PROBATION OFFICER:** No, sir, not at the present
16 time.

17 **MS. PRYOR:** Your Honor, we have no objection to him
18 being on location monitoring, but I would ask that he does
19 self-report. He's never had an issue with Probation.

20 **THE COURT:** I'm -- given the myriad of factors in
21 this case -- he's still living with his mother; right?

22 **MS. PRYOR:** He does.

23 **THE COURT:** I'm going to find he's not likely to flee
24 or pose a danger to the community under circumstances where
25 he's on GPS monitoring. So I'm going to add a condition to his

1 supervision that he be given GPS location monitoring, and he
2 can self-report then.

3 Do I have a date, Ms. Engle?

4 **MS. PRYOR:** Your Honor, this might be a stretch to
5 ask, but I believe his next court date is December 3. I was
6 wondering, Your Honor -- it's really important to him that he
7 be able to attend that hearing -- if it could be a date after
8 December 3 to report.

9 **THE COURT:** Any objection?

10 **MR. RAMASWAMY:** Your Honor --

11 **THE COURT:** It's going to take Bureau of Prisons 6 or
12 8 weeks at a minimum.

13 **MS. PRYOR:** It does, Your Honor.

14 **THE COURT:** So we'll be into November.

15 **MR. RAMASWAMY:** Given the conduct, the Government
16 does not consent to that.

17 **THE COURT:** Okay.

18 **THE PROBATION OFFICER:** Your Honor, just as a matter
19 of logistics, if he were to be released to location monitoring
20 technology, that technology should be installed immediately.
21 We would request a -- that the Court agree to a short delay of
22 the installation of that, just given the logistics of him
23 traveling back to the Western District of Virginia and the
24 Western District of Virginia installing their equipment.

25 **THE COURT:** How many days would you like before?

1 **THE PROBATION OFFICER:** Your Honor, I think we can
2 take care of that Monday.

3 **THE COURT:** So you can add that to the condition,
4 that within 7 days that it be placed at the discretion of
5 Probation. How about that? Does that work?

6 **THE PROBATION OFFICER:** Thank you, Your Honor.

7 **THE COURT:** All right. So as long as he's on
8 location monitoring, I'll set it for Friday, December 6, noon,
9 report to the U.S. Marshal in Greensboro, if he hasn't received
10 a designation.

11 **THE PROBATION OFFICER:** I apologize, Your Honor.
12 Just for further clarification, is that a home incarceration or
13 a curfew? He would need to be placed under one of the three
14 programs as well.

15 **THE COURT:** Is there a recommendation?

16 **THE CLERK:** Is it a revision? An order of release or
17 a condition of his supervision?

18 **THE COURT:** Well, I don't know -- we'll figure out
19 that in a minute.

20 **THE PROBATION OFFICER:** I would simply recommend at
21 least a curfew. With GPS, you can order a curfew that's
22 restrictive enough to monitor his whereabouts throughout the
23 day.

24 **THE COURT:** Okay. That's a -- the case manager
25 raised a good question. This is actually not a condition of

1 supervision. I think this is going to be a release condition
2 so he can remain on his own. So the magistrate judge's order
3 on release will be modified to add a condition for location
4 monitoring. You think home -- a curfew is sufficient?

5 **THE PROBATION OFFICER:** Your Honor, I believe a
6 curfew that's at the discretion of the probation officer would
7 be --

8 **THE COURT:** I will add a curfew at the discretion of
9 Probation. Probation is doing an excellent job of working with
10 Mr. Hill. I just want to make sure that he's in at night.

11 **MS. PRYOR:** Yes, Your Honor.

12 **THE COURT:** All right. I don't want him running
13 around naked anymore anywhere.

14 **MS. PRYOR:** Yes, Your Honor.

15 **THE COURT:** Does that address all those issues?

16 **MS. PRYOR:** It does, Your Honor.

17 **THE COURT:** Ms. Pryor, let me know right away if you
18 hear otherwise.

19 **MS. PRYOR:** I will, yes, sir.

20 **THE COURT:** Because the judgment will be issued here
21 shortly.

22 Have you had an opportunity to speak with Mr. Hill
23 about any appellate rights he may have?

24 **MS. PRYOR:** I have, Your Honor. He would like to
25 file his notice of appeal.

1 **THE COURT:** For the record, just so that I've advised
2 him, make sure he's aware, if he does want to file a notice of
3 appeal, he must do so in writing within 14 days of the entry of
4 the Court's judgment. If he cannot afford the cost of his
5 appeal, he can ask the Fourth Circuit to waive the cost.

6 If you want to file the notice of appeal -- I haven't
7 entered a written judgment yet, but it only has to be entered
8 within 14 days of the written judgment.

9 **MS. PRYOR:** I understand. Thank you, Your Honor.

10 **THE COURT:** Ms. Hill, please keep an eye on your son.
11 I hope there won't be any problems between now and whenever he
12 gets a reporting date so that we don't have any further issues.
13 Okay.

14 **MS. PRYOR:** Thank you so much, Your Honor.

15 **THE COURT:** Good luck. I know it's a challenge.
16 All right. Anything further?

17 **MR. RAMASWAMY:** No, Your Honor.

18 **THE COURT:** All right. Please adjourn Court.

19 (END OF PROCEEDINGS AT 5:35 P.M.)

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1 UNITED STATES DISTRICT COURT

2 MIDDLE DISTRICT OF NORTH CAROLINA

3 CERTIFICATE OF REPORTER

4

5

6 I, Briana L. Bell, Official Court Reporter, certify
7 that the foregoing transcript is a true and correct transcript
8 of the proceedings in the above-entitled matter.

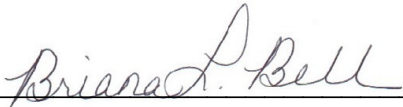
9

10 Dated this 4th day of November 2019.

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Briana L. Bell, RPR
Official Court Reporter

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EXHIBIT 3

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



PATIENT NO: 7806761243 SOVAH HEALTH BILLING DATE PAGE 1 02781
 MED REC NO: 370912 320 HOSPITAL DR 07/14/22
 GUARANTOR NO:
 PATIENT: MARTINSVILLE VA 241121900 ADMITTED DISCHARGED
 HILL BRIAN D 09/21/18 09/21/18

PAY TO ADDRESS: SOVAH HEALTH
 PO BOX 742401
 ATLANTA
 GA 303742401

BILL TO:
 HILL BRIAN D EMERGENCY FC=09
 310 FOREST ST INFORMATION BILL, SPECIFIED PERIOD OF TIME
 APT 2 FROM 09/21/18 THRU 09/21/18
 MARTINSVILLE VA 24112

DATE OF SERVICE	BATCH REF	F DEPT	S PROC	NDC/CPT-4/ HCPCS	QTY	SERVICE DESCRIPTION	CHARGES	
258-IV SOLUTIONS								
092118	21B597	0715	170363	J7030	1	IV NAACL .9% 1000ML	157.00	
							SUBTOTAL:	157.00
260-IV THERAPY								
092118	23B781	0780	800397	96360	1	IV HYDRATION 1ST HR	585.00	
							SUBTOTAL:	585.00
270-MED SURG SUPPLY								
092118	22B696	0718	232334		1	SENSOR FETAL O2	130.00	
092118	22B696	0718	230760		1	CUFF B/P DISP	50.00	
092118	22B696	0718	232781		1	OXISENSOR DISP	198.00	
092118	22B696	0718	232295		1	TUBING HEPLOCK	32.00	
092118	22B696	0718	230633		1	CATH IV	66.00	
092118	22B696	0718	232137		1	TUBING SECONDARY	21.00	
							SUBTOTAL:	497.00
272-MED SURG SUPPLY/STERILE								
092118	22B696	0718	232646		1	KIT IV LATEX FREE	56.00	
							SUBTOTAL:	56.00
450-EMERG ROOM								
092118	22B696	0780	800388	9928525	1	ER VISIT LEVEL V	2555.00	
							SUBTOTAL:	2555.00

THANK YOU FOR CHOOSING SOVAH
 MARTINSVILLE FOR YOUR HEALTHCARE NEEDS

EXHIBIT PAGE 89 OF 337

PATIENT NO:	7806761243	SOVAH HEALTH	BILLING DATE	PAGE	2	02781
MED REC NO:	370912	320 HOSPITAL DR	07/14/22			
GUARANTOR NO:						
PATIENT:		MARTINSVILLE	VA 241121900	ADMITTED		DISCHARGED
HILL BRIAN D				09/21/18		09/21/18

DATE OF SERVICE	BATCH REF	F DEPT S	PROC	NDC/CPT-4/ HCPCS	QTY	SERVICE DESCRIPTION	CHARGES
636-DRUGS/DETAIL CODE							
092118	21B597	0712	123638	90714	1	TET\DIPHTOXOID PF J	137.00
SUBTOTAL:							137.00
771-VACCINE ADMIN							
092118	23B781	0780	800230	90471	1	IMMUNIZATION ADMIN	120.00
SUBTOTAL:							120.00
TOTAL ANCILLARY CHARGES							4107.00
TOTAL CHARGES							4107.00
PAYMENTS							.00
ADJUSTMENTS							.00
BALANCE							4107.00

THANK YOU FOR CHOOSING SOVAH
MARTINSVILLE FOR YOUR HEALTHCARE NEEDS

PATIENT NO:	7806761243	SOVAH HEALTH	BILLING DATE	PAGE	3	02781
MED REC NO:	370912	320 HOSPITAL DR	07/14/22			
GUARANTOR NO:						
PATIENT:		MARTINSVILLE	VA 241121900	ADMITTED		DISCHARGED
HILL BRIAN D				09/21/18		09/21/18

DEPARTMENTAL CHARGE SUMMARY

DEPT	DESCRIPTION	AMOUNT
0712	PHARMACY	137.00
0715	IV SOLUTIONS - ADMIN	157.00
0718	MEDICAL SERVICES	553.00
0780	EMERGENCY SERVICES	3,260.00

REVENUE CHARGE SUMMARY

REV CD	DESCRIPTION	BILLABLE	NON-BILLABLE	TOTAL
0258	IV SOLUTIONS	157.00	.00	157.00
0260	IV THERAPY	585.00	.00	585.00
0270	MED SURG SUPPLY	497.00	.00	497.00
0272	MED SURG SUPPLY/STERILE	56.00	.00	56.00
0450	EMERG ROOM	2,555.00	.00	2,555.00
0636	DRUGS/DETAIL CODE	137.00	.00	137.00
0771	VACCINE ADMIN	120.00	.00	120.00

TOTAL CHARGES: 4,107.00

TOTAL PAYMENTS: .00

TOTAL ADJUST: .00

SOVAH HEALTH 320 HOSPITAL DR MARTINSVILLE VA 241121900 8042673700		SOVAH HEALTH PO BOX 742401 ATLANTA GA30374		3a PAT. CNTL # 7806761243 b. MED. REC. # 000000370912		4 TYPE OF BILL 0131	
8 PATIENT NAME a HILL, BRIAN D.		9 PATIENT ADDRESS a 310 FOREST ST, APT 2 b MARTINSVILLE		5 FED. TAX NO. 20-2028539		6 STATEMENT COVERS PERIOD FROM 092118 THROUGH 092118	
10 BIRTHDATE 05261990		11 SEX M		12 DATE 1 1		13 ADMISSION 13 HR 14 TYPE 15 SRC 16 DHR 21	
17 STAT 21		18 19 20 21		22 23 24 25 26 27 28		29 ACDT 30 STATE	
31 OCCURRENCE CODE 11		32 OCCURRENCE DATE 092118		33 OCCURRENCE CODE A1		34 OCCURRENCE DATE 052690	
35 OCCURRENCE CODE		36 OCCURRENCE DATE		37 OCCURRENCE DATE		38 OCCURRENCE DATE	
39 CODE A3		40 VALUE CODES AMOUNT 410700		41 CODE		42 VALUE CODES AMOUNT	
43 DESCRIPTION		44 HCPCS / RATE / HIPPS CODE		45 SERV. DATE		46 SERV. UNITS	
47 TOTAL CHARGES		48 NON-COVERED CHARGES		49			
0450 ER VISIT LEVEL V		99285 25		092118		1 385000	
0636 N449281021588ML1		90714		092118		1 13700	
0771 IMMUNIZATION ADMIN		90471		092118		1 12000	
0001 PAGE 001 OF 001		CREATION DATE 092618		TOTALS 410700			
50 PAYER NAME VIRGINIA PREM ELITE PLU		51 HEALTH PLAN ID		52 REL INFO Y		53 ASG BEN. Y	
54 PRIOR PAYMENTS 000		55 EST. AMOUNT DUE		56 NPI 1154419737		57 OTHER PRV ID	
58 INSURED'S NAME HILL, BRIAN D.		59 P.REL 18		60 INSURED'S UNIQUE ID 690024628015		61 GROUP NAME	
62 INSURANCE GROUP NO.		63 TREATMENT AUTHORIZATION CODES		64 DOCUMENT CONTROL NUMBER		65 EMPLOYER NAME	
66 DX S80211A S20319A F840 E119 F429 Z888		67		68			
69 ADMIT DX		70 PATIENT REASON DX M25562 S80211A		71 PPS CODE		72 ECI	
73		74 PRINCIPAL PROCEDURE CODE DATE		75 OTHER PROCEDURE CODE DATE		76 ATTENDING NPI 154673895	
77 OPERATING NPI		78 OTHER NPI		79 OTHER NPI		QUAL	
80 REMARKS		81 CC a B3282N00000X		b B1W		c U	
82		83		84		85	

EXHIBIT 4

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
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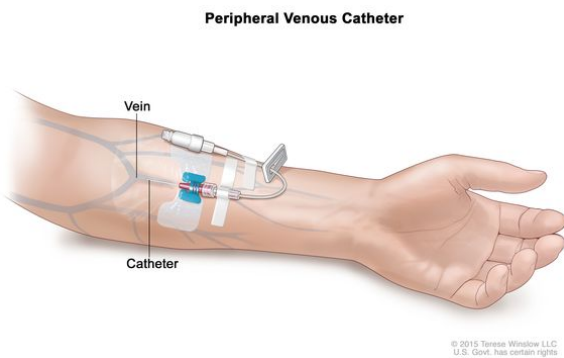




peripheral venous catheter

(peh-RIH-feh-rul VEE-nus KA-theh-ter)

A device used to draw blood and give treatments, including intravenous fluids, drugs, or blood transfusions. A thin, flexible tube is inserted into a vein, usually in the back of the hand, the lower part of the arm, or the foot. A needle is inserted into a port to draw blood or give fluids.



Peripheral venous catheter. A peripheral venous catheter is a thin, flexible tube that is inserted into a vein. It is usually inserted into the lower part of the arm or the back of the hand. It is used to give intravenous fluids, blood transfusions, chemotherapy, and other drugs.

Search NCI's Dictionary of Cancer Terms

Starts with Contains

Enter keywords or phrases

Search

EXHIBIT 5

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM





delirium

(deh-LEER-ee-um)

A mental state in which a person is confused and has reduced awareness of their surroundings. The person may also be anxious, agitated, or have less energy than usual and be tired or depressed. Delirium can also cause hallucinations and changes in attention span, mood or behavior, judgement, muscle control, and sleeping patterns. The symptoms of delirium usually occur suddenly, last a short time, and may come and go. It may be caused by infection, dehydration, abnormal levels of some electrolytes, organ failure, medicines, or serious illness, such as advanced cancer.

More Information

[Delirium](#)

Search NCI's Dictionary of Cancer Terms

Starts with Contains

EXHIBIT 6

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



3% Sodium Chloride Injection, USP

Rx only

DESCRIPTION:

3% Sodium Chloride Injection, USP is a sterile, nonpyrogenic, hypertonic solution for fluid and electrolyte replenishment in single dose containers for intravenous administration. The pH may have been adjusted with hydrochloric acid. It contains no antimicrobial agents. Composition, ionic concentration, osmolarity, and pH are shown in [Table 1](#).

Table 1.

	Size (mL)	Composition (g/L)	Ionic Concentration (mEq/L)		*Osmolarity (mOsmol/L) (calc)	pH
		Sodium Chloride, USP (NaCl)	Sodium	Chloride		
3% Sodium Chloride Injection, USP	500	30	513	513	1,027	5.0 (4.5 to 7.0)

*Normal physiological osmolarity range is approximately 280 to 310 mOsmol/L.

The flexible container is fabricated from a specially formulated non-plasticized, film containing polypropylene and thermoplastic elastomers (*freeflex*[®] bag). The amount of water that can permeate from the container into the overwrap is insufficient to affect the solution significantly. Solutions in contact with the flexible container can leach out certain of the container's chemical components in very small amounts within the expiration period. The suitability of the container material has been confirmed by tests in animals according to USP biological tests for plastic containers.

CLINICAL PHARMACOLOGY:

3% Sodium Chloride Injection has value as a source of water and electrolytes. It is capable of inducing diuresis depending on the clinical condition of the patient.

INDICATIONS AND USAGE:

3% Sodium Chloride Injection is indicated as a source of water and electrolytes.

CONTRAINDICATIONS:

None known.

WARNINGS:

Hypersensitivity/infusion reactions, including hypotension, pyrexia, tremor, chills, urticaria, rash, and pruritus may occur with 3% Sodium Chloride Injection.

Stop the infusion immediately if signs or symptoms of a hypersensitivity reaction develop, such as tachycardia, chest pain, dyspnea and flushing. Appropriate therapeutic countermeasures must be instituted as clinically indicated.

Depending on the volume and rate of infusion, the intravenous administration of 3% Sodium Chloride Injection can cause fluid and/or solute overloading resulting in dilution of serum electrolyte concentrations, overhydration/hypervolemia, congested states, pulmonary edema, or acid-base imbalance. The risk of dilutive states is inversely proportional to the electrolyte concentration of the injection. The risk of solute overload causing congested states with peripheral and pulmonary edema is directly proportional to the electrolyte concentrations of the injection.

Monitor changes in fluid balance, electrolyte concentrations, and acid base balance during prolonged parenteral therapy or whenever the condition of the patient or the rate of administration warrants such evaluation.

Administer 3% Sodium Chloride Injection with particular caution to patients with or at risk for hypernatremia, hyperchloremia, hypervolemia or with conditions that may cause sodium retention, fluid overload and edema; such as patients with primary hyperaldosteronism, or secondary hyperaldosteronism (for example, associated with hypertension, congestive heart failure, liver disease (including cirrhosis), renal disease (including renal artery stenosis, nephrosclerosis) or pre-eclampsia). Certain medications may increase risk of sodium and fluid retention (see [Drug Interactions](#)).

Administer 3% Sodium Chloride Injection with particular caution to patients with severe renal impairment. In such patients administration of Sodium Chloride Injection may result in sodium retention.

PRECAUTIONS:**General**

Do not connect flexible plastic containers in series in order to avoid air embolism due to possible residual air contained in the primary container. Such use could result in air embolism due to residual air being drawn from the primary container before administration of the fluid from the secondary container is completed.

Pressurizing intravenous solutions contained in flexible plastic containers to increase flow rates can result in air embolism if the residual air in the container is not fully evacuated prior to administration.

Use of a vented intravenous administration set with the vent in the open position could result in air embolism. Vented intravenous administration sets with the vent in the open position should not be used with flexible plastic containers.

3% Sodium Chloride Injection is hypertonic with an osmolarity of 1,027 mOsmol/L. Administration of hypertonic solutions may cause venous damage and thus should be administered through a large vein, for rapid dilution.

Do not mix or administer 3% Sodium Chloride Injection solution through the same administration set with whole blood or cellular blood components.

Rapid correction of hypo- and hypernatremia is potentially dangerous (risk of serious neurologic complications). Dosage, rate, and duration of administration should be determined by a physician experienced in intravenous fluid therapy.

Drug Interactions

Caution must be exercised in the administration of 3% Sodium Chloride Injection to patients treated with drugs that may increase the risk of sodium and fluid retention, such as corticosteroids.

Caution is advised in patients treated with lithium. Renal sodium and lithium clearance may be increased during the administration of 3% Sodium Chloride Injection. Administration of 3% Sodium Chloride Injection may, therefore, result in decreased lithium levels.

Pregnancy

There are no adequate and well controlled studies with 3% Sodium Chloride Injection in pregnant women and animal reproduction studies have not been conducted with this drug. Therefore, it is not known whether 3% Sodium Chloride Injection can cause fetal harm when administered to a pregnant woman. 3% Sodium Chloride Injection should be given during pregnancy only if the potential benefit justifies the potential risks to the fetus.

Nursing Mothers

It is not known whether this drug is excreted present in human milk. Because many drugs are excreted present in human milk, caution should be exercised when 3% Sodium Chloride Injection is administered to a nursing woman.

Pediatric Use

The use of 3% Sodium Chloride Injection in pediatric patients is based on clinical practice (see **DOSAGE AND ADMINISTRATION**).

Plasma electrolyte concentrations should be closely monitored in the pediatric population as this population may have impaired ability to regulate fluids and electrolytes.

Geriatric Use

Clinical studies of 3% Sodium Chloride Injection did not include sufficient numbers of subjects aged 65 and over to determine whether they respond differently from younger subjects. Other reported clinical experience has not identified differences in responses between the elderly and younger patients. In general, dose selection for an elderly patient should be cautious, usually starting at the low end of the dosing range, reflecting the greater frequency of decreased hepatic, renal, or cardiac function, and of concomitant disease or other drug therapy.

This drug is known to be substantially excreted by the kidney, and the risk of toxic reactions to this drug may be greater in patients with impaired renal function. Because elderly patients are more likely to have decreased renal function, care should be taken in dose selection, and it may be useful to monitor renal function.

ADVERSE REACTIONS:

Post-Marketing Adverse Reactions

The following adverse reactions have not been reported with 3% Sodium Chloride Injection but may occur:

- hyperchloremia
- hyperchloremic metabolic acidosis,
- hypersensitivity/infusion reactions, including hypotension, pyrexia, tremor, chills, urticaria, rash, and pruritus,
- Infusion site reactions, such as thrombosis, phlebitis, irritation, infusion site erythema, injection site streaking, burning sensation, infusion site urticaria.

If an adverse reaction does occur, discontinue the infusion, evaluate the patient, institute appropriate therapeutic countermeasures, and save the remainder of the fluid for examination if deemed necessary.

OVERDOSAGE:

Excessive administration of 3% Sodium Chloride Injection may lead to hypernatremia (which can lead to CNS manifestations, including seizures, coma, cerebral edema and death) and sodium overload (which can lead to central and/or peripheral edema).

When assessing an overdose, any additives in the solution must also be considered. The effects of an overdose may require immediate medical attention and treatment.

DOSAGE AND ADMINISTRATION:

As directed by a physician. Dosage, rate, and duration of administration are to be individualized and depend upon the indication for use, the patient's age, weight, clinical condition, concomitant treatment, and on the patient's clinical and laboratory response to treatment.

Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration whenever solution and container permit. Use of a final filter is recommended during administration of all parenteral solutions, where possible.

Do not administer unless solution is clear and seal is intact.

All injections in flexible plastic containers are intended for intravenous administration using sterile and nonpyrogenic equipment.

Additives may be incompatible. Complete information is not available. Those additives known to be incompatible should not be used. Consult with pharmacist, if available. If, in the informed judgment of the physician, it is deemed advisable to introduce additives, use aseptic technique. Mix thoroughly when additives have been introduced. Do not store solutions containing additives.

After opening the container, the contents should be used immediately and should not be stored for a subsequent infusion. Do not reconnect any partially used containers. Discard any unused portion.

HOW SUPPLIED:

3% Sodium Chloride Injection, USP in a single dose flexible plastic container, is available as follows:

Product No.	530175	530175
Presentation	Single-Dose Container	Carton
NDC #	63323-530-21	63323-530-75
Description	15 grams per 500 mL in a 500 mL bag (30 mg per mL)	20 Single-Dose Containers in 1 Carton

Exposure of pharmaceutical products to heat should be minimized. Avoid excessive heat.

Store at 20° to 25°C (68° to 77°F) [see USP Controlled Room Temperature]; brief exposure up to 40°C/104°F does not adversely affect the product.

The container closure is not made with natural rubber latex. Non-PVC, Non-DEHP, Sterile.

INSTRUCTIONS FOR USE:

Check flexible container solution composition, lot number, and expiry date.

Do not remove solution container from its overwrap until immediately before use.

Use sterile equipment and aseptic technique.

To Open

1. Turn solution container over so that the text is face down. Using the pre-cut corner tabs, peel open the overwrap and remove solution container.
2. Check the solution container for leaks by squeezing firmly. If leaks are found, or if the seal is not intact, discard the solution.
3. Do not use if the solution is cloudy or a precipitate is present.

To Add Medication

1. Identify WHITE Additive Port with arrow pointing toward container.
2. Immediately before injecting additives, break off WHITE Additive Port Cap with the arrow pointing toward container.
3. Hold base of WHITE Additive Port horizontally.
4. Insert needle horizontally through the center of WHITE Additive Port's septum and inject additives.
5. Mix container contents thoroughly.

Preparation for Administration

1. Immediately before inserting the infusion set, break off BLUE Infusion Port Cap with the arrow pointing away from container.
2. Use a non-vented infusion set or close the air-inlet on a vented set.
3. Close the roller clamp of the infusion set.
4. Hold the base of BLUE Infusion Port.
5. Insert spike through BLUE Infusion Port by rotating wrist slightly until the spike is inserted. **NOTE:** See full directions accompanying administration set.

WARNING: Do not use flexible container in series connections.

Manufactured for:



Lake Zurich, IL 60047

Made in Germany

www.fresenius-kabi.com/us

451532A

Revised: February 2020

PACKAGE LABEL - PRINCIPAL DISPLAY – 3% Sodium Chloride Injection, USP 500 mL Bag Label

NDC 63323-530-21

freeflex®

500 mL

3% Sodium Chloride Injection, USP

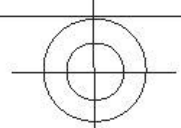
15 grams per 500 mL (30 mg per mL)

Hypertonic Saline

For intravenous use. Rx only



NDC 63323-530-21



free flex®

500 mL

3% Sodium Chloride Injection, USP

15 grams per 500 mL
(30 mg per mL)

Hypertonic Saline

100

For intravenous use.

Rx only

Each 100 mL contains: Sodium Chloride, USP 3 g in water for injection. pH may have been adjusted with hydrochloric acid.

Sodium Chloride	513 mEq/L
1027 mOsmol/L (CALC)	pH 5.0 (4.5 to 7.0)

200

Hypertonic. May cause vein damage.

Single-Dose Container. Discard Unused Portion.

Additives may be incompatible. Consult with pharmacist, if available. When introducing additives, use aseptic technique, mix thoroughly and do not store.

300

Usual dosage: See package insert.

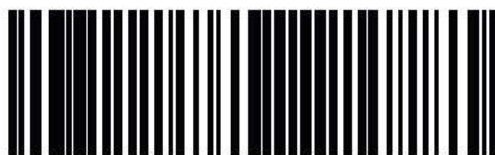
Store unit in moisture barrier overwrap.

Use immediately once removed from overwrap.

Store at 20° to 25°C (68° to 77°F) [see USP Controlled Room Temperature] until ready to use. Avoid excessive heat.

The container closure is not made with natural rubber latex. Non-PVC, Non-DEHP, Sterile.

400



(01)00363323530211

Mfd. for:



**FRESENIUS
KABI**

Lake Zurich, IL 60047

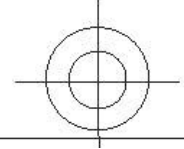
Made in Germany

www.fresenius-kabi.com/us

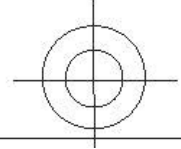
403291

LOT

EXP



0743501/00 US



PACKAGE LABEL - PRINCIPAL DISPLAY - 3% Sodium Chloride Injection, USP Case Label

NDC 63323-530-75 530175
3% Sodium Chloride Injection, USP,
15 grams per 500 mL
500 mL x 20 Single-Dose Container
 Hypertonic Saline
 For Intravenous Use
Rx only

Manufactured for:

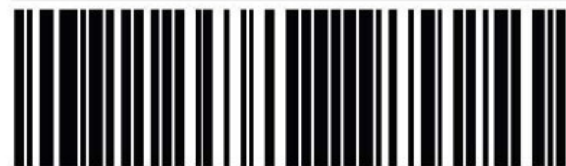
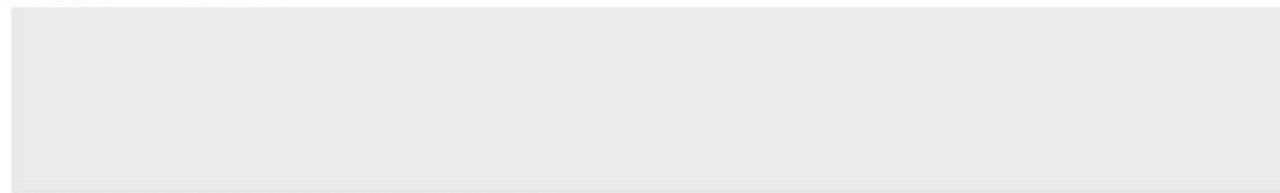


**FRESENIUS
KABI**

Fresenius Kabi USA, LLC
 Lake Zurich, IL 60047
www.fresenius-kabi.com/us
 Made in Germany

NDC 63323-530-75 **530175**
3% Sodium Chloride Injection, USP,
15 grams per 500 mL

500 mL x 20 Single-Dose Container **RX only**
 Hypertonic Saline
 For Intravenous Use
 Store at 20° to 25°C (68° to 77°F) [see USP Controlled Room Temperature].
 Avoid excessive heat.



(01)30363323530755

LOT

EXP

63708 0717961/00 US

SODIUM CHLORIDE

sodium chloride injection, solution

Product Information

Product Type	HUMAN PRESCRIPTION DRUG	Item Code (Source)	NDC:63323-530
Route of Administration	INTRAVENOUS		

Active Ingredient/Active Moiety

Ingredient Name	Basis of Strength	Strength
SODIUM CHLORIDE (UNII: 451W47IQ8X) (SODIUM CATION - UNII:LYR4M0NH37, CHLORIDE ION - UNII:Q32ZN48698)	SODIUM CHLORIDE	3 g in 100 mL

Inactive Ingredients

Ingredient Name	Strength
WATER (UNII: 059QF0KO0R)	
HYDROCHLORIC ACID (UNII: QTT17582CB)	

Packaging

#	Item Code	Package Description	Marketing Start Date	Marketing End Date
1	NDC:63323-530-75	20 in 1 CASE	03/20/2020	
1	NDC:63323-530-21	500 mL in 1 BAG; Type 0: Not a Combination Product		

Marketing Information

Marketing Category	Application Number or Monograph Citation	Marketing Start Date	Marketing End Date
ANDA	ANDA209476	03/20/2020	

Labeler - Fresenius Kabi USA, LLC (608775388)

Establishment

Name	Address	ID/FEI	Business Operations
Fresenius Kabi Deutschland GmbH		506719546	ANALYSIS(63323-530) , MANUFACTURE(63323-530)

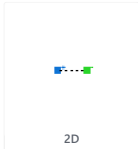
Revised: 10/2022

Fresenius Kabi USA, LLC

COMPOUND SUMMARY

Sodium Chloride

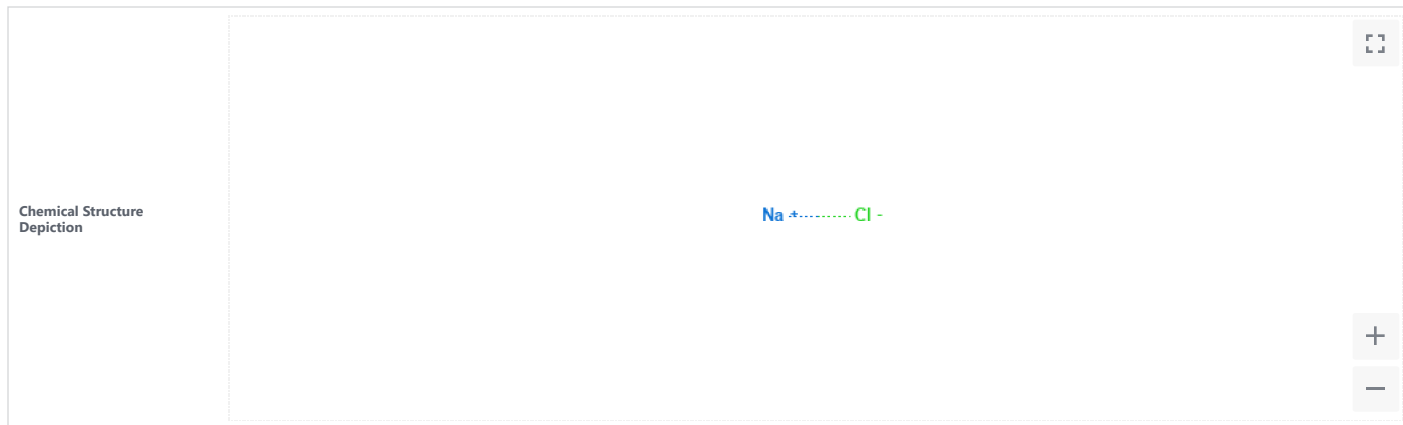
See also: [Saline](#) (related); [Halite](#) (related).

PubChem CID	5234				
Structure	 <p>2D</p> <p>Find Similar Structures</p>				
Molecular Formula	NaCl or ClNa				
Synonyms	<p>sodium chloride 7647-14-5 Salt Table salt Halite</p> <p>More...</p>				
Molecular Weight	58.44				
Component Compounds	<ul style="list-style-type: none"> - CID 313 (Hydrochloric Acid) · CID 5360545 (Sodium) 				
Dates	<table border="0"> <tr> <td>Modify</td> <td>Create</td> </tr> <tr> <td>2023-01-23</td> <td>2005-03-25</td> </tr> </table>	Modify	Create	2023-01-23	2005-03-25
Modify	Create				
2023-01-23	2005-03-25				
<p>Sodium Chloride is a metal halide composed of sodium and chloride with sodium and chloride replacement capabilities. When depleted in the body, sodium must be replaced in order to maintain intracellular osmolarity, nerve conduction, muscle contraction and normal renal function.</p> <p>► NCI Thesaurus (NCIt)</p> <p>Sodium chloride or table salt is a mineral substance belonging to the larger class of compounds called ionic salts. Salt in its natural form is known as rock salt or halite. Salt is present in vast quantities in the ocean, which has about 35 grams of sodium chloride per litre, corresponding to a salinity of 3.5%. Salt is essential for animal life, and saltiness is one of the basic human tastes. The tissues of animals contain larger quantities of salt than do plant tissues. Salt is one of the oldest and most ubiquitous of food seasonings, and salting is an important method of food preservation. Salt is produced from salt mines or by the evaporation of seawater or mineral-rich spring water in shallow pools. Salt is used in many industrial processes and in the manufacture of polyvinyl chloride, plastics, paper pulp and many other consumer products. Of the global annual production of around 200,000,000 tonnes of salt, only 6% is used for human consumption. Other uses include water conditioning, highway de-icing and various agricultural applications. For humans, salt is a major source of sodium. Sodium is essential to life: it helps nerves and muscles to function correctly, and it is one of the factors involved in the regulation of water content.</p> <p>► Toxin and Toxin Target Database (T3DB)</p> <p>Sodium chloride is an inorganic chloride salt having sodium(1+) as the counterion. It has a role as an emetic and a flame retardant. It is an inorganic chloride and an inorganic sodium salt.</p> <p>► ChEBI</p>					

1 Structures



1.1 2D Structure



► PubChem

1.2 3D Status



Conformer generation is disallowed since MMFF94s unsupported element, MMFF94s unsupported atom valence, mixture or salt

► PubChem

2 Names and Identifiers

2.1 Computed Descriptors

2.1.1 IUPAC Name

sodium;chloride

Computed by Lexichem TK 2.7.0 (PubChem release 2021.05.07)

[▶ PubChem](#)

2.1.2 InChI

InChI=1S/ClH.Na/h1H;/q;+1/p-1

Computed by InChI 1.0.6 (PubChem release 2021.05.07)

[▶ PubChem](#)

2.1.3 InChIKey

FAPWRFPIFSIZLT-UHFFFAOYSA-M

Computed by InChI 1.0.6 (PubChem release 2021.05.07)

[▶ PubChem](#)

2.1.4 Canonical SMILES

[Na+].[Cl-]

Computed by OEChem 2.3.0 (PubChem release 2021.05.07)

[▶ PubChem](#)

2.2 Molecular Formula

NaCl

[▼ Wikipedia](#)

Source: [Wikipedia](#)

Record Name: sodium chloride

URL: https://en.wikipedia.org/wiki/Sodium_chloride

Description: Chemical information link to Wikipedia.

CINa

Computed by PubChem 2.1 (PubChem release 2021.05.07)

[▶ PubChem](#)

2.3 Other Identifiers

2.3.1 CAS

7647-14-5

[▶ CAS Common Chemistry; ChemIDplus; DrugBank; DTP/NCI; EPA Chemicals under the TSCA; EPA DSSTox; European Chemicals Agency \(ECHA\); FDA Global Substance Registration System \(GSRS\); Hazardous Substances Data B](#)

14762-51-7

[▶ CAS Common Chemistry; ChemIDplus; EPA DSSTox](#)

32343-72-9

[▶ ChemIDplus](#)

2.3.2 Related CAS

14784-90-8 ((24)hydrochlorideCl)

17112-21-9 ((22)hydrochlorideCl)

[▶ ChemIDplus](#)

2.3.3 Deprecated CAS

11062-32-1, 11062-43-4, 8028-77-1, 418758-90-4

[▶ ChemIDplus](#)

11062-32-1, 11062-43-4, 418758-90-4

[▶ EPA DSSTox](#)

2.3.4 European Community (EC) Number



231-598-3

[▶ European Chemicals Agency \(ECHA\)](#)

2.3.5 NSC Number



77364

[▶ DTP/NCI](#)

2.3.6 UNII



451W47IQ8X

[▶ FDA Global Substance Registration System \(GSRS\)](#)

2.3.7 DSSTox Substance ID



DTXSID3021271

[▶ EPA DSSTox](#)

DTXSID6040379

[▶ EPA DSSTox](#)

DTXSID501033754

[▶ EPA DSSTox](#)

2.3.8 Wikipedia



Sodium chloride

[▶ Wikipedia](#)

2.3.9 Wikidata



Q2314

[▶ Wikidata](#)

2.3.10 NCI Thesaurus Code



C29974

[▶ NCI Thesaurus \(NCIt\)](#)

C821

[▶ NCI Thesaurus \(NCIt\)](#)

C72068

[▶ NCI Thesaurus \(NCIt\)](#)

C75874

[▶ NCI Thesaurus \(NCIt\)](#)

C822

[▶ NCI Thesaurus \(NCIt\)](#)

2.3.11 RXCUI



9863

[▶ NLM RxNorm Terminology](#)

2.4 Synonyms



2.4.1 MeSH Entry Terms



Sodium Chloride
 Sodium Chloride, (22)Na
 Sodium Chloride, (24)NaCl

▶ Medical Subject Headings (MeSH)

2.4.2 Depositor-Supplied Synonyms



sodium chloride	Top flake	Adsorbanac	Natrum Muriaticum	NSC-77364	Sodium, Reference Standard Solution	Rocksalt
7647-14-5	Sodium chloride (NaCl)	Hypersal	Extra Fine 200 Salt	Sodium chloride, hypertonic	Halite (NaCl)	Titrisol
Salt	Hyposaline	sodium;chloride	Extra Fine 325 Salt	LS-1700	Sodium chloride, ACS reagent, >=99.0%	cloruro sod
Table salt	Sodium monochloride	Trisodium trichloride	Sodium chloride brine, purified	10% Sodium Chloride Injection	Sodium-36 chloride	sodium-chl
Halite	Flexivial	White crystal	Arm-A-Vial	CHEBI:26710	EINECS 231-598-3	Solsel
Saline	Gingivyl	H.G. blending	CCRIS 982	451W47IQ8X	NSC 77364	UNII-451W-
Rock salt	Slow Sodium	Salt (ingredient)	Dendritic salt	Ayr	Sodium chloride physiological solution, BioUltra, tablet	natrii chlori
Common salt	Sea salt	Colyte	HSDB 6368	Buffer Solution, TISAB	Sodium chloride (Na36Cl)	Saline Solut
Dendritis	NaCl	Isotonic saline	EPA Pesticide Chemical Code 013905	Sodium chloride, ultra dry	Sodium chloride [USP:JAN]	Sea water
Purex	SS salt	Sodium chloride (Na4Cl4)	14762-51-7	Sodium chloride solution, 5 M	Isotonic	Watesal A
Sodium chloric	sodiumchloride	Caswell No. 754	Sodium chloride solution	Natriumchlorid [German]	Kochsalz	Uzushio Bir
Iodized salt	Natriumchlorid	Normal saline	MFCD00003477	Broncho saline	Mafron	chlorure de

▶ PubChem

3 Chemical and Physical Properties



3.1 Computed Properties



Property Name	Property Value	Reference
Molecular Weight	58.44	Computed by PubChem 2.1 (PubChem release 2021.05.07)
Hydrogen Bond Donor Count	0	Computed by Cactvs 3.4.8.18 (PubChem release 2021.05.07)
Hydrogen Bond Acceptor Count	1	Computed by Cactvs 3.4.8.18 (PubChem release 2021.05.07)
Rotatable Bond Count	0	Computed by Cactvs 3.4.8.18 (PubChem release 2021.05.07)
Exact Mass	57.9586220	Computed by PubChem 2.1 (PubChem release 2021.05.07)
Monoisotopic Mass	57.9586220	Computed by PubChem 2.1 (PubChem release 2021.05.07)
Topological Polar Surface Area	0 Å ²	Computed by Cactvs 3.4.8.18 (PubChem release 2021.05.07)
Heavy Atom Count	2	Computed by PubChem
Formal Charge	0	Computed by PubChem
Complexity	2	Computed by Cactvs 3.4.8.18 (PubChem release 2021.05.07)
Isotope Atom Count	0	Computed by PubChem
Defined Atom Stereocenter Count	0	Computed by PubChem
Undefined Atom Stereocenter Count	0	Computed by PubChem
Defined Bond Stereocenter Count	0	Computed by PubChem
Undefined Bond Stereocenter Count	0	Computed by PubChem
Covalently-Bonded Unit Count	2	Computed by PubChem
Compound Is Canonicalized	Yes	Computed by PubChem (release 2021.05.07)

► [PubChem](#)

3.2 Experimental Properties



3.2.1 Physical Description



Dry Powder; Dry Powder, Liquid; Dry Powder, Other Solid; Dry Powder, [Water](#) or Solvent Wet Solid; Liquid; Liquid, Other Solid; NKRA; Other Solid; Pellets or Large Crystals; Pellets or Large Crystals, Liquid; [Water](#) or Solvent Wet Solid

► [EPA Chemicals under the TSCA](#)

[Water](#) soluble, white crystals; [CAMEO]

► [Haz-Map, Information on Hazardous Chemicals and Occupational Diseases](#)

3.2.2 Color/Form



Colorless, transparent crystals or white, crystalline powder

Lewis, R.J. Sr.; Hawley's Condensed Chemical Dictionary 15th Edition. John Wiley & Sons, Inc. New York, NY 2007., p. 1140

► [Hazardous Substances Data Bank \(HSDB\)](#)

Colorless and transparent or translucent when in large crystals

O'Neil, M.J. (ed.). The Merck Index - An Encyclopedia of Chemicals, Drugs, and Biologicals. Cambridge, UK: Royal Society of Chemistry, 2013., p. 1596

► [Hazardous Substances Data Bank \(HSDB\)](#)

Colorless cubic crystals

Haynes, W.M. (ed.). CRC Handbook of Chemistry and Physics. 94th Edition. CRC Press LLC, Boca Raton: FL 2013-2014, p. 4-89

► [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.3 Taste



SRP: SALTY

► [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.4 Boiling Point



1465 °C

Haynes, W.M. (ed.). CRC Handbook of Chemistry and Physics. 94th Edition. CRC Press LLC, Boca Raton: FL 2013-2014, p. 4-89

► [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.5 Melting Point



800.7 °C

Haynes, W.M. (ed.). CRC Handbook of Chemistry and Physics. 94th Edition. CRC Press LLC, Boca Raton: FL 2013-2014, p. 4-89

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.6 Solubility



36.0 g/100 g of **water** at 25 °C

Haynes, W.M. (ed.). *CRC Handbook of Chemistry and Physics*. 94th Edition. CRC Press LLC, Boca Raton: FL 2013-2014, p. 4-89

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

One gram dissolves in 2.8 mL **water** /3.57X10+5 mg/L/ at 25 °C

O'Neil, M.J. (ed.). *The Merck Index - An Encyclopedia of Chemicals, Drugs, and Biologicals*. Cambridge, UK: Royal Society of Chemistry, 2013., p. 1596

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Slightly soluble in **ethanol**

Haynes, W.M. (ed.). *CRC Handbook of Chemistry and Physics*. 94th Edition. CRC Press LLC, Boca Raton: FL 2013-2014, p. 4-89

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

0.065 g/100 g **ethanol** at 25 °C, 7.15 g/100 g **ethylene glycol** at 25 °C, 5.21 g/100 g **formic acid** at 25 °C, 10 g/100 g **glycerol** at 25 °C, 2.15 g /100 g liquid **ammonia** at -40 °C, 1.40 g/100g **methanol** at 25 °C, 1.86 g/100 g **monoethanolamine** at 25 °C /Table/

Feldman SR et al; *Sodium Chloride*. *Kirk-Othmer Encyclopedia of Chemical Technology*. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

One gram dissolves in ... 2.6 mL boiling **water**, in 10 mL **glycerol**

O'Neil, M.J. (ed.). *The Merck Index - An Encyclopedia of Chemicals, Drugs, and Biologicals*. Cambridge, UK: Royal Society of Chemistry, 2013., p. 1596

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.7 Density



2.17 at 25 °C/4 °C

Haynes, W.M. (ed.). *CRC Handbook of Chemistry and Physics*. 94th Edition. CRC Press LLC, Boca Raton: FL 2013-2014, p. 4-89

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Enthalpy of formation: -410.9 kJ/mol at 25 °C; Density of molten sodium chloride at 850 °C: 1.549 g/cu cm; latent heat of fusion: 0.52 kJ/g

Westphal G et al; *Sodium Chloride*. *Ullmann's Encyclopedia of Industrial Chemistry*. 7th ed. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 5 Jan 2010

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.8 Vapor Pressure



VP: 1 mm Hg at 865 °C

Lewis, R.J. Sr. (ed) *Sax's Dangerous Properties of Industrial Materials*. 11th Edition. Wiley-Interscience, Wiley & Sons, Inc. Hoboken, NJ. 2004., p. V3: 3238

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.9 Stability/Shelf Life



Stable under recommended storage conditions.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.10 Decomposition



When heated to decomposition it emits toxic fumes of /**hydrochloric acid** and **disodium oxide**/.

Lewis, R.J. Sr. (ed) *Sax's Dangerous Properties of Industrial Materials*. 11th Edition. Wiley-Interscience, Wiley & Sons, Inc. Hoboken, NJ. 2004., p. 3239

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.11 Viscosity



Viscosity of saturated aqueous solution = 1.93 mPa-s

Westphal G et al; *Sodium Chloride*. *Ullmann's Encyclopedia of Industrial Chemistry*. 7th ed. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 5 Jan 2010

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.12 Corrosivity



Sodium chloride solutions are corrosive to base metals

Westphal G et al; *Sodium Chloride*. *Ullmann's Encyclopedia of Industrial Chemistry*. 7th ed. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 5 Jan 2010

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.13 pH



pH = 6.7 to 7.3; its aqueous solution is neutral

O'Neil, M.J. (ed.). The Merck Index - An Encyclopedia of Chemicals, Drugs, and Biologicals. Cambridge, UK: Royal Society of Chemistry, 2013., p. 1596

► [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.14 Surface Tension



110 mN/m at 850 °C /Molten sodium chloride/

Westphal G et al; Sodium Chloride. Ullmann's Encyclopedia of Industrial Chemistry. 7th ed. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 5 Jan 2010

► [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.15 Refractive Index



Index of refraction: 1.5442 /Table/

Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

► [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.16 Other Experimental Properties



A 23% aqueous solution of sodium chloride freezes at -20.5 °C. ... Density of saturated aqueous solution at 25 °C is 1.202 ... Begins to volatilize at a little above its melting point. ... Its solubility is decreased by [hydrogen chloride](#).

O'Neil, M.J. (ed.). The Merck Index - An Encyclopedia of Chemicals, Drugs, and Biologicals. Cambridge, UK: Royal Society of Chemistry, 2013., p. 1596

► [Hazardous Substances Data Bank \(HSDB\)](#)

Somewhat hygroscopic

Lewis, R.J. Sr.; Hawley's Condensed Chemical Dictionary 15th Edition. John Wiley & Sons, Inc. New York, NY 2007., p. 1140

► [Hazardous Substances Data Bank \(HSDB\)](#)

Specific heat = 0.853 J/g-k; hardness Mohs' scale: 2.5; critical humidity at 20 °C: 75.3%; heat of solution, 1 kg H₂O, 25 °C: 3.757 kJ/mol /Table/

Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

► [Hazardous Substances Data Bank \(HSDB\)](#)

3.2.17 Chemical Classes



Metals -> Metals, Inorganic Compounds

► [Haz-Map, Information on Hazardous Chemicals and Occupational Diseases](#)

4 Related Records ?

4.1 Related Compounds with Annotation ?

▶ PubChem

4.2 Component Compounds ?

• CID 313 (Hydrochloric Acid)

• CID 5360545 (Sodium)

▶ PubChem

4.3 Related Compounds ?

Same Connectivity	5 Records
Mixtures, Components, and Neutralized Forms	2 Records
Similar Compounds	11 Records

▶ PubChem

4.4 Substances ?

4.4.1 Related Substances ?

Same	426 Records
------	-------------

▶ PubChem

4.4.2 Substances by Category ?

▶ PubChem

4.5 Entrez Crosslinks ?

PubMed	187 Records
--------	-------------

Taxonomy	14 Records
OMIM	4 Records
Gene	277 Records

▶ [PubChem](#)

4.6 NCBI LinkOut



▶ [NCBI](#)

5 Chemical Vendors



▶ PubChem

6 Drug and Medication Information ?

6.1 Drug Indication ?

This intravenous solution is indicated for use in adults and pediatric patients as a source of electrolytes and **water** for hydration. Also, designed for use as a diluent and delivery system for intermittent intravenous administration of compatible drug additives.

[▶ DrugBank](#)

6.2 WHO Essential Medicines ?

Drug	Drug Classes	Formulation	Indication
Sodium chloride	Solutions correcting water , electrolyte and acid-base disturbances -> Parenteral	Parenteral - General injections - IV: 0.9% isotonic (equivalent to Na+ 154 mmol/L and Cl- 154 mmol/L)	Other specified disorders of fluid, electrolyte or acid-base balance [co-prescribed with B05XA03]

[▶ WHO Model Lists of Essential Medicines](#)

6.3 FDA Orange Book ?

[▶ FDA Orange Book](#)

6.4 FDA National Drug Code Directory ?

[▶ National Drug Code \(NDC\) Directory](#)

SEA SALT is an active ingredient in the product DETERGENT.

[▶ National Drug Code \(NDC\) Directory](#)

SODIUM CHLORIDE is an active ingredient in 500 products including: '0.9% SODIUM CHLORIDE', '10 PARASITE DETOX', and '2 TRANSFORM'.

[▶ National Drug Code \(NDC\) Directory](#)

6.5 Drug Labels for Ingredients ?

Showing 2 of 36 [View More](#)

Label Title	PROCALAMINE- glycerin, isoleucine, leucine, lysine, methionine, phenylalanine, threonine, tryptophan, valine, alanine, glycine, arginine, histidine, proline, serine, cysteine, sodium acetate, magnesium acetate, calcium acetate, sodium chloride, potassium chloride, phosphoric acid, and potassium metabisulfite injection
Drug Ingredient	AMINO ACIDS; CALCIUM ACETATE; GLYCERIN; MAGNESIUM ACETATE; PHOSPHORIC ACID; POTASSIUM CHLORIDE; SODIUM ACETATE; SODIUM CHLORIDE
Label Download	PDF Label
NDC Code(s)	0264-1915-07

Packager	B. Braun Medical Inc.
▶ DailyMed	
Label Information	Total 4 labels
Drug Ingredient	ASCORBIC ACID; POLYETHYLENE GLYCOL 3350; POTASSIUM CHLORIDE; SODIUM ASCORBATE; SODIUM CHLORIDE; SODIUM SULFATE
NDC Code(s)	54868-5890-0, 65649-201-75, 65649-201-76, 65649-400-01, 65649-400-02, 68682-201-75
Packagers	Oceanside Pharmaceuticals; Physicians Total Care, Inc.; Salix Pharmaceuticals, Inc; Salix Pharmaceuticals, Inc.

[▶ DailyMed](#)

6.6 Clinical Trials



6.6.1 ClinicalTrials.gov



[▶ ClinicalTrials.gov](#)

6.6.2 EU Clinical Trials Register



[▶ EU Clinical Trials Register](#)

6.6.3 NIPH Clinical Trials Search of Japan



[▶ NIPH Clinical Trials Search of Japan](#)

6.7 Therapeutic Uses



Sodium chloride injections are used as a source of sodium chloride and [water](#) for hydration. Sodium chloride is used in the prevention or treatment of deficiencies of [sodium](#) and [chloride](#) ions and in the prevention of muscle cramps and heat prostration resulting from excessive perspiration during exposure to high temperature. Sodium chloride is also used to treat deficiencies of [sodium](#) and [chloride](#) caused by excessive diuresis or excessive salt restriction.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2758

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

0.45% Sodium chloride injection is used principally as a hydrating solution and may be used to assess renal function status, since more [water](#) is provided than is required for excretion of salt. 0.45% Sodium chloride injection is also used in the management of hyperosmolar diabetes.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2758

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

0.9% Sodium chloride injection is used for extracellular fluid replacement and in the management of metabolic alkalosis in the presence of fluid loss and mild [sodium](#) depletion. 0.9% Sodium chloride injection (normal saline) is also used as a priming fluid for hemodialysis procedures and to initiate and terminate blood transfusions.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2758

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Hypertonic (i.e., 3%, 5%) sodium chloride injection is used in the management of severe sodium chloride depletion when rapid electrolyte restoration is essential. Severe sodium chloride depletion may occur in the presence of heart failure or renal impairment, or during surgery or postoperatively. In these conditions, [chloride](#) loss often exceeds [sodium](#) loss. Hypertonic sodium chloride injections are also used in the management of hyponatremia and hypochloremia resulting from administration of [sodium](#)-free fluids during fluid and electrolyte therapy; in the management of extreme dilution of extracellular fluid following excessive [water](#) intake (e.g., that resulting from multiple enemas or perfusion of irrigating solutions into open venous sinuses during transurethral prostatic resections); and in the emergency treatment of severe sodium chloride depletion resulting from excess sweating, vomiting, diarrhea, and other conditions.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2758

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Therapeutic Uses (Complete) data for SODIUM CHLORIDE (13 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

6.8 Drug Warnings



Bacteriostatic sodium chloride injection containing [benzyl alcohol](#) as a preservative (antimicrobial agent) should not be used for diluting or reconstituting drugs for administration in neonates nor should it be used to flush intravascular catheters in neonates. Several deaths have been reported in neonates weighing less than 2.5 kg in whom bacteriostatic sodium chloride for injection containing 0.9% [benzyl alcohol](#) was used for flushing IV catheters; some of these neonates received additional [benzyl alcohol](#) when bacteriostatic sodium chloride injection was used to dilute or reconstitute drugs. The deaths were usually preceded by a syndrome that included metabolic acidosis, CNS depression, respiratory distress progressing to gasping respiration, hypotension, renal failure, and, occasionally, seizures and intracranial hemorrhage. High concentrations of [benzyl alcohol](#), [benzoic acid](#), and [hippuric acid](#) (a metabolite) were present in blood and urine in these neonates. [Benzyl alcohol](#) toxicity apparently was caused by administration of relatively large daily doses (99-404 mg/kg daily) of the preservative in proportion to the neonate's weight. Although these neonates had biochemical evidence of [benzyl alcohol](#) toxicity, they also had serious underlying conditions.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2759

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Sodium chloride is contraindicated in patients with conditions in which administration of [sodium](#) and [chloride](#) is detrimental. Sodium chloride 3 and 5% injections are also contraindicated in the presence of increased, normal, or only slightly decreased serum electrolyte concentrations.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2759

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Sodium chloride should be used with extreme caution, if at all, in patients with congestive heart failure or other edematous or [sodium](#)-retaining conditions, in patients with severe renal insufficiency, in patients with liver cirrhosis, and in patients receiving corticosteroids or corticotropin; particular caution is necessary in geriatric or postoperative patients. IV administration of sodium chloride may cause fluid and/or solute overload resulting in dilution of serum electrolytes, overhydration, congestive conditions, or pulmonary edema. The risk of dilutional conditions is inversely proportional to the electrolyte concentration administered, and the risk of solute overload and resultant congestive conditions with peripheral and/or pulmonary edema is directly proportional to the electrolyte concentration administered. The manufacturers warn that excessive IV administration of sodium chloride may result in hypokalemia.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2759

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Changes in fluid balance, electrolyte concentrations, and acid-base balance should be evaluated clinically and via periodic laboratory determinations during prolonged therapy with sodium chloride and in patients whose condition warrants such evaluation. Substantial changes may require additional electrolyte supplements or other appropriate therapy. Additional electrolyte supplementation may also be required in patients with substantial electrolyte losses resulting from conditions such as protracted nasogastric suctioning, vomiting, diarrhea, or GI fistula drainage.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2759

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Drug Warnings (Complete) data for SODIUM CHLORIDE (12 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

6.9 Reported Fatal Dose



The estimated fatal dose of sodium chloride is approximately 0.75 to 3.00 g/kg.

Dart, R.C. (ed). Medical Toxicology. Third Edition, Lippincott Williams & Wilkins. Philadelphia, PA, 2004., p. 1057

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

An estimated dose of more than 400 mEq/kg resulted in brain injury and death in a 2 year old child given a salt [water](#) solution to induce emesis.

Dart, R.C. (ed). Medical Toxicology, Third Edition, Lippincott Williams & Wilkins, Philadelphia, PA, 2004., p. 1057

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

LD50 3000 mg/kg (oral, rat), LD50 1000 mg/kg (humans)

▶ [Toxin and Toxin Target Database \(T3DB\)](#)

7 Food Additives and Ingredients



7.1 Food Additive Classes



JECFA Functional Classes

Food Additives -> FOOD_ADDITIVE;

▶ [Joint FAO/WHO Expert Committee on Food Additives \(JECFA\)](#)

7.2 FDA Substances Added to Food



Substance	SODIUM CHLORIDE
Used for (Technical Effect)	STABILIZER OR THICKENER
Document Number (21 CFR)	172.177 172.430 172.490 172.840 172.861 182.1 182.70 182.90

▶ [FDA Center for Food Safety and Applied Nutrition \(CFSAN\)](#)

7.3 Evaluations of the Joint FAO/WHO Expert Committee on Food Additives - JECFA



Chemical Name	SODIUM CHLORIDE
Evaluation Year	1985
Report	TRS 733-JECFA 29/13

▶ [Joint FAO/WHO Expert Committee on Food Additives \(JECFA\)](#)

8 Agrochemical Information

8.1 Agrochemical Category

Pesticide active substances

[▶ EU Pesticides Database](#)

8.2 EU Pesticides Data

Active Substance	sodium chloride
Status	Approved [Reg. (EC) No 1107/2009]
Legislation	2004/129/EC, Reg. (EU) 2017/1529, Reg. (EU) 2021/556

[▶ EU Pesticides Database](#)

9 Pharmacology and Biochemistry



9.1 Pharmacodynamics



Sodium, the major cation of the extracellular fluid, functions primarily in the control of **water** distribution, fluid balance, and osmotic pressure of body fluids. **Sodium** is also associated with **chloride** and **bicarbonate** in the regulation of the acid-base equilibrium of body fluid. **Chloride**, the major extracellular anion, closely follows the metabolism of **sodium**, and changes in the acid-base balance of the body are reflected by changes in the **chloride** concentration.

▶ [DrugBank](#)

9.2 FDA Pharmacological Classification



Non-Proprietary Name	NATRUM MURIATICUM
Pharmacological Classes	Inhibition Large Intestine Fluid/Electrolyte Absorption [PE]; Osmotic Activity [MoA]; Osmotic Laxative [EPC]; Increased Large Intestinal Motility [PE]

▶ [National Drug Code \(NDC\) Directory](#)

Non-Proprietary Name	SODIUM CHLORIDE
Pharmacological Classes	Inhibition Large Intestine Fluid/Electrolyte Absorption [PE]; Osmotic Activity [MoA]; Osmotic Laxative [EPC]; Increased Large Intestinal Motility [PE]

▶ [National Drug Code \(NDC\) Directory](#)

9.3 ATC Code



A - Alimentary tract and metabolism

A12 - Mineral supplements

A12C - Other mineral supplements

A12CA - Sodium

A12CA01 - Sodium chloride

▶ [WHO Anatomical Therapeutic Chemical \(ATC\) Classification](#)

B - Blood and blood forming organs

B05 - Blood substitutes and perfusion solutions

B05C - Irrigating solutions

B05CB - Salt solutions

B05CB01 - Sodium chloride

▶ [WHO Anatomical Therapeutic Chemical \(ATC\) Classification](#)

B - Blood and blood forming organs

B05 - Blood substitutes and perfusion solutions

B05X - I.v. solution additives

B05XA - Electrolyte solutions

B05XA03 - Sodium chloride

▶ [WHO Anatomical Therapeutic Chemical \(ATC\) Classification](#)

S - Sensory organs

S01 - Ophthalmologicals

S01X - Other ophthalmologicals

S01XA - Other ophthalmologicals

S01XA03 - Sodium chloride, hypertonic

▶ [WHO Anatomical Therapeutic Chemical \(ATC\) Classification](#)

9.4 Bionecessity



Solutions of sodium chloride closely approximate the composition of the extracellular fluid of the body. A 0.9% solution of sodium chloride (i.e., isotonic) has approximately the same osmotic pressure as body fluids. Sodium chloride provides electrolyte supplementation. **Sodium** is the major cation of extracellular fluid and functions principally in the control of **water** distribution, fluid and electrolyte balance, and osmotic pressure of body fluids. **Sodium** is also associated with **chloride** and **bicarbonate** in the regulation of acid-base balance. **Chloride**, the major extracellular anion, closely follows the physiologic disposition of **sodium**, and changes in the acid-base balance of the body are reflected by changes in serum **chloride** concentration.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2759

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

/VET:/ Horses are most likely to develop signs of salt (NaCl) deficiency when worked hard in hot weather. Sweat and urinary losses are appreciable. Horses deprived of salt tire easily, stop sweating, and exhibit muscle spasms if exercised strenuously. Hemoconcentration and acidosis may be expected. Anorexia and pica may be evident in chronic deprivation, although these are not specific signs of salt deficiency. In lactating mares, milk production seriously declines. Polyuria and polydipsia secondary to renal medullary washout may be seen in prolonged deficits.

Kahn, C.M (ed.); The Merck Veterinary Manual 10th Edition. Merck & Co. Whitehouse Station NJ, 2010, p. 2063

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Essential in diet to maintain **chloride** balance in body.

Lewis, R.J. Sr.; *Hawley's Condensed Chemical Dictionary 15th Edition*. John Wiley & Sons, Inc. New York, NY 2007., p. 1140

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

/VET:/ Pigs fed diets low in salt (NaCl) grow poorly and inefficiently, due largely to a marked reduction in feed intake. Though not specific for salt deficiency, poor hair and skin condition may also develop. There have been reports of salt-deficient pigs attempting to consume urine of other pigs.

Kahn, C.M (ed.); *The Merck Veterinary Manual 10th Edition*. Merck & Co. Whitehouse Station NJ. 2010, p. 2078

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

/VET:/ **Sodium** is the main cation and **chloride** is the main anion in the regulation of osmotic balance in the extracellular fluid (ECF) of the body. Serum **sodium** concentration and serum osmolarity are normally maintained under precise control by homeostatic mechanisms involving thirst, antidiuretic hormone and renal reabsorption of filtered **sodium**. Normal reference ranges for serum **sodium** in adult animals (given in mmol/L) include porcine 135-150, bovine 132-152, canine 141-152 and equine 132-146.

Gupta, R. C. (ed.) *Veterinary Toxicology: Basic and Clinical Principles*. 1st ed. New York, NY, p.461 (2007)

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

9.5 Absorption, Distribution and Excretion



Absorption

Absorption of **sodium** in the small intestine plays an important role in the absorption of **chloride**, amino acids, **glucose**, and **water**. **Chloride**, in the form of **hydrochloric acid** (HCl), is also an important component of gastric juice, which aids the digestion and absorption of many nutrients.

▶ [DrugBank](#)

Route of Elimination

Substantially excreted by the kidneys.

▶ [DrugBank](#)

Volume of Distribution

The volume of distribution is 0.64 L/kg.

▶ [DrugBank](#)

The primary route of **sodium** excretion is the urine; additional excretion occurs in sweat and feces. The kidney filters **sodium** at the glomerulus, but 60% to 70% is reabsorbed in the proximal tubules along with **bicarbonate** and **water**. Another 25% to 30% is reabsorbed in the loop of Henle, along with **chloride** and **water**. In the distal tubules, **aldosterone** modulates the reabsorption of **sodium** and, indirectly, **chloride**. The renal threshold for **sodium** is 110 to 130 mEq/L. Less than 1% of the filtered **sodium** is excreted in the urine.

Dart, R.C. (ed). *Medical Toxicology, Third Edition*, Lippincott Williams & Wilkins. Philadelphia, PA. 2004., p. 1057

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Sodium is rapidly absorbed from the GI tract; it is also absorbed from rectal enemas. Intestinal wall absorption occurs via the Na⁺, K⁺-**adenosine** triphosphatase system that is augmented by **aldosterone** and **desoxycorticosterone acetate**. **Sodium** is not bound by plasma proteins. The volume of distribution is 0.64 L/kg.

Dart, R.C. (ed). *Medical Toxicology, Third Edition*, Lippincott Williams & Wilkins. Philadelphia, PA. 2004., p. 1057

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

In one study using radiolabeled 20% sodium chloride injection, most of the drug concentrated in the decidua and the fetal part of the placenta following intra-amniotic injection. Following intra-amniotic administration of 20% sodium chloride injection, some of the drug diffuses into the maternal blood.

American Society of Health-System Pharmacists 2013; *Drug Information 2013*. Bethesda, MD. 2013, p. 3323

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Arichial sweat glands ... are the organs by which considerable body **water** and electrolytes, mainly sodium chloride, are lost.

Bingham, E.; *Cohrssen, B.; Powell, C.H.; Patty's Toxicology Volumes 1-9 5th ed*. John Wiley & Sons. New York, N.Y. (2001), p. 8:69

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Absorption, Distribution and Excretion (Complete) data for SODIUM CHLORIDE (6 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

9.6 Metabolism/Metabolites



The salt that is taken in to gastro intestinal tract remains for the most part unabsorbed as the liquid contents pass through the stomach and small bowel. On reaching the colon this salt, together with the **water** is taken in to the blood. As excesses are absorbed the kidney is constantly excreting sodium chloride, so that the **chloride** level in the blood and tissues remains fairly constant. Further more, if the **chloride** intake ceases, the kidney ceases to excrete chlorides. Body maintains an equilibrium retaining the 300gm of salt dissolved in the blood and fluid elements of the tissue dissociated into **sodium** ions and **chloride** ions.

▶ [DrugBank](#)

9.7 Biological Half-Life



17 minutes

▶ [DrugBank](#)

9.8 Mechanism of Action



Sodium and **chloride** — major electrolytes of the fluid compartment outside of cells (i.e., extracellular) — work together to control extracellular volume and blood pressure. Disturbances in **sodium** concentrations in the extracellular fluid are associated with disorders of **water** balance.

▶ [DrugBank](#)

Intra-amniotic instillation of 20% sodium chloride injection induces abortion and fetal death. Although the mechanism has not been conclusively determined, some studies indicate that the drug's abortifacient activity may be mediated by prostaglandins released from decidual cells damaged by hypertonic solutions of sodium chloride. Hypertonic sodium chloride-induced uterine contractions are usually sufficient to cause evacuation of both the fetus and placenta; however, abortion may be incomplete in 25-40% of patients. /20% injection/

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD. 2013, p. 3323

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

10 Use and Manufacturing



10.1 Uses



EPA CPDat Chemical and Product Categories

The Chemical and Products Database, a resource for exposure-relevant data on chemicals in consumer products, Scientific Data, volume 5, Article number: 180125 (2018), DOI:10.1038/sdata.2018.125

▶ [EPA Chemical and Products Database \(CPDat\)](#)

Sources/Uses

Sodium chloride (NaCl). A colorless, cubic crystal or white, crystalline powder, found widely distributed over the earth, in sea [water](#), etc., which is a necessary constituent of the body and consequently of the diet. It makes up over 90 percent of the inorganic constituents of the blood serum and is the principal salt involved in maintaining osmotic tension of the blood and tissues. (From Dorland, 27th ed) [ChemIDplus] Used in the hide preservation and pickling stages of leather production; [PMID 21938525]

[PMID:21938525](#)

▶ [Haz-Map, Information on Hazardous Chemicals and Occupational Diseases](#)

Industrial Processes with risk of exposure

[Leather Tanning and Processing](#) [Category: Industry]

▶ [Haz-Map, Information on Hazardous Chemicals and Occupational Diseases](#)

For sodium chloride (USEPA/OPP Pesticide Code: 013905) ACTIVE products with label matches. /SRP: Registered for use in the U.S. but approved pesticide uses may change periodically and so federal, state and local authorities must be consulted for currently approved uses./

National Pesticide Information Retrieval System's Database on Sodium Chloride (7647-14-5). Available from, as of February 18, 2014: <https://npirpublic.ceris.purdue.edu/ppis/>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Over 14,000 different uses for salt have been identified ...the salt industry generally classifies salt uses by 5 principal categories: 1) chemical; 2) highway deicing and stabilization; 3) food use and processing; 4) agriculture; 5) [water](#) conditioning. Remaining uses are categorized as miscellaneous.

Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

The major industries that use salt include in descending order of quantity consumed oil and gas exploration, textiles, dyeing, pulp and paper, metal processing, tanning and leather treatment, and rubber manufacture

Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Chemical ([sodium hydroxide](#), soda ash, [hydrogen chloride](#), [chlorine](#), metallic [sodium](#)), ceramic glazes, metallurgy, curing of hides, food preservative, mineral waters, soap manufacture (salting out), home [water](#) softeners, highway deicing, regeneration of ion-exchange resins, photography, food seasoning, herbicide, fire extinguishing, nuclear reactors, mouthwash, medicine (heat exhaustion), salting out dyestuffs, supercooled solutions. Single crystals are used for spectroscopy, UV, and infrared transmissions.

Lewis, R.J. Sr.; Hawley's Condensed Chemical Dictionary 15th Edition. John Wiley & Sons, Inc. New York, NY 2007., p. 1140

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Uses (Complete) data for SODIUM CHLORIDE (11 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Salt is used for food flavouring, food, plastic production, paper production, [water](#) conditioning, de-icing, agricultural applications. Salt is produced from salt mines or by the evaporation of seawater or mineral-rich spring [water](#) in shallow pools.

▶ [Toxin and Toxin Target Database \(T3DB\)](#)

Mineral Description

Salt, also known as sodium chloride, has many end uses. Virtually every person in the world has some direct or indirect contact with salt daily. People routinely add salt to their food as a flavor enhancer or apply rock salt to walkways to remove ice in the winter. Salt is used as feedstock for [chlorine](#) and [caustic soda](#) manufacture; these two inorganic chemicals are used to make many consumer-related end-use products, such as [polyvinyl chloride](#) (PVC) plastic made from [chlorine](#) and paper-pulping chemicals manufactured from [caustic soda](#).

▶ [USGS National Minerals Information Center](#)

USGS Mineral Commodity Summaries (PDF links)

2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022

▶ USGS National Minerals Information Center

USGS Mineral Yearbook (PDF links)

2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |


▶ USGS National Minerals Information Center

10.1.1 Use Classification



EPA Safer Chemical Functional Use Classes -> Processing Aids and Additives

▶ EPA Safer Choice

Safer Chemical Classes ->  Green circle - The chemical has been verified to be of low concern

▶ EPA Safer Choice

Agrochemicals -> Pesticides

▶ EU Pesticides Database

Human Drugs -> FDA Approved Drug Products with Therapeutic Equivalence Evaluations (Orange Book) -> Active Ingredients

▶ FDA Orange Book

Food Additives -> FOOD_ADDITIVE; -> JECFA Functional Classes

▶ Joint FAO/WHO Expert Committee on Food Additives (JECFA)

Cosmetics -> Bulking; Viscosity controlling

S13 | EUCOSMETICS | Combined Inventory of Ingredients Employed in Cosmetic Products (2000) and Revised Inventory (2006) | DOI:10.5281/zenodo.2624118

▶ NORMAN Suspect List Exchange

10.1.2 Industry Uses



Absorbent	Hardener	Processing aids, specific to petroleum production
Agricultural chemicals (non-pesticidal)	Intermediate	Softener and conditioner
Anti-adhesive agents	Intermediates	Soil amendments (fertilizers)
Anti-static agent	Laboratory chemicals	Solids separation (precipitating) agent, not otherwise specified
Bleaching agent	Not Known or Reasonably Ascertainable	Stabilizing agent
Bleaching agents	Other	Surface active agents
Catalyst	Other (specify)	Surface modifier
Cleaning agent	Paint additives and coating additives not described by other categories	Surfactant (surface active agent)
Deodorizer	Pigment	Viscosity adjustors
Dye	Plating agents and surface treating agents	pH regulating agent
Filler	Preservative	
Flotation agent	Processing aids not otherwise specified	
Flux agent	Processing aids, not otherwise listed	

<https://www.epa.gov/chemical-data-reporting>

▶ EPA Chemicals under the TSCA

10.1.3 Consumer Uses



Adhesion/cohesion promoter	Pigment
Agricultural chemicals (non-pesticidal)	Plating agents and surface treating agents
Bleaching agents	Preservative
Brightener	Processing aids, not otherwise listed
Catalyst	Soil amendments (fertilizers)
Deodorizer	Surface active agents
Dye	Surface modifier
Filler	Surfactant (surface active agent)
Intermediates	Thickening agent
Not Known or Reasonably Ascertainable	
Other	
Other (specify)	
Paint additives and coating additives not described by other categories	

<https://www.epa.gov/chemical-data-reporting>

▶ EPA Chemicals under the TSCA

10.1.4 Household Products



Household & Commercial/Institutional Products

Information on 1864 consumer products that contain Sodium chloride in the following categories is provided:

- Auto Products
- Commercial / Institutional
- Home Maintenance
- Inside the Home
- Landscaping/Yard
- Personal Care
- Pesticides
- Pet Care

▶ [Consumer Product Information Database \(CPID\)](#)

10.2 Methods of Manufacturing



An underground salt deposit may be solution-mined by drilling wells into halite veins, injecting fresh or recycled [water](#) through the well casings to dissolve the salt, and leaving a residence time long enough for the [brine](#) solution to reach saturation with sodium chloride. ... The resulting [brine](#) is extracted through other wells in the same [brine](#) field or gallery. Insoluble impurities, such as anhydrite ([calcium sulfate](#)) settle out in the underground gallery, while the saturated sodium chloride [brine](#), called green [brine](#) (untreated or refined), is pumped to holding tanks on the surface. ... Green [brine](#) is pumped from the underground cavern and transported via pipeline to the nearby salt refinery for processing into evaporated-granulated salt or is used as a feedstock for chloralkali production. ... Nearly all food-grade salt sold or used in the United States is currently produced by vacuum pan evaporation of saturated [brine](#).

Feldman SR; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology (1999-2014). John Wiley & Sons, Inc. Online Posting Date: October 14, 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Conventional Underground Mining: Rock salt is mined from underground deposits by drilling and blasting. ... Since the late 1950s the use of continuous mining machines has increased in salt mines. These "continuous miners" have movable, rotating heads with carbide-tipped cutting bits. The mining machines bore into the salt, eliminating the need for undercutting, drilling, and blasting steps. ... The crushed salt is transported from the primary crusher via conveyor belt to second and third-stage crushers, and then to screening stations for separation into standard product grades established for specific end uses.

Feldman SR; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology (1999-2014). John Wiley & Sons, Inc. Online Posting Date: October 14, 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Commercial solar salt is produced by natural evaporation of seawater or [brine](#) in large, diked, earthen ponds called condensers. Evaporation is carried out by solar radiation and wind action, producing concentrated [brine](#) containing dissolved mineral salts. The process for separation of crystal types is known as fractional crystallization. ... Solar salt production begins as the [brine](#) source, usually seawater, enters the solar pond system and moves in turn from one pond to the next either by pumping or by gravity. ... Sodium chloride precipitates with continuing evaporation, forming a salt layer 10-25-cm thick. ... It takes up to two years to produce salt from the time seawater is introduced into the salt pond system. ... The harvested salt is loaded into trucks and transported to a wash plant, where the salt is washed with clean, nearly saturated [brine](#) to remove particulate matter and to replace [magnesium](#)-laden [brine](#) clinging to the salt crystals.

Feldman SR; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology (1999-2014). John Wiley & Sons, Inc. Online Posting Date: October 14, 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Method of purification: Recrystallization.

Lewis, R.J. Sr.; Hawley's Condensed Chemical Dictionary 15th Edition. John Wiley & Sons, Inc. New York, NY 2007, p. 1140

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Sodium chloride, or rock salt, is obtained from underground room and pillar mining or solution mining (in which [water](#) is pumped into a rock salt deposit, brought back to the surface, and evaporated).

Bingham, E.; Cohrssen, B.; Powell, C.H.; Patty's Toxicology Volumes 1-9 5th ed. John Wiley & Sons. New York, N.Y. (2001), p. 3:783

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

10.3 Impurities



The principal impurity in naturally occurring rock salt is [calcium sulfate](#), generally 1-4%, with small amounts of [calcium chloride](#) and [magnesium chloride](#).

Kirk-Othmer Encyclopedia of Chemical Technology. 3rd ed., Volumes 1-26. New York, NY: John Wiley and Sons, 1978-1984, p. V21 207 (1983)

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

10.4 Formulations/Preparations



Impregnated material (10% sodium chloride); soluble concentrate/solid (1.5% [sodium](#) with 20.4% potassium peroxymonosulfate)

USEPA/Office of Prevention, Pesticides and Toxic Substances; Reregistration Eligibility Decision Document - Inorganic Halides p.5 (September 1993).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Intra-amniotic: Injection 20%

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 3323

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Highest purity medicinal, crystals; highest purity, dried; highest purity, fine powder; highest purity, fused; reagent; reagent, fused; sea evaporated; ground; micro-sized; powdered; table salt; rock salt; chemically pure; United States Pharmacopeia; "Food Chemicals Codex"; single pure crystals.

Lewis, R.J. Sr.; Hawley's Condensed Chemical Dictionary 15th Edition. John Wiley & Sons, Inc. New York, NY 2007, p. 1140

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

... Some rock salt deposits contain pure, crystallized salt. ... This salt is extremely clear and free from defects. It is about 99.8% pure sodium chloride.

Kirk-Othmer Encyclopedia of Chemical Technology. 3rd ed., Volumes 1-26. New York, NY: John Wiley and Sons, 1978-1984, p. V21 207 (1983)

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

For more Formulations/Preparations (Complete) data for SODIUM CHLORIDE (12 total), please visit the [HSDB record page](#).

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

10.5 Consumption Patterns



Production of [chlorine](#), [caustic soda](#), and soda ash accounts for about 57% of total usage, mainly in the form of [brine](#). Highway use of rock salt represents about 19% of total tonnage.

Kirk-Othmer Encyclopedia of Chemical Technology, 3rd ed., Volumes 1-26. New York, NY: John Wiley and Sons, 1978-1984., p. V21 215 (1983)

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

10.6 U.S. Production



Aggregated Product Volume

2019: 1,000,000,000 - <5,000,000,000 lb

2018: 1,000,000,000 - <5,000,000,000 lb

2017: 1,000,000,000 - <5,000,000,000 lb

2016: 1,000,000,000 - <5,000,000,000 lb

<https://www.epa.gov/chemical-data-reporting>

[▶ EPA Chemicals under the TSCA](#)

Production volumes for non-confidential chemicals reported under the Inventory Update Rule.

Year	Production Range (pounds)
1986	<10 thousand
1990	10 thousand - 500 thousand
1994	10 thousand - 500 thousand
1998	10 thousand - 500 thousand
2002	>1 million - 10 million

US EPA; Non-confidential Production Volume Information Submitted by Companies for Chemicals Under the 1986-2002 Inventory Update Rule (IUR). Sodium Chloride (7647-14-5). Available from, as of February 18, 2014: <https://epa.gov/cdr/tools/data/2002-vol.html>

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

Production volume for non-confidential chemicals reported under the 2006 Inventory Update Rule. Chemical: Sodium chloride. Aggregated National Production Volume: 100 to < 500 million pounds.

US EPA; Non-Confidential 2006 Inventory Update Reporting. National Chemical Information. Sodium Chloride (7647-14-5). Available from, as of February 18, 2014: <https://cfpub.epa.gov/iursearch/index.cfm>

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

Non-confidential 2012 Chemical Data Reporting (CDR) information on the production and use of chemicals manufactured or imported into the United States. Chemical: Sodium chloride. National Production Volume: 830,279,683 lb/yr.

USEPA/Pollution Prevention and Toxics; 2012 Chemical Data Reporting Database. Sodium Chloride (7647-14-5). Available from, as of February 18, 2014: https://java.epa.gov/oppt_chemical_search/

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

10.7 U.S. Imports



13,190,739,100 lb

BUREAU OF THE CENSUS. US IMPORTS FOR CONSUMPTION AND GENERAL IMPORTS 1986 P:1-517

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

10.8 General Manufacturing Information



Industry Processing Sectors

Adhesive Manufacturing	Oil and Gas Drilling, Extraction, and Support activities	Transportation Equipment Manufacturing
Agriculture, Forestry, Fishing and Hunting	Other (requires additional information)	Utilities
All Other Basic Inorganic Chemical Manufacturing	Paint and Coating Manufacturing	Wholesale and Retail Trade
All Other Basic Organic Chemical Manufacturing	Paper Manufacturing	Wood Product Manufacturing
All Other Chemical Product and Preparation Manufacturing	Pesticide, Fertilizer, and Other Agricultural Chemical Manufacturing	
Asphalt Paving, Roofing, and Coating Materials Manufacturing	Petrochemical Manufacturing	
Construction	Petroleum Refineries	
Fabricated Metal Product Manufacturing	Primary Metal Manufacturing	
Food, beverage, and tobacco product manufacturing	Printing Ink Manufacturing	
Industrial Gas Manufacturing	Rubber Product Manufacturing	
Mining (except Oil and Gas) and support activities	Services	
Miscellaneous Manufacturing	Soap, Cleaning Compound, and Toilet Preparation Manufacturing	
Not Known or Reasonably Ascertainable	Textiles, apparel, and leather manufacturing	

[▶ EPA Chemicals under the TSCA](#)

EPA TSCA Commercial Activity Status

Sodium chloride (NaCl): ACTIVE

<https://www.epa.gov/tsca-inventory>

▶ [EPA Chemicals under the TSCA](#)

The article of commerce is also known as table salt, rock salt, or sea salt. ... Blusalt, a brand of sodium chloride containing trace amounts of [cobalt](#), [iodine](#), [iron](#), [copper](#), [manganese](#), [zinc](#) is used in farm animals

O'Neil, M.J. (ed.). The Merck Index - An Encyclopedia of Chemicals, Drugs, and Biologicals. Cambridge, UK: Royal Society of Chemistry, 2013., p. 1596

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Sodium chloride can be added in controlled release by encapsulation, a process that coats salt crystals with partially hydrogenated vegetable oil. Encapsulated salt is used primarily in food processing applications.

Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

... Migrates to food from packaging materials.

Sax, N.I. Dangerous Properties of Industrial Materials. 6th ed. New York, NY: Van Nostrand Reinhold, 1984., p. 2419

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

10.9 Sampling Procedures



NIOSH Method 173. Analyte: [Sodium](#). Matrix: Air. Procedure: Filter collection, acid digestion Flow Rate: 1.5 L/min. Sample Size: Not specified. [/Sodium/](#)

U.S. Department of Health, Education Welfare, Public Health Service. Center for Disease Control, National Institute for Occupational Safety Health. NIOSH Manual of Analytical Methods. 2nd ed. Volumes 1-7. Washington, DC: U.S. Government Printing Office, 1977-present., p. V5 173-1

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

NIOSH Method 7300. Analyte: [Sodium](#). Matrix: Air. Sampler: Filter (0.8 um, cellulose ester membrane) Flow Rate: 1 to 4 L/min. Sample Size: 500 liters. Shipment: Routine. Sample Stability: Stable. [/Sodium/](#)

U.S. Department of Health and Human Services, Public Health Service. Centers for Disease Control, National Institute for Occupational Safety and Health. NIOSH Manual of Analytical Methods, 3rd ed. Volumes 1 and 2 with 1985 supplement, and revisions. Washington, DC: U.S. Government Printing Office, February 1984., p. 7300-1

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

NIOSH Method 115. Analyte: [Chloride](#). Matrix: Air. Procedure: Collection with an impinger. Flow Rate: 2.5 L/min. Sample Size: 200 liters. [/Chloride/](#)

U.S. Department of Health, Education Welfare, Public Health Service. Center for Disease Control, National Institute for Occupational Safety Health. NIOSH Manual of Analytical Methods. 2nd ed. Volumes 1-7. Washington, DC: U.S. Government Printing Office, 1977-present., p. V1 115-1

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

NIOSH Method 6011. Analyte: [Chloride ion](#). Matrix: Air. Sampler: Filter (0.45 um, [silver](#) membrane). Flow Rate: 0.3 to 1 L/min. Sample Size: 90 liters. Shipment: Routine. Sample Stability: Greater than or equal to 30 days at 25 °C. [/Chloride ion/](#)

U.S. Department of Health and Human Services, Public Health Service. Centers for Disease Control, National Institute for Occupational Safety and Health. NIOSH Manual of Analytical Methods, 3rd ed. Volumes 1 and 2 with 1985 supplement, and revisions. Washington, DC: U.S. Government Printing Office, February 1984., p. 6011-1

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

11 Identification



11.1 Analytic Laboratory Methods



NIOSH Method: 173. Analyte: **Sodium**. Matrix: Air. Procedure: Atomic absorption spectrophotometry. This method has a detection limit of 0.0002 and sensitivity of 0.015 ug/mL. The working range for a precision better than 3% RSD/CV is 0.05-1.0 ug/mL. Interference: Spectral, ionization, chemical and physical interferences. /[Sodium](#)/

U.S. Department of Health, Education Welfare, Public Health Service. Center for Disease Control, National Institute for Occupational Safety Health. NIOSH Manual of Analytical Methods. 2nd ed. Volumes 1-7. Washington, DC: U.S. Government Printing Office, 1977-present., p. 173-1

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

NIOSH Method: 7300. Analyte: **Sodium**. Matrix: Air. Procedure: Inductively coupled **argon** plasma, atomic emission spectroscopy. For **sodium** this method has an estimated detection limit of 10 ng/mL sample. The precision/RSD and the recovery are not determined. Applicability: The working range of this method is 0.005 to 2.0 mg/cu m for each element in a 500 liter air sample.

Interferences: Spectral interferences. /[Sodium](#)/

U.S. Department of Health and Human Services, Public Health Service. Centers for Disease Control, National Institute for Occupational Safety and Health. NIOSH Manual of Analytical Methods, 3rd ed. Volumes 1 and 2 with 1985 supplement, and revisions. Washington, DC: U.S. Government Printing Office, February 1984., p. 7300-1

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Method 3111-Metals A. Direct Aspiration Atomic Absorption Spectrometry is used for the determination of **sodium** in **water** and wastewater. Using air/**acetylene** as the flame gas at a wavelength of 589.0 nm, the detection limit is 0.002 mg/L, with a sensitivity of 0.015 mg/L, at an optimum concentration range of 0.03-1 mg/l. /[Sodium](#)/

Franson MA, ed; Standard Methods for the Examination of Water and Wastewater, 18th ed p.3-9 (1992)

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Method 3120 A. Emission Spectroscopy for the determination of **sodium** in **water** and wastewater samples using an inductively coupled plasma source. The exact choice of emission line is related to sample matrix and instrumentation. A typically used emission line for **sodium** in **water** is a wavelength of 589.0 nm, with an estimated detection limit of 30 ug/L. /Total **sodium**/

Franson MA, ed; Standard Methods for the Examination of Water and Wastewater, 17th ed p.3-53 (1989)

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Analytic Laboratory Methods (Complete) data for SODIUM CHLORIDE (18 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12 Safety and Hazards ?

12.1 Hazards Identification ?

12.1.1 EPA Safer Chemical ?

Chemical: Sodium chloride

Green circle - The chemical has been verified to be of low concern based on experimental and modeled data.

▶ [EPA Safer Choice](#)

12.1.2 Hazards Summary ?

An eye irritant; Toxic after ingestion of large amounts; [CAMEO]

▶ [Haz-Map, Information on Hazardous Chemicals and Occupational Diseases](#)

12.1.3 Skin, Eye, and Respiratory Irritations ?

If heated to high temperatures, sodium chloride evolves a vapor irritating to the eyes.

Rowe, R.C., Sheskey, P.J., Quinn, M.E.; (Eds.), Handbook of Pharmaceutical Excipients 6th edition Pharmaceutical Press, London, England 2009, p. 639

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.2 Safety and Hazard Properties ?

12.2.1 Explosive Limits and Potential ?

Noncombustible

Lewis, R.J. Sr.; Hawley's Condensed Chemical Dictionary 15th Edition. John Wiley & Sons, Inc. New York, NY 2007, p. 1140

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.3 Fire Fighting ?

12.3.1 Fire Fighting Procedures ?

Suitable extinguishing media: Use [water](#) spray, alcohol-resistant foam, dry chemical or [carbon dioxide](#). Advice for firefighters: Wear self contained breathing apparatus for fire fighting if necessary.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/united-states.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.3.2 Firefighting Hazards ?

... Explosion /occurs when/ ... molten salt /eg, sodium chloride/ at 1100 °C in accidental contact with [water](#) ...

Bretherick, L. Handbook of Reactive Chemical Hazards. 4th ed. Boston, MA: Butterworth-Heinemann Ltd., 1990, p. 984

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.4 Accidental Release Measures ?

12.4.1 Cleanup Methods ?

Personal precautions, protective equipment and emergency procedures: Avoid dust formation. Avoid breathing vapors, mist or gas. Environmental precautions: Do not let product enter drains. Methods and materials for containment and cleaning up: Sweep up and shovel. Keep in suitable, closed containers for disposal.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.4.2 Disposal Methods ?

SRP: The most favorable course of action is to use an alternative chemical product with less inherent propensity for occupational harm/injury/toxicity or environmental contamination. Recycle any unused portion of the material for its approved use or return it to the manufacturer or supplier. Ultimate disposal of the chemical must consider: the material's impact on air quality; potential migration in soil or [water](#); effects on animal and plant life; and conformance with environmental and public health regulations.

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Product: Offer surplus and non-recyclable solutions to a licensed disposal company. Contaminated packaging: Dispose of as unused product.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.4.3 Preventive Measures ?

Provide appropriate exhaust ventilation at places where dust is formed.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

SRP: The scientific literature for the use of contact lenses by industrial workers is inconsistent. The benefits or detrimental effects of wearing contact lenses depend not only upon the substance, but also on factors including the form of the substance, characteristics and duration of the exposure, the uses of other eye protection equipment, and the hygiene of the lenses. However, there may be individual substances whose irritating or corrosive properties are such that the wearing of contact lenses would be harmful to the eye. In those specific cases, contact lenses should not be worn. In any event, the usual eye protection equipment should be worn even when contact lenses are in place.

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Gloves must be inspected prior to use. Use proper glove removal technique (without touching glove's outer surface) to avoid skin contact with this product. Dispose of contaminated gloves after use in accordance with applicable laws and good laboratory practices. Wash and dry hands.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Control of environmental exposure: Do not let product enter drains.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.5 Handling and Storage



12.5.1 Storage Conditions



Bacteriostatic sodium chloride injections should be protected from freezing.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD. 2013, p. 2759

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Keep container tightly closed in a dry and well-ventilated place.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.6 Exposure Control and Personal Protection



12.6.1 Allowable Tolerances



Unless specifically excluded, residues resulting from the use of the following substances as either an inert or an active ingredient in a pesticide chemical formulation, including antimicrobial pesticide chemicals, are exempted from the requirement of a tolerance under FFCA section 408, if such use is in accordance with good agricultural or manufacturing practices. Sodium chloride is included on this list.

40 CFR 180.950 (USEPA); U.S. National Archives and Records Administration's Electronic Code of Federal Regulations. Available from, as of January 2, 2014: <https://www.ecfr.gov/cgi-bin/ECFR?page=browse>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.6.2 Personal Protective Equipment (PPE)



Skin protection: Handle with gloves.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Eye/face protection: Use equipment for eye protection tested and approved under appropriate government standards such as NIOSH (US) or EN 166(EU).

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Respiratory protection: Respiratory protection is not required. Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN 143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU).

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Body Protection: Choose body protection in relation to its type, to the concentration and amount of dangerous substances, and to the specific work-place. The type of protective equipment must be selected according to the concentration and amount of the dangerous substance at the specific workplace.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/safety-center.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.7 Stability and Reactivity



12.7.1 Hazardous Reactivities and Incompatibilities



... /Sodium chloride is/ rapidly attacked by [bromine trifluoride](#) ...

Fire Protection Guide to Hazardous Materials. 13 ed. Quincy, MA: National Fire Protection Association, 2002., p. 491-36

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Reaction with burning **lithium** forms the dangerously reactive **sodium**.

Lewis, R.J. Sr. (ed) *Sax's Dangerous Properties of Industrial Materials*. 11th Edition. Wiley-Interscience, Wiley & Sons, Inc. Hoboken, NJ. 2004., p. 3239

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Sodium chloride extinguishant should no be used on **lithium** fires since the reaction releases **sodium** and results in a more violent fire.

Fire Protection Guide to Hazardous Materials. 13 ed. Quincy, MA: National Fire Protection Association, 2002., p. 491-109

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Electrolysis of sodium chloride in presence of nitrogenous compounds to produce **chlorine** may lead to formation of explosive **nitrogen trichloride**.

Bretherick, L. *Handbook of Reactive Chemical Hazards*. 4th ed. Boston, MA: Butterworth-Heinemann Ltd., 1990, p. 984

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Hazardous Reactivities and Incompatibilities (Complete) data for SODIUM CHLORIDE (8 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.8 Regulatory Information



12.8.1 Federal Drinking Water Guidelines



EPA 250,000 ug/L /**Chloride ion**/

USEPA/Office of Water; Federal-State Toxicology and Risk Analysis Committee (FSTRAC). *Summary of State and Federal Drinking Water Standards and Guidelines (11/93) To Present*

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.8.2 State Drinking Water Guidelines



(CA) CALIFORNIA 250,000 ug/L (Recommended); 500,000 ug/L (Upper); Short-term 600000 ug/l /**Chloride ion**/

USEPA/Office of Water; Federal-State Toxicology and Risk Analysis Committee (FSTRAC). *Summary of State and Federal Drinking Water Standards and Guidelines (11/93) To Present*

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.8.3 FIFRA Requirements



Unless specifically excluded, residues resulting from the use of the following substances as either an inert or an active ingredient in a pesticide chemical formulation, including antimicrobial pesticide chemicals, are exempted from the requirement of a tolerance under FFDC section 408, if such use is in accordance with good agricultural or manufacturing practices. Sodium chloride is included on this list.

40 CFR 180.950 (USEPA); U.S. National Archives and Records Administration's Electronic Code of Federal Regulations. Available from, as of August 30, 2006: <https://www.ecfr.gov/cgi-bin/ECFR?page=browse>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

The Agency has determined that ... sodium chloride products, labeled and used as specified in this Reregistration Eligibility Decision document will not pose unreasonable risks or adverse effects to humans or the environment. Although the Agency has found that all uses of ... sodium chloride are eligible for reregistration, it should be understood that the Agency may take appropriate regulatory action, and/or require the submission of additional data to support the registration of products containing **sodium bromide** and sodium chloride, if new information comes to the Agency's attention or if the data requirements for registration (or the guidelines for generating such data) change.

USEPA/Office of Prevention, Pesticides and Toxic Substances; Reregistration Eligibility Decision Document - Inorganic Halides p.16 (September 1993). Available from, as of February 18, 2014: <https://www.epa.gov/pesticides/reregistration/status.htm>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

As the federal pesticide law FIFRA directs, EPA is conducting a comprehensive review of older pesticides to consider their health and environmental effects and make decisions about their continued use. Under this pesticide reregistration program, EPA examines newer health and safety data for pesticide active ingredients initially registered before November 1, 1984, and determines whether the use of the pesticide does not pose unreasonable risk in accordance to newer safety standards, such as those described in the Food Quality Protection Act of 1996. Pesticides for which EPA had not issued Registration Standards prior to the effective date of FIFRA '88 were divided into three lists based upon their potential for human exposure and other factors, with List B containing pesticides of greater concern than those on List C, and with List C containing pesticides of greater concern than those on List D. Sodium chloride is found on List D. Case No: 4051; Pesticide type: Insecticide (molluscicide), fungicide, herbicide, and antimicrobial; Case Status: RED Approved 09/93; OPP has made a decision that some/all uses of the pesticide are eligible for reregistration, as reflected in a Reregistration Eligibility Decision (RED) document.; Active ingredient (AI): Sodium chloride; AI Status: OPP has completed a Reregistration Eligibility Decision (RED) document for the case/AI.

United States Environmental Protection Agency/ Prevention, Pesticides and Toxic Substances; Status of Pesticides in Registration, Reregistration, and Special Review. (1998) EPA 738-R-98-002, p. 317

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.8.4 FDA Requirements



The Approved Drug Products with Therapeutic Equivalence Evaluations identifies currently marketed prescription and over-the-counter drug products, including sodium chloride, approved on the basis of safety and effectiveness by FDA under sections 505 of the Federal Food, Drug, and Cosmetic Act.

DHHS/FDA; *Electronic Orange Book-Approved Drug Products with Therapeutic Equivalence Evaluations*. Available from, as of February 18, 2014: <https://www.fda.gov/cder/ob/>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Drug products containing certain active ingredients offered over-the-counter (OTC) for certain uses. A number of active ingredients have been present in OTC drug products for various uses, as described below. However, based on evidence currently available, there are inadequate data to establish general recognition of the safety and effectiveness of these ingredients for the specified uses: sodium chloride is included in digestive aid drug products.

21 CFR 310.545(a)(8) (USFDA); U.S. National Archives and Records Administration's Electronic Code of Federal Regulations. Available from, as of January 2, 2014: <https://www.ecfr.gov/cgi-bin/ECFR?page=browse>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Drug products containing certain active ingredients offered over-the-counter (OTC) for certain uses. A number of active ingredients have been present in OTC drug products for various uses, as described below. However, based on evidence currently available, there are inadequate data to establish general recognition of the safety and effectiveness of these ingredients for the specified uses: sodium chloride is included in weight control drug products.

21 CFR 310.545(a)(8) (USFDA); U.S. National Archives and Records Administration's Electronic Code of Federal Regulations. Available from, as of January 2, 2014: <https://www.ecfr.gov/cgi-bin/ECFR?page=browse>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.9 Other Safety Information

12.9.1 Toxic Combustion Products

Special hazards arising from the substance or mixture: **Hydrogen chloride** gas, Sodium oxides.

Sigma-Aldrich; Material Safety Data Sheet for Sodium Chloride, Product Number: S9888, Version 5.3 (Revision Date 2/24/2014). Available from, as of March 28, 2014: <https://www.sigmaaldrich.com/united-states.html>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.9.2 History and Incidents

Accidental substitution of sodium chloride for **lactose** in baby formulas has caused fatal poisoning.

Budavari, S. (ed.). *The Merck Index - Encyclopedia of Chemicals, Drugs and Biologicals*. Rahway, NJ: Merck and Co., Inc., 1989, p. 1359

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

12.9.3 Special Reports

USEPA/Office of Prevention, Pesticides and Toxic Substances; Reregistration Eligibility Decision Document - Inorganic Halides (September 1993). The RED summarizes the risk assessment conclusions and outlines any risk reduction measures necessary for the pesticide to continue to be registered in the U.S. [Available from, as of February 18, 2014: <http://www.epa.gov/pesticides/reregistration/status.htm>]

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

MacGregor GA; Salt and Hypertension. *Br J Clin Pharmacol* 21 (Suppl 2): 123S-8S (1986). The effectiveness of short term salt restriction in lowering blood pressure in adults appears to be related to the severity of the high blood pressure and, probably more directly, to the suppression of the renin system that occurs as blood pressure rises.

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

13 Toxicity



13.1 Toxicological Information



13.1.1 Toxicity Summary



The rare inadvertent intravascular administration or rapid intravascular absorption of hypertonic sodium chloride can cause a shift of tissue fluids into the vascular bed, resulting in hypervolemia, electrolyte disturbances, circulatory failure, pulmonary embolism, or augmented hypertension.

▶ [DrugBank](#)

A high salt diet disrupts the natural [sodium](#) balance in the body. This causes fluid retention which increases the pressure exerted by the blood against blood vessel walls leading to high blood pressure or hypertension. It has been estimated that a reduction in salt intake from 10g a day to 6g could reduce blood pressure sufficiently that it would lead to a 16% reduction in deaths from strokes and a 12% reduction in deaths from coronary heart disease.

▶ [Toxin and Toxin Target Database \(T3DB\)](#)

13.1.2 Carcinogen Classification



Carcinogen Classification	Not listed by IARC.
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▶ [Toxin and Toxin Target Database \(T3DB\)](#)

13.1.3 Health Effects



Too much or too little salt in the diet can lead to muscle cramps, dizziness, or electrolyte disturbance, which can cause neurological problems, or even death. Death can occur by ingestion of large amounts of salt in a short time (about 1 g per kg of body weight). Deaths have also resulted from attempted use of salt solutions as emetics, forced salt intake, and accidental confusion of salt with sugar in child food. Long term or chronically excessive intake of salt can lead to stroke, high blood pressure, left ventricular hypertrophy and stomach cancer.

▶ [Toxin and Toxin Target Database \(T3DB\)](#)

13.1.4 Symptoms



Acute salt overdoses can lead to muscle cramps, dizziness or neurological conditions.

▶ [Toxin and Toxin Target Database \(T3DB\)](#)

13.1.5 Acute Effects



▶ [ChemIDplus](#)

13.1.6 Toxicity Data



LC50 (rat) = 42,000 mg/m3/1H

▶ [Haz-Map, Information on Hazardous Chemicals and Occupational Diseases](#)

The World Health Organization recommends that all adults should consume less than 2,000 mg of [sodium](#) (which is equivalent to 5 g of salt) per day.

▶ [Toxin and Toxin Target Database \(T3DB\)](#)

13.1.7 Interactions



The excretion of [lithium](#) appears to be proportional to the intake of sodium chloride. Patients on salt-restricted diets who receive [lithium carbonate](#) are prone to the development of [lithium](#) toxicity. Increasing [sodium](#) intake has been associated with reduced therapeutic response to [lithium](#) as well as a decrease in side effects. Large doses of sodium chloride increase [lithium](#) excretion and have been recommended by some for the treatment of [lithium](#) intoxication.

Hansten P.D. Drug Interactions. 5th ed. Philadelphia: Lea and Febiger, 1985., p. 413

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

/LABORATORY ANIMALS: Chronic Exposure or Carcinogenicity/ Effects were studied of sodium chloride on production of gastric carcinomas by **4-nitroquinoline-1-oxide** in male Wistar rats. NaCl given alone had no apparent carcinogenicity but when admin with **4-nitroquinoline-1-oxide** it enhanced carcinogenic effects in stomach.

PMID:808633

TATEMATSU M ET AL; J NATL CANCER INST 55 (1): 101 (1975)

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

EFFECTS were studied of sodium chloride on production of gastric carcinomas by **4-nitroquinoline-1-oxide** in male Wistar rats. NaCl given alone had no apparent carcinogenicity but when admin with **4-nitroquinoline-1-oxide** it enhanced carcinogenic effects in stomach.

PMID:808633

TATEMATSU M ET AL; J NATL CANCER INST 55 (1): 101 (1975)

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

IV administration of **terbutaline** at a rate of 5-20 microgram/minute (ug/min) has been reported to inhibit uterine activity initiated by intra-amniotic instillation of 20% sodium chloride. **Indomethacin**, in doses of 25 mg orally every 6 hours for 8 doses beginning 4-6 hours after intra-amniotic instillation of sodium chloride, has been reported to increase the time interval between intra-amniotic administration of hypertonic sodium chloride and abortion.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD. 2013, p. 3323

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Interactions (Complete) data for SODIUM CHLORIDE (6 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

13.1.8 Antidote and Emergency Treatment



/VET:/There is no specific treatment /for salt toxicity (**water** deprivation **sodium ion** toxicosis)/. Immediate removal of offending feed or **water** is imperative. Fresh **water** must be provided to all animals, initially in small amounts at frequent intervals. Ingestion of large amounts of **water** may exacerbate neurologic signs due to brain edema. Severely affected animals should be given **water** via stomach tube. The mortality rate may be >50% in affected animals regardless of treatment. In small animals, slow administration of hypertonic **dextrose** or isotonic saline may be useful.

McEvoy, G.K. (ed.). American Hospital Formulary Service. AHFS Drug Information. American Society of Health-System Pharmacists, Bethesda, MD. 2006., p. 2515

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

In acute salt poisoning with serum **sodium** levels greater than 180 mEq/L, removal of excess sodium chloride by means of dialysis improves the outcome. Hemodialysis or peritoneal dialysis with a 4.25% **glucose** solution can effectively lower **sodium** levels and limit the severity of symptoms.

Haddad, L.M. (Ed). Clinical Management of Poisoning and Drug Overdose 3rd Edition. Saunders, Philadelphia, PA. 1998., p. 42

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Management should be directed at restoring normal osmolality and fluid volume. The speed of correction depends on the rate of development and the accompanying toxicity. Chronic hypernatremia requires a rate of correction of the **sodium** level that should not exceed 0.7 mEq/L/hour or approximately 10% of the serum **sodium** per day and correction of the fluid deficit over 48 to 96 hours. Rapid correction offers no advantage and may cause cerebral edema.

Dart, R.C. (ed). Medical Toxicology. Third Edition, Lippincott Williams & Wilkins. Philadelphia, PA. 2004., p. 1058

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Treatment depends on the cause, but in most cases, the patient is hypovolemic and needs fluids. Caution: Do not reduce the serum **sodium** level too quickly because osmotic imbalance may cause excessive fluid shift into brain cells, resulting in cerebral edema. The correction should take place over 24-36 hours; the serum **sodium** should be lowered about 1 mEq/hr. /Treatment of hypernatremia/

OLSON, K.R. (Ed). Poisoning and Drug Overdose, Sixth Edition. McGraw-Hill, New York, NY 2012, p. 36

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

For more Antidote and Emergency Treatment (Complete) data for SODIUM CHLORIDE (6 total), please visit the [HSDB record page](#).

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

13.1.9 Human Toxicity Excerpts



/SIGNS AND SYMPTOMS/ The oral ingestion of larger quantities of sodium chloride, eg 1000 g in 600 mL of **water**, is harmful and can induce irritation of the gastrointestinal tract, vomiting, hypernatremia, respiratory distress, convulsions, and death.

Rowe, R.C., Sheskey, P.J., Quinn, M.E.; (Eds.), Handbook of Pharmaceutical Excipients 6th edition Pharmaceutical Press, London, England 2009, p. 639

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

/SIGNS AND SYMPTOMS/ The GI effects of oral salt administration include swollen tongue, nausea, vomiting, diarrhea, abdominal cramps, and thirst. Neurologic effects include thirst, irritability, weakness, headache, convulsions, and coma. Cerebral edema may occur, and muscle tremors may be noted. Cardiovascular manifestations of acute hypernatremia include both hypertension and hypotension. Tachycardia, cardiac failure, and peripheral edema may develop. Pulmonary edema and respiratory arrest may occur.

Dart, R.C. (ed). Medical Toxicology. Third Edition, Lippincott Williams & Wilkins. Philadelphia, PA. 2004., p. 1058

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

/SIGNS AND SYMPTOMS/ Sodium chloride at concentrations much above that in tears causes a stinging sensation on contact with the eye. Solutions up to 10% do not alter the permeability of the corneal epithelium, but solutions more dilute than 0.9% sodium chloride cause increased permeability.

Grant, W.M. Toxicology of the Eye. 3rd ed. Springfield, IL: Charles C. Thomas Publisher, 1986., p. 830

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

/SIGNS AND SYMPTOMS/ Hypertonic salt solutions can produce ... a distinctive microscopic lesion of the kidney ... parenchymatous dehydration produces a shrinking which is most conspicuous in the convoluted tubules of the renal cortex. Some experimental evidence suggests that similar hypernatremic syndromes may be produced with normal salt diets if **water** intake is restricted.

Gosselin, R.E., R.P. Smith, H.C. Hodge. Clinical Toxicology of Commercial Products. 5th ed. Baltimore: Williams and Wilkins, 1984., p. 11-126

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

For more Human Toxicity Excerpts (Complete) data for SODIUM CHLORIDE (19 total), please visit the [HSDB record page](#).

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

13.1.10 Non-Human Toxicity Excerpts



/LABORATORY ANIMALS: Acute Exposure/ Sodium chloride at concentrations much above that in tears causes a stinging sensation on contact with the eye. Solutions up to 10% do not alter the permeability of the corneal epithelium, but solutions more dilute than 0.9% sodium chloride cause increased permeability. On rabbit eyes continuous irrigation for three hr with sodium chloride solutions from 0.3 to 0.6 M and pH 6.0 to 8.0 has produced no morphologic change in the corneas.

Grant, W.M. Toxicology of the Eye. 3rd ed. Springfield, IL: Charles C. Thomas Publisher, 1986., p. 830

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

/LABORATORY ANIMALS: Acute Exposure/ Intracarotid injection of 2 M sodium chloride solution in cats rapidly produces cataract on the same side.

Grant, W.M. Toxicology of the Eye. 3rd ed. Springfield, IL: Charles C. Thomas Publisher, 1986., p. 830

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

/LABORATORY ANIMALS: Acute Exposure/ Subconjunctival injection of hypertonic sodium chloride solutions has long been known to cause hyperemia and a transitory rise of intraocular pressure in rabbit ... eyes.

Grant, W.M. Toxicology of the Eye. 3rd ed. Springfield, IL: Charles C. Thomas Publisher, 1986., p. 830

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

/LABORATORY ANIMALS: Acute Exposure/ Hypertonic sodium chloride (NaCl) infused into the carotid arteries increases arterial blood pressure (AP) and changes sympathetic nerve activity (SNA) via cerebral mechanisms. /The researchers/ hypothesized that elevated sodium levels in the blood supply to the brain would induce differential responses in renal and cardiac SNA via sensors located outside the blood-brain barrier. To investigate this hypothesis we measured renal and cardiac SNA simultaneously in conscious sheep during intracarotid (IC) infusions of NaCl (1.2 M), sorbitol (2.4 M) or urea (2.4 M) at 1 mL/min up each carotid. IC NaCl significantly increased AP (91 + or - 2 to 97 + or - 3 mmHg, p<0.05) without changing heart rate (HR). IC NaCl was associated with no change in cardiac SNA (11 + or - 5.0%), but a significant inhibition of renal SNA (-32.5 + or - 6.4%, p<0.05). Neither IC sorbitol nor urea changed AP, HR, CVP or cardiac and renal SNA. The changes in AP and renal SNA were completely abolished by microinjection of the GABA agonist muscimol (5mM, 500nL) into the paraventricular nucleus of the hypothalamus (PVN). Infusion of IC NaCl for 20 min stimulated a larger increase in water intake (1100 + or - 75 mL) than IC sorbitol (683 + or - 125 mL) or IC urea (0 mL). These results demonstrate that acute increases in blood sodium levels cause a decrease in renal but no change in cardiac SNA in conscious sheep. These effects are mediated by cerebral sensors located outside the blood-brain barrier that are more responsive to changes in sodium concentration than osmolality. The renal sympatho-inhibitory effects of sodium are mediated via a pathway that synapses in the PVN.

PMID:24523342

Full text: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4043129>

Frithiof R et al; Am J Physiol Regul Integr Comp Physiol. 2014 Feb 12. (Epub ahead of print)

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

For more Non-Human Toxicity Excerpts (Complete) data for SODIUM CHLORIDE (18 total), please visit the [HSDB record page](#).

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

13.1.11 Human Toxicity Values



The estimated fatal dose of sodium chloride is approximately 0.75 to 3.00 g/kg.

Dart, R.C. (ed). Medical Toxicology. Third Edition, Lippincott Williams & Wilkins. Philadelphia, PA. 2004., p. 1057

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

An estimated dose of more than 400 mEq/kg resulted in brain injury and death in a 2 year old child given a salt water solution to induce emesis.

Dart, R.C. (ed). Medical Toxicology. Third Edition, Lippincott Williams & Wilkins. Philadelphia, PA. 2004., p. 1057

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

13.1.12 Non-Human Toxicity Values



LD50 Rat oral 3000 mg/kg

Lewis, R.J. Sr. (ed) Sax's Dangerous Properties of Industrial Materials. 11th Edition. Wiley-Interscience, Wiley & Sons, Inc. Hoboken, NJ. 2004., p. 3238

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

LD50 Mouse intracervical 131 mg/kg

Lewis, R.J. Sr. (ed) Sax's Dangerous Properties of Industrial Materials. 11th Edition. Wiley-Interscience, Wiley & Sons, Inc. Hoboken, NJ. 2004., p. 3238

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

LD50 Mouse iv 645 mg/kg

Lewis, R.J. Sr. (ed) Sax's Dangerous Properties of Industrial Materials. 11th Edition. Wiley-Interscience, Wiley & Sons, Inc. Hoboken, NJ. 2004., p. 3238

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

LD50 Mouse ip 6614 mg/kg

Lewis, R.J. Sr. (ed) Sax's Dangerous Properties of Industrial Materials. 11th Edition. Wiley-Interscience, Wiley & Sons, Inc. Hoboken, NJ. 2004., p. 3238

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

For more Non-Human Toxicity Values (Complete) data for SODIUM CHLORIDE (6 total), please visit the [HSDB record page](#).

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

13.1.13 Ecotoxicity Values



LC50; Species: Ceriodaphnia dubia ([Water](#) flea); Conditions: freshwater, renewal, temp 25.6-26.8 °C, pH 8.4 (8.3-8.5), hardness 102 mg/L CaCO₃ (94-104 mg/L), salinity <1 ppt, alkalinity 80 mg/L CaCO₃ (75-87 mg/L), conductivity 493 umhos/cm (460-550 umhos/cm), dissolved oxygen 8.6 mg/L (8.3-9.6 mg/L); Concentration: ~ 2000 mg/L for 192 hr /total/
Cowgill UM, Milazzo DP; Bull Environ Contam Toxicol 46 (1): 36-40 (1991) Available from, as of November 21, 2006

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

EC50; Species: Ceriodaphnia dubia ([Water](#) flea); Conditions: freshwater; Concentration: 2122.55 mg/L (95% confidence limit: 1493 to 2644 mg/L) for 48 hr; Effect: intoxication, immobilization /total/
Warne MSJ, Schifko AD; Ecotoxicol Environ Saf 44 (2): 196-206 (1999) Available from, as of November 21, 2006

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

LC50; Species: Ceriodaphnia dubia ([Water](#) flea); Conditions: freshwater, renewal; Concentration: 280000 ug/L for 7 day /total/
DeGraeve GM et al; Environ Toxicol Chem 11 (6): 851-866 (1992) Available from, as of November 21, 2006

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

LC50; Species: Ceriodaphnia dubia ([Water](#) flea); Conditions: freshwater, static; Concentration: 1960000 ug/L (95% confidence limit: 1770000 to 2330000 ug/L) for 48 hr /total/
Mount DR et al; Environ Toxicol Chem 16 (10): 2009-2019 (1997) Available from, as of November 21, 2006

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

For more Ecotoxicity Values (Complete) data for SODIUM CHLORIDE (45 total), please visit the [HSDB record page](#).

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

13.1.14 Ecotoxicity Excerpts



/BIRDS and MAMMALS/ In the field the possibility of birds dying from salt intoxication depends to a large extent on the form in which the salt has been ingested ... Birds appear to be susceptible to relatively small doses in their drinking [water](#), concentrations as low as 0.54% causing serious mortality in day old chicks. The maximum safe level is of the order of 0.25%.

Clarke, M. L., D. G. Harvey and D. J. Humphreys. Veterinary Toxicology. 2nd ed. London: Bailliere Tindall, 1981., p. 40

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

/BIRDS and MAMMALS/ The use of sodium chloride as a deicing agent on roads is believed to intoxicate passerine birds.

Gupta, R. C. (ed.) Veterinary Toxicology: Basic and Clinical Principles. 1st ed. New York, NY, p.673 (2007)

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

/AQUATIC SPECIES/ This study presents a preliminary evaluation of the use of the Brazilian fish *Cynopoeilus melanotaenia* as a test organism in toxicity tests. The cryptobiotic stage presented by the eggs of fish *C. melanotaenia* can overcome the difficulty of continuously keeping cultures and recruiting healthy animals in sufficient numbers to be used in toxicity tests. In order to determine the applicability of this species as a test organism, three different reference substances were evaluated in 96-hr acute toxicity tests: [Copper sulfate](#) (CuSO₄ × 5H₂O), [sodium dodecil sulfate](#) (C₁₂H₂₅NaO₄S), and sodium chloride (NaCl). Sensitivity ranged as follows: [copper sulfate](#) (0.05-0.13 mg/L), [sodium dodecil sulfate](#) (10.7-19.0 mg/L), and sodium chloride (1.44-1.96 g/L) ...

PMID:12959549

Arenzon A et al; Environ Toxicol Chem 22 (9): 2188-90 (2003)

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

/AQUATIC SPECIES/ Field and laboratory experiments were conducted to examine the effects of road salt (NaCl) on stream macroinvertebrates. Field studies investigated leaf litter processing rates and functional feeding group composition at locations upstream and downstream from point source salt inputs in two Michigan, USA streams. Laboratory studies determined the effects of increasing NaCl concentrations on aquatic invertebrate drift, behavior, and survival. Field studies revealed that leaves were processed faster at upstream reference sites than at locations downstream from road salt point source inputs. However, it was sediment loading that resulted in partial or complete burial of leaf packs, that affected invertebrate activity and confounded normal leaf pack colonization. There were no significant differences that could be attributed to road salt between upstream and downstream locations in the diversity and composition of invertebrate functional feeding groups. Laboratory drift and acute exposure studies demonstrated that drift of Gammarus (Amphipoda) may be affected by NaCl at concentrations greater than 5000 mg/L for a 24-hr period. This amphipod and two species of limnephilid caddisflies exhibited a dose response to salt treatments with 96-hr LC50 values of 7700 and 3526 mg NaCl/L, respectively. Most other invertebrate species and individuals were unaffected by NaCl concentrations up to 10,000 mg/L for 24 and 96 hr, respectively.

PMID:12395833

Blasius BJ et al; Environ Pollut 120 (2): 219-31 (2002)

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

13.1.15 Ongoing Test Status



The following link will take the user to the National Toxicology Program (NTP) Test Agent Search Results page, which tabulates all of the "Standard Toxicology & Carcinogenesis Studies", "Developmental Studies", and "Genetic Toxicity Studies" performed with this chemical. Clicking on the "Testing Status" link will take the user to the status (i.e., in review, in progress, in preparation, on test, completed, etc.) and results of all the studies that the NTP has done on this chemical.[Available from, as of February 18, 2014: http://ntp-apps.niehs.nih.gov/ntp_tox/index.cfm?fuseaction=ntpsearch.searchresults&searchterm=7647-14-5]

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

13.1.16 Populations at Special Risk



Sodium chloride is contraindicated in patients with conditions in which administration of [sodium](#) and [chloride](#) is detrimental. Sodium chloride 3 and 5% injections are also contraindicated in the presence of increased, normal, or only slightly decreased serum electrolyte concentrations.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD, 2013, p. 2759

[▶ Hazardous Substances Data Bank \(HSDB\)](#)

Sodium chloride should be used with extreme caution, if at all, in patients with congestive heart failure or other edematous or **sodium**-retaining conditions, in patients with severe renal insufficiency, in patients with liver cirrhosis, and in patients receiving corticosteroids or corticotropin; particular caution is necessary in geriatric or postoperative patients. IV administration of sodium chloride may cause fluid and/or solute overload resulting in dilution of serum electrolytes, overhydration, congestive conditions, or pulmonary edema. The risk of dilutional conditions is inversely proportional to the electrolyte concentration administered, and the risk of solute overload and resultant congestive conditions with peripheral and/or pulmonary edema is directly proportional to the electrolyte concentration administered. The manufacturers warn that excessive IV administration of sodium chloride may result in hypokalemia.

American Society of Health-System Pharmacists 2013; Drug Information 2013. Bethesda, MD. 2013, p. 2759

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

13.1.17 Protein Binding



Sodium is not bound by plasma proteins.

▶ [DrugBank](#)

13.2 Ecological Information



13.2.1 Natural Pollution Sources



Sodium chloride, commonly known as salt, table salt, and sea salt, is abundant in nature(1).

(1) USEPA/OPPTS; Reregistration Eligibility Decisions (REDs) Database on Inorganic Halides. LIST D, Case 4051. Available from, as of Dec 30, 2013: <https://www.epa.gov/pesticides/reregistration/status.htm>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Ocean **water**: 2.6% concentration; deposits in central New York, southern Michigan, Gulf Coast, Great Salt Lake, Newfoundland.

Lewis, R.J. Sr.; Hawley's Condensed Chemical Dictionary 15th Edition. John Wiley & Sons, Inc. New York, NY 2007., p. 1140

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

Sodium chloride occurs in nature as the mineral halite.

O'Neil, M.J. (ed.). The Merck Index - An Encyclopedia of Chemicals, Drugs, and Biologicals. Cambridge, UK: Royal Society of Chemistry, 2013., p. 1596

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

In the Western hemisphere, there are 10 principal salt beds: (1) the Maritime provinces of eastern Canada; (2) Appalachian (New York, Ohio, and Ontario); (3) Michigan (Michigan and Ontario); (4) Williston (North and South Dakota, Montana, and Saskatchewan); (5) Alberta (northern and eastern Alberta); (6) Mackenzie (Northwest Territories); (7) Permian (west Texas, New Mexico, Oklahoma, and Kansas); (8) Paradox (southeast Utah and southwest Colorado); (9) Supai (New Mexico and Arizona); and (10) the Gulf region (southern United States, eastern Mexico, and Cuba... These bedded deposits are found with layers of halite separated by layers of anhydrite (**calcium sulfate**). Other mineral impurities that have been identified in salt formations include shale, **iron** pyrites, and silica.

Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

13.2.2 Other Environmental Concentrations



Environmental effects of elevated salinity levels resulting from use of salt are highly site-specific. Deicing salt can be used to ensure traffic safety and mobility without causing environmental harm by implementing sensible salting techniques and recommending the planting of salt-tolerant trees, grasses, and shrubs along roadsides. Automobile manufacturers have improved vehicle construction and materials, such as using more plastics, to such a degree that car warranties for corrosion perforation in 2000 model year cars sold in the USA ranged from 4 to 12 years. Highway and bridge structures are lasting longer due to improved construction design and materials, such as epoxy-coated reinforced steel concrete and use of high quality air-entrained concrete(1).

(1) Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

13.2.3 Probable Routes of Human Exposure



According to the 2006 **TSCA** Inventory Update Reporting data, the number of persons reasonably likely to be exposed in the industrial manufacturing, processing, and use of sodium chloride is 1000 or greater; the data may be greatly underestimated(1).

(1) US EPA; Inventory Update Reporting (IUR). Non-confidential 2006 IUR Records by Chemical, including Manufacturing, Processing and Use Information. Washington, DC: U.S. Environmental Protection Agency. Available from, as of Dec 30, 2013: <https://cfpub.epa.gov/iursearch/index.cfm>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

NIOSH (NOES Survey 1981-1983) has statistically estimated that 1,747,983 workers (819,264 of these were female) were potentially exposed to sodium chloride in the US(1). The NOES Survey does not include farm workers. Occupational exposure to sodium chloride may occur through inhalation and dermal contact with this compound at workplaces where sodium chloride is produced or used. Use data indicate that the general population may be exposed to sodium chloride via ingestion of food and drinking **water**, and dermal contact with consumer products containing sodium chloride(SRC).

(1) NIOSH; NOES. National Occupational Exposure Survey conducted from 1981-1983. Estimated numbers of employees potentially exposed to specific agents by 2-digit standard industrial classification (SIC). Available from, as of Dec 30, 2013: <https://www.cdc.gov/noes/>

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

13.2.4 Average Daily Intake



Most of the world's population chooses to consume approximately 6,000 to 11,000 mg of sodium chloride a day. The average daily **sodium** intake from all sources is 3,450 mg (8,770 mg sodium chloride). The GRAS review of the FDA publishes the amount of naturally occurring **sodium** in the American diet as 1,000 to 1,500 mg/day, equivalent to the amount of **sodium** in approximately 2,500 to 3,800 mg sodium chloride. The average daily intake of sodium chloride from food-grade salt used in food processing and from salt added to cooking and at the table is from 4,960 to 6,230 mg sodium chloride. Salt is a requirement in the diet. The safe and adequate intake for adults is reported as 1,875 to 5,625 mg. The National Academies recommends that Americans consume a minimum of 500 mg/day of **sodium** to maintain good health(1).

(1) Feldman SR et al; Sodium Chloride. Kirk-Othmer Encyclopedia of Chemical Technology. (1999-2013). New York, NY: John Wiley & Sons. Online Posting Date: 14 Oct 2011

▶ [Hazardous Substances Data Bank \(HSDB\)](#)

14 Associated Disorders and Diseases



▶ [Comparative Toxicogenomics Database \(CTD\)](#)

▶ [Therapeutic Target Database \(TTD\)](#)

15 Literature



15.1 NLM Curated PubMed Citations



► PubChem

15.2 Springer Nature References



► Springer Nature

15.3 Thieme References



► Thieme Chemistry

15.4 Depositor Provided PubMed Citations



▶ PubChem

15.5 General References



1. ChemIDplus
2. Pubchem

▶ DrugBank

15.6 Chemical Co-Occurrences in Literature



▶ PubChem

15.7 Chemical-Gene Co-Occurrences in Literature



▶ PubChem

15.8 Chemical-Disease Co-Occurrences in Literature



► PubChem

16 Patents



US5945449	US10646512
US7300674	US10792306
US6077836	US10780112
US6248726	US10918723
US7291324	
US7169381	
US7658914	
US7084130	
US9326969	
US9592252	
US9707297	
US8999313	
US10016504	

[▶ DrugBank](#)

16.1 Depositor-Supplied Patent Identifiers

[▶ PubChem](#)[Link to all deposited patent identifiers](#)[▶ PubChem](#)

16.2 WIPO PATENTSCOPE



Patents are available for this chemical structure:

<https://patentscope.wipo.int/search/en/result.jsf?inchikey=FAPWRFPIFSIZLT-UHFFFAOYSA-M>[▶ PATENTSCOPE \(WIPO\)](#)

16.3 FDA Orange Book Patents

Showing 3 of 13 [View More](#)

Patent	7169381
Expiration	Sep 1, 2024
Applicant	SALIX PHARMS
Drug Application	N021881 (Prescription Drug: MOVIPREP. Ingredients: ASCORBIC ACID POLYETHYLENE GLYCOL 3350 POTASSIUM CHLORIDE SODIUM ASCORBATE SODIUM CHLORIDE SODIUM SULFATE)

[▶ FDA Orange Book](#)

Patent	7291324
Expiration	Oct 22, 2022
Applicant	BRAINTREE
Drug Application	N021551 (Prescription Drug: HALFLYTELY. Ingredients: BISACODYL POLYETHYLENE GLYCOL 3350 POTASSIUM CHLORIDE SODIUM BICARBONATE SODIUM CHLORIDE)

[▶ FDA Orange Book](#)

Patent	7300674
Expiration	Mar 4, 2023
Applicant	DIALYSIS SUPS
Drug Application	N021910 (Prescription Drug: NORMOCARB HF 25. Ingredients: MAGNESIUM CHLORIDE SODIUM BICARBONATE SODIUM CHLORIDE) N021910 (Prescription Drug: NORMOCARB HF 35. Ingredients: MAGNESIUM CHLORIDE SODIUM BICARBONATE SODIUM CHLORIDE)

17 Interactions and Pathways



17.1 Chemical-Target Interactions



► [Comparative Toxicogenomics Database \(CTD\)](#); [Drug Gene Interaction database \(DGIdb\)](#); [Therapeutic Target Database \(TTD\)](#); [Toxin and Toxin Target Database \(T3DB\)](#)

17.2 Drug-Drug Interactions



► [DrugBank](#)

17.3 Pathways



► [PubChem](#)

18 Biological Test Results



18.1 BioAssay Results



► PubChem

19 Classification



19.1 MeSH Tree



► Medical Subject Headings (MeSH)

19.2 NCI Thesaurus Tree



► NCI Thesaurus (NCIt)

19.3 ChEBI Ontology



► ChEBI

19.4 KEGG: Drug



▶ KEGG

19.5 KEGG: USP



▶ KEGG

19.6 KEGG: ATC



▶ KEGG

19.7 KEGG: JP15



▶ KEGG

19.8 KEGG: Risk Category of Japanese OTC Drugs



▶ KEGG

19.9 KEGG: OTC drugs



▶ KEGG

19.10 KEGG: Animal Drugs



Showing 1 of 1

Animal drugs in Japan >

[Sodium chloride](#)

▶ KEGG

19.11 WHO ATC Classification System



Showing 4 of 4

ATC Code > A - Alimentary tract and metabolism > A12 - Mineral supplements > A12C - Other mineral supplements > A12CA - Sodium >

[A12CA01 - Sodium chloride](#)

ATC Code > B - Blood and blood forming organs > B05 - Blood substitutes and perfusion solutions > B05C - Irrigating solutions > B05CB - Salt solutions >

[B05CB01 - Sodium chloride](#)

ATC Code > B - Blood and blood forming organs > B05 - Blood substitutes and perfusion solutions > B05X - I.v. solution additives > B05XA - Electrolyte solutions >

[B05XA03 - Sodium chloride](#)

ATC Code > S - Sensory organs > S01 - Ophthalmologicals > S01X - Other ophthalmologicals > S01XA - Other ophthalmologicals >

[S01XA03 - Sodium chloride, hypertonic](#)

▶ WHO Anatomical Therapeutic Chemical (ATC) Classification

19.12 EPA Safer Choice



[▶ EPA Safer Choice](#)

19.13 ChemIDplus

[▶ ChemIDplus](#)

19.14 ChEMBL Target Tree



Showing 2 of 2

[ChEMBL Protein Target Tree](#) > [Enzyme](#) > [Protease](#) > [Serine protease](#) > [Serine protease PA clan](#) >**Serine protease S1A subfamily**

A serine endopeptidase secreted by the pancreas as its zymogen, CHYMOTRYPSINOGEN and carried in the pancreatic juice to the duodenum where it is activated by TRYPsin. It selectively cleaves aromatic amino acids on the carboxyl side. [MESH:D002918]

[ChEMBL Protein Target Tree](#) > [Enzyme](#) >**Lyase**

A group of enzymes that catalyze the breaking of a chemical bond by means other than hydrolysis or oxidation

[▶ ChEMBL](#)

19.15 EPA CPDat Classification

Showing 5 of 171 [View More](#) [EPA CPDat Classification](#) > [Functional Use](#) > [OECD Functional Use](#) >**abrasive**[EPA CPDat Classification](#) > [Functional Use](#) > [OECD Functional Use](#) >**adhesion/cohesion promoter**[EPA CPDat Classification](#) > [Functional Use](#) > [OECD Functional Use](#) >**anticaking agent**[EPA CPDat Classification](#) > [Functional Use](#) > [OECD Functional Use](#) >**biocide**[EPA CPDat Classification](#) > [Functional Use](#) > [OECD Functional Use](#) >**chelating agent**[▶ EPA Chemical and Products Database \(CPDat\)](#)

19.16 NORMAN Suspect List Exchange Classification

Showing 5 of 40 [View More](#) [NORMAN Suspect List Exchange Classification](#) > [S13 | EUCOSMETICS | Combined Inventory of Ingredients Employed in Cosmetic Products \(2000\) and Revised Inventory \(2006\)](#) >**Bulking**[NORMAN Suspect List Exchange Classification](#) > [S13 | EUCOSMETICS | Combined Inventory of Ingredients Employed in Cosmetic Products \(2000\) and Revised Inventory \(2006\)](#) >**Viscosity controlling**[NORMAN Suspect List Exchange Classification](#) >**S32 | REACH2017 | 2017 List of REACH Chemicals**

A 2017 list of REACH chemicals including InChIKeys and spectral information, provided by N. Alygizakis and J. Slobodnik, EI. Dataset DOI:10.5281/zenodo.2653020

[NORMAN Suspect List Exchange Classification](#) >

S77 | FCCDB | Food Contact Chemicals Database v5.0

The Food Contact Chemicals database (FCCdb, DOI:10.5281/zenodo.3240108) is a compilation of information on over 12,000 intentionally added food contact chemicals extracted from publicly available sources such as legislation or industry inventories for different types of food contact materials and selected sources of hazard information, as described by Groh et al. 2021 (see DOI:10.1016/j.envint.2020.106225). Structural information for ~6000 entries where clear mappings could be found was added by P. Chirsir into FCCdb Version 5, prior to hosting it on the NORMAN Suspect List Exchange (see Dataset DOI:10.5281/zenodo.4625495). Further detailed descriptions for each sub-category in the classification tree can be found in the ReadMe tab of the FCCdb spreadsheet file, or in the respective sub-category tooltips ("?" boxes).

NORMAN Suspect List Exchange Classification >

S37 | LITMINEDNEURO | Neurotoxins from literature mining PubMed

A list of chemicals associated with neurotoxicity compiled through systematic literature mining of PubMed using MeSH terms, compiled by Nancy Baker, Antony Williams (US EPA) and Emma Schymanski (LCSB), details in Schymanski et al. 2019, DOI:10.1039/C9EM00068B. Dataset DOI:10.5281/zenodo.2653214

[▶ NORMAN Suspect List Exchange](#)

19.17 EPA DSSTox Classification

Showing 5 of 52 [View More](#)

CompTox Chemicals Dashboard Chemical Lists > LIST >

[ACSREAG] LIST: ACS Reagent Chemicals

Short_Description: The ACS Committee on Analytical Reagents sets purity specifications for almost 500 reagent chemicals and over 500 standard-grade reference materials.

Long_Description: The ACS Committee on Analytical Reagents sets purity specifications for almost 500 reagent chemicals and over 500 standard-grade reference materials. These specifications have become the de facto standards for chemicals used in many high-purity applications. In addition to detailing these specifications, ACS Reagent Chemicals provides general physical properties and analytical uses for all reagent chemicals as well as guidelines for standard analytical methods. The online book is available at <https://pubs.acs.org/isbn/9780841230460>

CompTox Chemicals Dashboard Chemical Lists > WATER >

[CALWATERBDS] WATER: California Water Boards Additive Information

Short_Description: California Central Valley water board oil field additive constituents list

Long_Description: California Central Valley water board oil field additive constituents list (Additive Information Updated June 2018)

CompTox Chemicals Dashboard Chemical Lists > LIST >

[CANADADSL] Canadian Domestic Substances List 2019

Short_Description: The domestic substances list (DSL) is the sole standard against which a substance is judged to be "new" to Canada.

Long_Description: On May 4, 1994, Environment and Climate Change Canada published the domestic substances list (DSL) in Part II of the Canada Gazette. The DSL is an inventory of approximately 23 000 substances manufactured in, imported into or used in Canada on a commercial scale. It is based on substances present in Canada, under certain conditions, between January 1, 1984 and December 31, 1986. The DSL is the sole standard against which a substance is judged to be "new" to Canada. With few exemptions, all substances not on this list are considered new and must be reported prior to importation or manufacture in order that they can be assessed to determine if they are toxic or could become toxic to the environment or human health.

CompTox Chemicals Dashboard Chemical Lists > LIST >

[CIGARETTES] TOBACCO|SMOKING|WIKILIST: Additives in cigarettes

Short_Description: This is a partial list of the 599 additives in cigarettes submitted to the United States Department of Health and Human Services in April 1994.

Long_Description: This is a partial list of the 599 additives in cigarettes submitted to the United States Department of Health and Human Services in April 1994. It applies, as documented, only to American manufactured cigarettes intended for distribution within the United States by the listed companies. The five major tobacco companies that reported the information were: American Tobacco Company Brown and Williamson Liggett Group, Inc. Philip Morris Inc. R.J. Reynolds Tobacco Company The data were sourced from Wikipedia at https://en.wikipedia.org/wiki/List_of_additives_in_cigarettes

CompTox Chemicals Dashboard Chemical Lists > CATEGORY >

[COSMOSDB] CATEGORY|COSMETICS: COSMOS DB cosmetics database

Short_Description: COSMOS - Integrated in silico models for the prediction of human repeated-dose toxicity of COSMetics to Optimize Safety

Long_Description: COSMOS was a unique collaboration addressing the safety assessment needs of the cosmetics industry, without the use of animals. The main aim of COSMOS was to develop freely available tools and workflows to predict the safety to humans following the use of cosmetic ingredients. The project ran from January 2011 - December 2015. Major results and links to the legacy tools are available from the [COSMOS website](#). This is a partial listing and data curation is presently ongoing.

[▶ EPA DSSTox](#)

19.18 Consumer Product Information Database Classification

Showing 5 of 8 [View More](#)

Consumer Products Category Classification >

Auto Products

Consumer Products Category Classification >

Commercial / Institutional

Consumer Products Category Classification >

Home Maintenance

Consumer Products Category Classification >

Inside the Home

Consumer Products Category Classification >

Landscaping/Yard

[▶ Consumer Product Information Database \(CPID\)](#)

19.19 FDA Drug Type and Pharmacologic Classification

Showing 5 of 6 [View More](#)

FDA Drug Type and Pharmacologic Classification > Drug Type >

HUMAN OTC DRUG

FDA Drug Type and Pharmacologic Classification > Drug Type >

HUMAN PRESCRIPTION DRUG

FDA Drug Type and Pharmacologic Classification > Pharmacologic Class > [PE] Physiologic Effect >

Increased Large Intestinal Motility [PE]

FDA Drug Type and Pharmacologic Classification > Pharmacologic Class > [PE] Physiologic Effect >

Inhibition Large Intestine Fluid/Electrolyte Absorption [PE]

FDA Drug Type and Pharmacologic Classification > Pharmacologic Class > [MoA] Mechanism of Action >

Osmotic Activity [MoA][▶ National Drug Code \(NDC\) Directory](#)**19.20 EPA Substance Registry Services Tree**Showing 5 of 29 [View More](#)

EPA SRS List Classification > Ad Hoc >

Safer Chemical Ingredients List

SCIL :: The Safer Chemical Ingredients List (SCIL) is a list of chemical ingredients, arranged by functional-use class, that the Safer Choice Program has evaluated and determined to be safer than traditional chemical ingredients. This list is designed to help manufacturers find safer chemical alternatives that meet the criteria of the Safer Choice Program.

EPA SRS List Classification > Ad Hoc >

Synonyms Provided by Submitters to the TSCA Inventory

TSCA INV SYN :: Synonyms Provided by Submitters to the TSCA Inventory

EPA SRS List Classification > Ad Hoc >

Wisconsin Department of Natural Resources

WDNR :: Substances compiled by WDNR

EPA SRS List Classification > EPA Application/System >

2012 Chemical Data Reporting

2012 CDR :: This list contains chemicals that were reported to EPA's 2012 Chemical Data Reporting (CDR). Companies that manufacture (including import) certain chemicals at certain volumes in the U.S. must report to EPA every four years through its CDR. The vast majority of chemicals on this 2012 CDR list needed to be reported, but some of these chemicals were not required to be reported. EPA uses the CDR data to support many health, safety, and environmental protection activities.

EPA SRS List Classification > EPA Application/System >

CAMEO Chemicals

CAMEO Chemicals is an emergency response and planning tool. This program includes an extensive chemical database with critical response information for thousands of chemicals, as well as a reactivity prediction tool that allows you to see what hazards might occur if chemicals in your collection were mixed together. CAMEO Chemicals is available as a website, mobile website, and a desktop application. CAMEO Chemicals is part of a software suite of programs called CAMEO (Computer-Aided Management of Emergency Operations). The CAMEO suite also includes a hazard modeling tool (ALOHA), a mapping program (MARPLOT), and two database applications (CAMEOfm and Tier2 Submit) designed to assist with the data management requirements under the Emergency Planning and Community Right-to-Know Act (EPCRA, also known as SARA Title III). The CAMEO suite programs can be used (individually or together) to help first responders and emergency planners access and manage crucial chemical property and emergency response information for hazardous chemical releases. The CAMEO programs are developed jointly by EPA's Office of Emergency Management and NOAA's Office of Response and Restoration.

[▶ EPA Substance Registry Services](#)

20 Information Sources



FILTER BY SOURCE

ALL SOURCES

1. CAS Common Chemistry

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Sodium chloride

https://commonchemistry.cas.org/detail?cas_rn=7647-14-5

Rock salt

https://commonchemistry.cas.org/detail?cas_rn=14762-51-7

2. ChemIDplus

LICENSE

<https://www.nlm.nih.gov/copyright.html>

Sodium chloride [USP:IAN]

<https://pubchem.ncbi.nlm.nih.gov/substance/?source=chemidplus&sourceid=0007647145>

Halite

<https://pubchem.ncbi.nlm.nih.gov/substance/?source=chemidplus&sourceid=0014762517>

Sodium chloride (Na36Cl)

<https://pubchem.ncbi.nlm.nih.gov/substance/?source=chemidplus&sourceid=0032343729>

ChemIDplus Chemical Information Classification

<https://pubchem.ncbi.nlm.nih.gov/source/ChemIDplus>

3. DrugBank

LICENSE

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https://www.drugbank.ca/legal/terms_of_use

Sodium chloride

<https://www.drugbank.ca/drugs/DB09153>

Sea salt

<https://www.drugbank.ca/drugs/DB11266>

4. DTP/NCI

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sodium chloride

<https://dtp.cancer.gov/dtpstandard/servlet/dwindex?searchtype=NSC&outputformat=html&searchlist=77364>

5. EPA Chemicals under the TSCA

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<https://www.epa.gov/privacy/privacy-act-laws-policies-and-resources>

Sodium chloride (NaCl)

<https://www.epa.gov/chemicals-under-tsca>

6. EPA DSSTox

LICENSE

<https://www.epa.gov/privacy/privacy-act-laws-policies-and-resources>

Sodium chloride

<https://comptox.epa.gov/dashboard/DTXSID3021271>

Halite (NaCl)

<https://comptox.epa.gov/dashboard/DTXSID501033754>

Saline

<https://comptox.epa.gov/dashboard/DTXSID6040379>

CompTox Chemicals Dashboard Chemical Lists

<https://comptox.epa.gov/dashboard/chemical-lists/>

7. European Chemicals Agency (ECHA)

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<https://echa.europa.eu/web/guest/legal-notice>

Sodium chloride

<https://echa.europa.eu/substance-information/-/substanceinfo/100.028.726>

8. FDA Global Substance Registration System (GSRS)

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<https://www.fda.gov/about-fda/about-website/website-policies#linking>

Sodium chloride

<https://gsrs.ncats.nih.gov/ginas/app/beta/substances/451W471Q8X>

9. Hazardous Substances Data Bank (HSDB)

SODIUM CHLORIDE

<https://pubchem.ncbi.nlm.nih.gov/source/hsdb/6368>

10. ChEBI

Sodium chloride

<http://www.ebi.ac.uk/chebi/searchId.do?chebiId=CHEBI:26710>

ChEBI Ontology

<http://www.ebi.ac.uk/chebi/userManualForward.do#ChEBI%20Ontology>

11. NCI Thesaurus (NCIt)

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NCI Thesaurus Tree

<https://ncit.nci.nih.gov>

12. Toxin and Toxin Target Database (T3DB)

LICENSE

T3DB is offered to the public as a freely available resource. Use and re-distribution of the data, in whole or in part, for commercial purposes requires explicit permission of the authors and explicit acknowledgment of the source material (T3DB) and the original publication.

<http://www.t3db.ca/downloads>

Sodium chloride

<http://www.t3db.ca/toxins/T3D4666>

13. ClinicalTrials.gov

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16. Therapeutic Target Database (TTD)

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USP drug classification
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Drugs listed in the Japanese Pharmacopoeia
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43. PATENTSCOPE (WIPO)

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44. NCBI

<https://www.ncbi.nlm.nih.gov/projects/linkout>

Sodium chloride

Sodium chloride /ˌsoʊdiəm ˈklɔːraɪd/^[8] commonly known as salt (although sea salt also contains other chemical salts), is an ionic compound with the chemical formula **NaCl**, representing a 1:1 ratio of sodium and chloride ions. With molar masses of 22.99 and 35.45 g/mol respectively, 100 g of NaCl contains 39.34 g Na and 60.66 g Cl. Sodium chloride is the salt most responsible for the salinity of seawater and of the extracellular fluid of many multicellular organisms. In its edible form, salt (also known as *table salt*) is commonly used as a condiment and food preservative. Large quantities of sodium chloride are used in many industrial processes, and it is a major source of sodium and chlorine compounds used as feedstocks for further chemical syntheses. Another major application of sodium chloride is de-icing of roadways in sub-freezing weather.

Uses

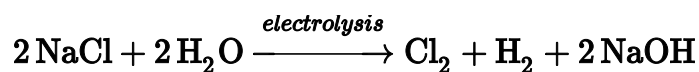
In addition to the familiar domestic uses of salt, more dominant applications of the approximately 250 million tonnes per year production (2008 data) include chemicals and de-icing.^[9]

Chemical functions

Salt is used, directly or indirectly, in the production of many chemicals, which consume most of the world's production.^[10]

Chlor-alkali industry

It is the starting point for the chloralkali process, the industrial process to produce chlorine and sodium hydroxide, according to the chemical equation

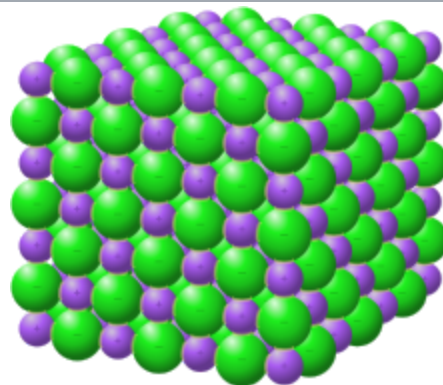


This electrolysis is conducted in either a mercury cell, a diaphragm cell, or a membrane cell. Each of those uses a different method to separate the chlorine from the sodium hydroxide. Other technologies are under development due to the high energy consumption of the electrolysis, whereby small improvements in the efficiency can have large economic paybacks. Some applications of chlorine include PVC thermoplastics production, disinfectants, and solvents.

Sodium chloride



Sodium chloride crystals in a form of halite



Crystal structure with sodium in purple and chloride in green^[1]

Names

IUPAC name

Sodium chloride

Other names

Common salt
halite
rock salt
saline
table salt
regular salt
sea salt

Identifiers

Sodium hydroxide is extensively used in many different industries enabling production of paper, soap, and aluminium etc.

Soda-ash industry

Sodium chloride is used in the Solvay process to produce sodium carbonate and calcium chloride. Sodium carbonate, in turn, is used to produce glass, sodium bicarbonate, and dyes, as well as a myriad of other chemicals. In the Mannheim process, sodium chloride is used for the production of sodium sulfate and hydrochloric acid.

Standard

Sodium chloride has an international standard that is created by ASTM International. The standard is named **ASTM E534-13** and is the standard test methods for chemical analysis of sodium chloride. These methods listed provide procedures for analyzing sodium chloride to determine whether it is suitable for its intended use and application.

Miscellaneous industrial uses

Sodium chloride is heavily used, so even relatively minor applications can consume massive quantities. In oil and gas exploration, salt is an important component of drilling fluids in well drilling. It is used to flocculate and increase the density of the drilling fluid to overcome high downwell gas pressures. Whenever a drill hits a salt formation, salt is added to the drilling fluid to saturate the solution in order to minimize the dissolution within the salt stratum.^[9] Salt is also used to increase the curing of concrete in cemented casings.^[10]

In textiles and dyeing, salt is used as a brine rinse to separate organic contaminants, to promote "salting out" of dyestuff precipitates, and to blend with concentrated dyes to standardize them. One of its main roles is to provide the positive ion charge to promote the absorption of negatively charged ions of dyes.^[10]

It is also used in processing aluminium, beryllium, copper, steel and vanadium. In the pulp and paper industry, salt is used to bleach wood pulp. It also is used to make sodium chlorate, which is added along with sulfuric acid and water to manufacture chlorine dioxide, an excellent oxygen-based bleaching chemical. The chlorine dioxide process, which originated in Germany after World War I, is becoming more popular because of environmental pressures to reduce or eliminate chlorinated bleaching compounds. In tanning and leather treatment, salt is added to animal hides to inhibit microbial activity on the underside of the hides and to attract moisture back into the hides.^[10]

<u>CAS Number</u>	7647-14-5 (https://commonchemistry.s.org/detail?cas_rn=7647-14-5) ✓
3D model (JSmol)	Interactive image (https://chemapps.stolaf.edu/jmol/jmol.php?model=%5BNa%2B%5D.%5BCl-%5D)
<u>Beilstein Reference</u>	3534976
<u>ChEBI</u>	CHEBI:26710 (https://www.ebi.ac.uk/chebi/searchId.do?chebid=26710) ✓
<u>ChEMBL</u>	ChEMBL1200574 (https://www.ebi.ac.uk/chembl/db/index.php/compound/inspect/ChEMBL1200574) ✗
<u>ChemSpider</u>	5044 (https://www.chemspider.com/Chemical-Structure.5044.html) ✓
<u>ECHA InfoCard</u>	100.028.726 (https://echa.europa.eu/substance-information/-/substanceinfo/100.028.726)
<u>EC Number</u>	231-598-3
<u>Gmelin Reference</u>	13673
<u>KEGG</u>	D02056 (https://www.kegg.jp/entry/D02056) ✓
<u>MeSH</u>	Sodium+chloride (https://www.nlm.nih.gov/cgi/mesh/2014/MB_cgi?mode=&term=Sodium+chloride)

In rubber manufacture, salt is used to make buna, neoprene and white rubber types. Salt brine and sulfuric acid are used to coagulate an emulsified latex made from chlorinated butadiene.^{[10][9]}

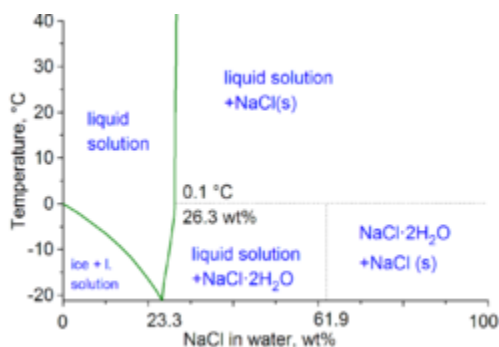
Salt also is added to secure the soil and to provide firmness to the foundation on which highways are built. The salt acts to minimize the effects of shifting caused in the subsurface by changes in humidity and traffic load.^[10]

Sodium chloride is sometimes used as a cheap and safe desiccant because of its hygroscopic properties, making salting an effective method of food preservation historically; the salt draws water out of bacteria through osmotic pressure, keeping it from reproducing, a major source of food spoilage. Even though more effective desiccants are available, few are safe for humans to ingest.

Water softening

Hard water contains calcium and magnesium ions that interfere with action of soap and contribute to the buildup of a scale or film of alkaline mineral deposits in household and industrial equipment and pipes. Commercial and residential water-softening units use ion-exchange resins to remove ions that cause the hardness. These resins are generated and regenerated using sodium chloride.^{[10][9]}

Road salt



Phase diagram of water–NaCl mixture

The second major application of salt is for de-icing and anti-icing of roads, both in grit bins and spread by winter service vehicles. In anticipation of snowfall, roads are optimally "anti-iced" with brine (concentrated solution of salt in water), which prevents bonding between the snow-ice and the road surface. This procedure obviates the heavy use of salt after the snowfall. For de-icing, mixtures of brine and salt are used, sometimes with additional agents such as calcium chloride and/or magnesium chloride. The use of salt or brine becomes ineffective below $-10\text{ }^{\circ}\text{C}$ ($14\text{ }^{\circ}\text{F}$).

PubChem CID	5234 (https://pubchem.ncbi.nlm.nih.gov/compound/5234)
RTECS number	VZ4725000
UNII	451W471Q8X (https://fdasis.nlm.nih.gov/srs/srsdirect.jsp?regn=451W471Q8X) ✓
CompTox Dashboard (EPA)	DTXSID3021271 (https://comptox.epa.gov/dashboard/chemical/details/DTXSID3021271)
InChI	InChI=1S/CIH.Na/h1H;/q;+1/p-1 ✓ Key: FAPWRFPIFISIZLT-UHFFFAOYSA-M ✓ InChI=1/CIH.Na/h1H;/q;+1/p-1 Key: FAPWRFPIFISIZLT-REWHXWOFAE
SMILES	[Na+].[Cl-]
Properties	
Chemical formula	NaCl
Molar mass	58.443 g/mol ^[2]
Appearance	Colorless cubic crystals ^[2]
Odor	Odorless
Density	2.17 g/cm ³ ^[2]
Melting point	800.7 °C (1,473.3 °F; 1,073.8 K) ^[2]
Boiling point	1,465 °C (2,669 °F; 1,738 K) ^[2]
Solubility in water	360 g/1000 g pure water at T = 25 °C ^[2]
Solubility in ammonia	21.5 g/L at T = ?
Solubility in	14.9 g/L at T = ?



Mounds of road salt for use in winter

Salt for de-icing in the United Kingdom predominantly comes from a single mine in Winsford in Cheshire. Prior to distribution it is mixed with <100 ppm of sodium ferrocyanide as an anti-caking agent, which enables rock salt to flow freely out

of the gritting vehicles despite being stockpiled prior to use. In recent years this additive has also been used in table salt. Other additives had been used in road salt to reduce the total costs. For example, in the US, a byproduct carbohydrate solution from sugar-beet processing was mixed with rock salt and adhered to road surfaces about 40% better than loose rock salt alone. Because it stayed on the road longer, the treatment did not have to be repeated several times, saving time and money.^[10]

In the technical terms of physical chemistry, the minimum freezing point of a water-salt mixture is $-21.12\text{ }^{\circ}\text{C}$ ($-6.02\text{ }^{\circ}\text{F}$) for 23.31 wt% of salt. Freezing near this concentration is however so slow that the eutectic point of $-22.4\text{ }^{\circ}\text{C}$ ($-8.3\text{ }^{\circ}\text{F}$) can be reached with about 25 wt% of salt.^[11]

Environmental effects

Road salt ends up in fresh-water bodies and could harm aquatic plants and animals by disrupting their osmoregulation ability.^[12] The omnipresence of salt poses a problem in any coastal coating application, as trapped salts cause great problems in adhesion. Naval authorities and ship builders monitor the salt concentrations on surfaces during construction. Maximal salt concentrations on surfaces are dependent on the authority and application. The IMO regulation is mostly used and sets salt levels to a maximum of 50 mg/m^2 soluble salts measured as sodium chloride. These measurements are done by means of a Bresle test. Salinization (increasing salinity, aka *freshwater salinization syndrome*) and subsequent increased metal leaching is an ongoing problem throughout North America and European fresh waterways.^[13]

In highway de-icing, salt has been associated with corrosion of bridge decks, motor vehicles, reinforcement bar and wire, and unprotected steel structures used in road construction. Surface runoff, vehicle spraying, and windblown actions also affect soil, roadside vegetation, and local surface water and groundwater supplies. Although evidence of environmental loading of salt has been found during peak usage, the spring rains and thaws usually dilute the concentrations of sodium in the area where salt was

methanol	
Magnetic susceptibility (χ)	$-30.2 \cdot 10^{-6}\text{ cm}^3/\text{mol}$ ^[3]
Refractive index (n_D)	1.5441 (at 589 nm) ^[4]
Structure ^[5]	
Crystal structure	Face-centered cubic (see text), cF8
Space group	Fm $\bar{3}$ m (No. 225)
Lattice constant	$a = 564.02\text{ pm}$
Formula units (Z)	4
Coordination geometry	octahedral at Na^+ octahedral at Cl^-
Thermochemistry ^[6]	
Heat capacity (C)	50.5 J/(K·mol)
Std molar entropy (S^{\ominus}_{298})	72.10 J/(K·mol)
Std enthalpy of formation ($\Delta_f H^{\ominus}_{298}$)	-411.120 kJ/mol
Pharmacology	
ATC code	A12CA01 (WHO (https://www.whocc.no/atc_ddd_index/?code=A12CA01)), B05CB01 (WHO (https://www.whocc.no/atc_ddd_index/?code=B05CB01)), B05XA03 (WHO (https://www.whocc.no/atc_ddd_index/?code=B05XA03)), S01XA03 (WHO (https://www.whocc.no/atc_ddd_index/?code=S01XA03))
Hazards	

applied.^[10] A 2009 study found that approximately 70% of the road salt being applied in the Minneapolis-St Paul metro area is retained in the local watershed.^[14]

Substitution

Some agencies are substituting beer, molasses, and beet juice instead of road salt.^[15] Airlines utilize more glycol and sugar rather than salt based solutions for de-icing.^[16]

Food industry and agriculture

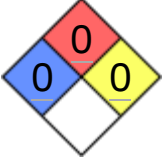
Many microorganisms cannot live in a salty environment: water is drawn out of their cells by osmosis. For this reason salt is used to preserve some foods, such as bacon, fish, or cabbage.

Salt is added to food, either by the food producer or by the consumer, as a flavor enhancer, preservative, binder, fermentation-control additive, texture-control agent and color developer. The salt consumption in the food industry is subdivided, in descending order of consumption, into other food processing, meat packers, canning, baking, dairy and grain mill products. Salt is added to promote color development in bacon, ham and other processed meat products. As a preservative, salt inhibits the growth of bacteria. Salt acts as a binder in sausages to form a binding gel made up of meat, fat, and moisture. Salt also acts as a flavor enhancer and as a tenderizer.^[10]

In many dairy industries, salt is added to cheese as a color-, fermentation-, and texture-control agent. The dairy subsector includes companies that manufacture creamery butter, condensed and evaporated milk, frozen desserts, ice cream, natural and processed cheese, and specialty dairy products. In canning, salt is primarily added as a flavor enhancer and preservative. It also is used as a carrier for other ingredients, dehydrating agent, enzyme inhibitor and tenderizer. In baking, salt is added to control the rate of fermentation in bread dough. It also is used to strengthen the gluten (the elastic protein-water complex in certain doughs) and as a flavor enhancer, such as a topping on baked goods. The food-processing category also contains grain mill products. These products consist of milling flour and rice and manufacturing cereal breakfast food and blended or prepared flour. Salt is also used a seasoning agent, e.g. in potato chips, pretzels, cat and dog food.^[10]

Sodium chloride is used in veterinary medicine as emesis-causing agent. It is given as warm saturated solution. Emesis can also be caused by pharyngeal placement of small amount of plain salt or salt crystals.

Medicine

NFPA 704 (fire diamond)	
Lethal dose or concentration (LD, LC):	
LD ₅₀ (median dose)	3 g/kg (oral, rats) ^[7]
Related compounds	
Other <u>anions</u>	<u>Sodium fluoride</u> <u>Sodium bromide</u> <u>Sodium iodide</u> <u>Sodium astatide</u>
Other <u>cations</u>	<u>Lithium chloride</u> <u>Potassium chloride</u> <u>Rubidium chloride</u> <u>Caesium chloride</u> <u>Francium chloride</u>
Supplementary data page	
<u>Sodium chloride (data page)</u>	
Except where otherwise noted, data are given for materials in their <u>standard state</u> (at 25 °C [77 °F], 100 kPa).	
✗ <u>verify (what is ✓ ✗ ?)</u>	
<u>Infobox references</u>	

Sodium chloride is used together with water as one of the primary solutions for intravenous therapy. Nasal spray often contains a saline solution.

Firefighting

Sodium chloride is the principal extinguishing agent in fire extinguishers (Met-L-X, Super D) used on combustible metal fires such as magnesium, potassium, sodium, and NaK alloys (Class D). Thermoplastic powder is added to the mixture, along with waterproofing (metal stearates) and anti-caking materials (tricalcium phosphate) to form the extinguishing agent. When it is applied to the fire, the salt acts like a heat sink, dissipating heat from the fire, and also forms an oxygen-excluding crust to smother the fire. The plastic additive melts and helps the crust maintain its integrity until the burning metal cools below its ignition temperature. This type of extinguisher was invented in the late 1940s as a cartridge-operated unit, although stored pressure versions are now popular. Common sizes are 30 pounds (14 kg) portable and 350 pounds (160 kg) wheeled.



A class-D fire extinguisher for various metals

Cleanser

Since at least medieval times, people have used salt as a cleansing agent rubbed on household surfaces. It is also used in many brands of shampoo, toothpaste and popularly to de-ice driveways and patches of ice.

Optical usage

Defect-free NaCl crystals have an optical transmittance of about 90% for infrared light, specifically between 200 nm and 20 μm. They were therefore used in optical components (windows and prisms) operating in that spectral range, where few non-absorbing alternatives exist and where requirements for absence of microscopic inhomogeneities are less strict than in the visible range. While inexpensive, NaCl crystals are soft and hygroscopic – when exposed to the ambient air, they gradually cover with "frost". This limits application of NaCl to dry environments, vacuum sealed assembly areas or for short-term uses such as prototyping. Nowadays materials like zinc selenide (ZnSe), which are stronger mechanically and are less sensitive to moisture, are used instead of NaCl for the infrared spectral range.

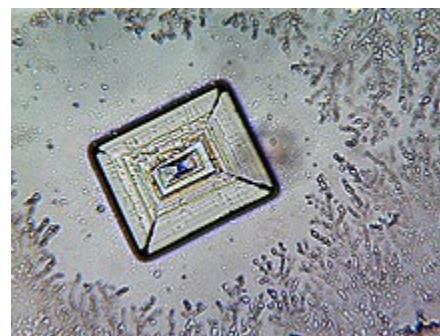
Chemistry

Solid sodium chloride

In solid sodium chloride, each ion is surrounded by six ions of the opposite charge as expected on electrostatic grounds. The surrounding ions are located at the vertices of a regular octahedron. In the language of close-packing, the larger chloride ions (167 pm in size^[17]) are arranged in a cubic array whereas the smaller sodium ions (116 pm^[17]) fill all the cubic gaps (octahedral voids) between them. This same basic structure is found in many other compounds and is commonly known as the halite or rock-salt crystal structure. It can be represented as a face-centered cubic (fcc) lattice with a two-atom basis or as two interpenetrating face centered cubic lattices. The first atom is located at each lattice point, and the second atom is located halfway between lattice points along the fcc unit cell edge.

Solid sodium chloride has a melting point of 801 °C. Thermal conductivity of sodium chloride as a function of temperature has a maximum of 2.03 W/(cm K) at 8 K (−265.15 °C; −445.27 °F) and decreases to 0.069 at 314 K (41 °C; 106 °F). It also decreases with doping.^[18]

Atomic-resolution real-time video imaging allows visualization of the initial stage of crystal nucleation of sodium chloride.^[19]

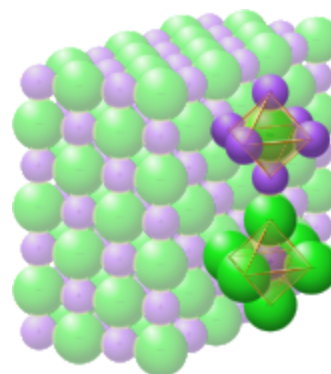


Sodium chloride crystal under microscope.

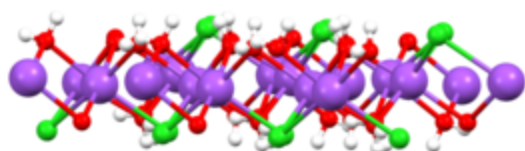
Aqueous solutions

The attraction between the Na⁺ and Cl[−] ions in the solid is so strong that only highly polar solvents like water dissolve NaCl well.

Solubility of NaCl (g NaCl / 1 kg of solvent at 25 °C (77 °F)) ^[20]	
Water	360
Formamide	94
Glycerin	83
Propylene glycol	71
Formic acid	52
Liquid ammonia	30.2
Methanol	14
Ethanol	0.65
Dimethylformamide	0.4
Propan-1-ol	0.124
Sulfolane	0.05
Butan-1-ol	0.05
Propan-2-ol	0.03
Pentan-1-ol	0.018
Acetonitrile	0.003
Acetone	0.00042



NaCl octahedra. The yellow stipples represent the electrostatic force between the ions of opposite charge



View of one slab of NaCl(H₂O)₂ (red = O, white = H, green = Cl, purple = Na).^[21]

When dissolved in water, the sodium chloride framework disintegrates as the Na⁺ and Cl[−] ions become surrounded by polar water molecules. These solutions consist of metal aquo complex with the formula [Na(H₂O)₈]⁺, with the Na–O distance of 250 pm. The chloride ions are also strongly solvated, each being surrounded by an average of six molecules of water.^[22] Solutions of sodium chloride have very different properties from pure water. The

eutectic point is $-21.12\text{ }^{\circ}\text{C}$ ($-6.02\text{ }^{\circ}\text{F}$) for 23.31% mass fraction of salt, and the boiling point of saturated salt solution is near $108.7\text{ }^{\circ}\text{C}$ ($227.7\text{ }^{\circ}\text{F}$).^[11] From cold solutions, salt crystallises as the dihydrate $\text{NaCl}\cdot 2\text{H}_2\text{O}$.^[23]

pH of sodium chloride solutions

The pH of a sodium chloride solution remains ≈ 7 due to the extremely weak basicity of the Cl^- ion, which is the conjugate base of the strong acid HCl. In other words, NaCl has no effect on system pH^[24] in diluted solutions where the effects of ionic strength and activity coefficients are negligible.

Stoichiometric and structure variants

Common salt has a 1:1 molar ratio of sodium and chlorine. In 2013, compounds of sodium and chloride of different stoichiometries have been discovered; five new compounds were predicted (e.g., Na_3Cl , Na_2Cl , Na_3Cl_2 , NaCl_3 , and NaCl_7). The existence of some of them has been experimentally confirmed at high pressures and other conditions: cubic and orthorhombic NaCl_3 , two-dimensional metallic tetragonal Na_3Cl and exotic hexagonal NaCl .^[25] This indicates that compounds violating chemical intuition are possible, in simple systems under nonambient conditions.^[26]

Occurrence

Most of the world's salt is dissolved in the ocean. A lesser amount is found in the Earth's crust as the water-soluble mineral halite (rock salt), and a tiny amount exists as suspended sea salt particles in the atmosphere. These particles are the dominant cloud condensation nuclei far out at sea, which allow the formation of clouds in otherwise non-polluted air.^[27]

Production

Salt is currently mass-produced by evaporation of seawater or brine from brine wells and salt lakes. Mining of rock salt is also a major source. China is the world's main supplier of salt.^[10] In 2017, world production was estimated at 280 million tonnes, the top five producers (in million tonnes) being China (68.0), United States (43.0), India (26.0), Germany (13.0), and Canada (13.0).^[28] Salt is also a byproduct of potassium mining.



Modern rock salt mine near Mount Morris, New York, United States

Jordanian and Israeli salt evaporation ponds at the south end of the Dead Sea.

Mounds of salt, Salar de Uyuni, Bolivia.

See also



Chemistry portal

- Biosalinity
- Edible salt (table salt)
- Halite, the mineral form of sodium chloride
- Health effects of salt
- Salinity
- Salting the earth
- Salt poisoning

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External links

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 - JtBaker MSDS (<http://hazard.com/msds/mf/baker/baker/files/s3338.htm>)
-

Retrieved from "https://en.wikipedia.org/w/index.php?title=Sodium_chloride&oldid=1135174281"

EXHIBIT 7

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



EXHIBIT PAGE 171 OF 337
IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF NORTH CAROLINA
Durham Division



Brian David Hill,
Petitioner
v.
United States of America,
Respondent

Case #
1:13-CR-435-1
1:17-CV-1036

STATUS REPORT
OF PETITIONER
SEPTEMBER 27, 2018

I, Brian David Hill ("Brian D. Hill", "Petitioner") in this § 2255 case, acting pro se in this manner, files this status report and Declaration updating the court for this case. Because of the current situation described herein, Petitioner requests a court appointed lawyer.

DECLARATION

I, Brian D. Hill, produce these statements, subject to the penalties of perjury under U.S. Code:

(1) I am currently in Martinsville City Jail over a local criminal case and situation where it must be disclosed to the habeas court over what actually happened. Petitioner believes it is connected over the matter concerning and effecting this § 2255 case.

(2.) ON SEPTEMBER 18th, 2018, Somebody was in the ~~the~~ thicket at the end of my neighbor's property and branches moved ~~at~~ whenever I looked in that direction. I was around the period when I was mowing the grass between the time period of 1 to 4PM. That was a Tuesday. Likely surveilling me.

(3) On September 19, 2018, Wednesday, I called into a political talk show after Sandra Wilson invited me to call into a Family Court issues type of show on Blog Talk Radio, by a I believe it was a woman named Valerie K. Lazarus (hope I spelled it right). Told her about the fraud on the court concerning this case. We also spoke about the Americans with Disabilities Act and the one woman said how if I ~~have~~ had an IEP when I was in school, then they (I assume she meant police) can (or may) get in trouble for violating the Americans with Disabilities Act the way it was handled in regards to my criminal case.

(4) On September 20, 2018, Thursday, some of my memories may have been blacked out. I was under an extreme amount of stress and anxiety already due to the pre-filing injunction Motion. My whole family could tell. My mom had also noticed that my doors were not being kept locked. I was psychologically afraid to sleep in my bed. Sometimes sleeping on the couch and I had a bad feeling something ^{bad} would happen to me.

I was able to go the Massanutten Resort from Monday to Thursday last week in Rockingham County, VA, in my district. I think it was between Sept. 10 through 13/2018 if I am correct from memory. My family noticed that I didn't want to go back home. As if something was terrifying in my psychological mind, and I haven't kept my door or doors locked. Around 11 I went walking beside the road on the sidewalk and as I was around a warehouse or some kind of building near or around the Martinsville, VA downtown area ~~area~~ near the hiking trail of "Dick and Willie", I was approached by a man in a hoodie probably some time between 11 to 12 that night. I think maybe between 5 to 6 feet tall, maybe white told me "You ~~had~~ had better take your clothes off in public and take pictures of yourself and place the SD card around the bench ~~at~~ after the bridge..." "or they would kill my mom Roberta Hill". At one point I felt like I might collapse so I may have been drugged. I had to keep sitting on benches. I didn't want my mother to be killed. My weakness is my Mother. I gave a false confession in 2012 because of being told "You better fess up or else your mother would be held responsible." Whoever threatened me that night knew my weakness. If I walk to the police or don't do what that man said would my mom be shot full of holes while sleeping and killed?

be

I didn't know what to do. I kinda lost my mind when taking pictures of myself. If I didn't get on a good show would my mother be killed like the stuff in Hollywood action movies. I had a feeling it had something to do with the things brought up in my case. The threats from ~~tor~~mail.org messages which were successfully carried out. I knew I couldn't mess with these people, with a threat that serious. Out of fear and desperation I walked, were vehicles would see me with a hand gesture of my hand over my mouth. I was naked on the trail. I was trying to signal with that hand gesture that I was in trouble. I decided not to place the SD card at the bench, as how would they know? Maybe I could still go to the police and warn my mom. As I was walking back I saw a track with a spotlight at me with no way to tell who it was. I was scared so I ran and then noticed a red laser beam light like what private mercenaries, bad guys, and good guys all have. A light came on with a guy yelling at me. I didn't know who he was. I was scared it was them, going to kill me for not exactly following the "hoatie" guys directives. I ran fell down the left side slope of the trail getting cuts and scrapes all over my body, until I fell in the ~~river~~ ~~bed~~ creek bed. They were down there and at that point I realized they were police.

I said over and over again while complying "I have Autism, I have Autism, I have AUTISM, I have Autism." I felt they couldn't hear me out. I said "I was attacked" told Sgt. R.D. Jones that I need to speak with a detective. It was probably around 3 to 4 AM at around Friday, September 21, 2018. He asked me why I was naked on the trail. I tried to explain to him as much of what happened as I could. He mistook my statement of heading towards the YMCA building with the warehouse and I told him "You don't understand Autism," maybe "are you trained in Autism?" Sgt. R.D. Jones said "how do I know you even have Autism." I responded with "Dennis Debbaut, a law enforcement trainer. He did a white paper. People with Autism can give false confessions and misleading statements. Officer you misunderstood what I said about the YMCA building," after or before my answer to his "how do I know you even have Autism" was "it was in federal court records." He gave me that book where he didn't want to accept anything I said. He even said "If your lying to me, I will charge you with making (or filing) a false report." I looked at him straight in the eyes and said I am not lying, even told him something about "am I supposed to let my mother be killed" or something to that effect. He still wouldn't ~~even~~ accept what I had told him. I then told him "You don't understand Autism. You are violating title II of the Americans with Disabilities Act..."

I was being charged with "indecent exposure".
 I further told Sgt. R.D. Jones that I was going to win the jury trial and sue him for violating the ADA. Argument escalated to me saying to him "f*ck you". At one point things cooled down and I was in a front of the TV with a Magistrate. She, the Magistrate brought up about my federal criminal conviction and my 2015 probation violation. I explained to her that the case is under a habeas corpus 2255 review for my claim of "actual innocence" "actual innocence" or something to that effect. She assumed that it was some kind of an appeal. Told her that the probation violation was over U.S. Probation Officer Kristy L. Burton making false statements, which is perjury and may have mentioned that Anand Prakash ~~Ramesh~~ Rameswamy committed subornation of perjury, gave her the federal case number. Also mentioned about fraud on the court. I was given no bond that day. Was charged in Martinsville General District Court, case no. C18-3138. It might be named as Commonwealth of Virginia v. Brian David Hill. At one point I told Sgt. Jones that "you arent doing anything about the drug dealers in my (or our) neighborhood" that the FBI arent doing anything about the threats, I don't trust the police.

(5) On September 26, 2018, I had filed a request form for the jail directing that it be forwarded to MPD Sgt. R.D. Jones with more statements incl. a Declaration as evidence.

I explained that witness Roberta Hill had received a threatening "greeting card" postmarked Tennessee, she received some point (or some time) this year. It had no return address. Gave the officer her phone number.

Then I said under Declaration on the back of that "Request for Interview" form that my first received formail.org ~~mess~~ message said that I was set up with child porn, that Alex Jones... and others were next. ^{my friends}

(e)
Some information omitted

I gave this federal criminal case number, cited Document #46 Declaration of Susan Basko. Then ~~told him a~~ told him in writing about the threatening message that was reported to J. Joy Strickland counsel to the N.C. Department of Justice. I explained that one part of the threatening email message said that I would be set up with violent sex crimes if I don't watch my back. If my mother being killed if I ~~did~~ didn't walk naked in public and take pictures, the "indecent exposure" charge may legally be defined as a "violent sex offense". The threats went from formail.org to being physical. I was set up with the violent sex crime of "indecent exposure" just like the 2013 formail threat said would happen.

While I am incarcerated, my diabetic blood sugar reads are getting a lot of highs right now. In the 300's, 400's, and 500's. I am suffering nerve pain, and other bad effects of high blood sugar.

The Court may request a copy of my September 26, 2018 filed "Request for interview" form from Martinsville VA City Jail at P.O. Box 1326 Martinsville, VA 24112 or at 300 Clearview Drive, same city. That way that can expand the record for this § 2255 case.

(6) Petitioner requests that an attorney be appointed at this interval for his 2255 case since this incarceration is at a facility that:

(1) Has no law library. The Public Defender in Martinsville cannot represent me for this 2255 case;

(2) Paper and resources are highly limited as per Jail's "rules and regulations". Stamps and envelopes also limited. I won't be able to make valid pleadings compliant with this Court's rules while incarcerated and very limited access to resources needed for this case. I won't be able to properly cite court rules, case law, and statutes while incarcerated;

(3) While incarcerated I will not be able to bring up evidence if the habeas court requests;

(4) Be at a large disadvantage which deprives me of due process under the 14th Amendment of U.S. Constitution. Being deprived of my ability to prove factual innocence in my 2255 case.

If the court cannot appoint court appointed counsel for this 2255 case, alternatively Petitioner asks this honorable Court to delay this 2255 case until Petitioner is not under incarceration.

(7) I make this PROCLAMATION to the hon. Court, to my Mother and family, to the U.S. Probation office, and to Martinsville District Court. The incident of "indecent exposure" is considered isolated and out of character. I swear under oath that it will never happen again. Charge is of a technical nature. I was threatened to get naked I never masturbated, it was a crazy ~~and~~ incident. Whoever threatened me needs to be charged and arrested. My mother hates me over what happened I'm sorry mom I was scared and didn't know what to do. I didn't want my mom to die. I am sorry for leaving around 11. The threats coming at me, the fear, the bad feeling in my gut. Next time I'm threatened I will report to police state police, and FBI. What I did on the hiking trail and leaving, without telling my mom, will never ever happen again. I'm tired of the Legal Terrorism, the criminal threats, and being afraid. I just want to prove my actual innocence and move on with my life. I am tired of feeling afraid for my family and my life. It's tearing me apart. My family can tell my health is degrading. I provided so much evidence to the Habeas Court please let me prove my innocence, have an evidentiary hearing. I have facts of innocence. Let me prove it. People with Autism can be manipulated, easily threatened, abused.

(8) Before this charge, I was working on a ~~Rule~~ Rule 11 Motion for sanctions, case law Chambers v. Nasco Supreme Court case (fraud on the court), and citing state bar rule 3.8. I was going to show fraud on the court in the Respondent's factual basis of guilt, in their pre-filing injunction motion, and in the motion to dismiss.

I wanted to show the fraud on the court by Respondent, give them 21 days (maybe 25 days) to respond before filing, then the court can decide under Chambers v. NASCO whether Respondent's Motions should be summarily denied. Subornation of perjury by Anand P. Ramaswamy is already a fraud on the court in 2015. Respondent's resistance to me proving my innocence clearly violates Rule 3.8 of the state's Model Rules of Professional Conduct, N.C. State Bar. Rule 11 sanctions may be appropriate. I will serve them a rule 11 motion copy once released from jail. To resolve the issues between Respondent and Petitioner, Petitioner requests that the U.S. Attorney General appoint special counsel to represent Respondent for this \$2255 case.

Thank You!

I declare under penalty of perjury that the foregoing is true and correct. Executed on September 27, 2018.

Respectfully filed with the court, this the 27th day of September, 2018. Brian D. Hill
Signed

CERTIFICATE OF SERVICE

Petitioner certifies that he dropped this status report in the Jail institution's mailbox on September 27th 2018, addressed to the Clerk, respectfully requests that all parties to the case are served by CM/ECT or by U.S. mailing. Petitioner asks Clerk to mail ~~me~~ letter certifying receipt of this pleading.

10

Brian D. Hill
Signed

Brian David Hill
Martinsville City Jail
P.O. Box 1326
Martinsville, VA 24112

Clerk: Please send letter confirming receipt.

Declaration and reCertificate of service

Brian David Hill v. United States ~~10~~ October ¹⁰ 2018

I Brian David Hill had mailed the wrong address and ~~is~~ refiled the "Status Report of Petitioner September 27, 2018" on October 10, 2018. The address was mailed to 324 W. Market Street, Suite 1, Martinsville, VA 24112. That address was incorrect. It should have been 324 W. Market Street, Suite 1, Greensboro, NC 27401.

So I recertify under the CERTIFICATE OF SERVICE that I file the pleading on Oct. 10, by depositing the pleading in an envelope prepaid in the Jail's mailing system. Again, I ask the Clerk to send me a letter acknowledging receipt of this pleading, and notify me which Document no.'s or I ask that my docket sheet be printed and sent to me showing my last ~~few~~ few entries.

I learned from Martinsville City Jail that I am limited by Jail policies to 1 short ink pen per month, 5 envelopes per week, no law library at all, and they have to destroy all envelopes including legal mail envelopes directed to inmates in MCJ. Envelopes are evidence but Jail officers can destroy envelopes including mail envelopes from Federal Courts. The Jail's policies seem unconstitutional and block me from continuing to ~~proceed~~ proceed in this 2255.

I ask that I be appointed a lawyer for my 2255.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 10, 2018.

Brian D. Hill
Signed

U.S.W.G.O.

Brian David Hill
Martinsville City Jail (MCJ)
P.O. Box 1326, Martinsville, VA
24112

EXHIBIT 8

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



EXHIBIT 1

**For Federal civil complaint
-- MOTION ASKING THE COURT TO
REQUEST LEGAL COUNSEL TO REPRESENT
THE PLAINTIFF -- MOTION AND BRIEF IN
SUPPORT OF THIS MOTION --**

**Brian David Hill v. Executive Office
for United States Attorneys (EOUSA),
United States Department of Justice
(U.S. DOJ)**

Civil Case Number 4:17-cv-00027



CARILION CLINIC

CARILION CLINIC, FAMILY AND INTERNAL MEDICINE
1107a Brookdale Street
Martinsville VA 24112
Phone: 276-670-3300
Fax: 276-634-0379

5/16/2017

RE:
Brian Hill
310 Forest St Apt 2
Martinsville VA 24112-4939

To Whom it May Concern:

This is to certify that Brian Hill is my patient since 11/2014. He has a diagnosis of diabetes, seizures, autism and obsessive compulsive disorder. One or more of these condition can limit his ability to be in social situation or among people and do work.

Please feel free to contact my office if you have any questions or concerns. Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Shyam E Balakrishnan'.

Shyam E Balakrishnan, MD

EXHIBIT 9

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



EXHIBIT 2

**For Federal civil complaint
-- DECLARATION OF BRIAN DAVID HILL IN
SUPPORT OF DOCUMENT 2 COMPLAINT
AND IN SUPPORT OF MOTION UNDER RULE
45 ASKING THE CLERK TO SUBPOENA
ATTORNEY JOHN SCOTT COALTER FOR
DISCOVERY AND TO PROVE THE FACTUAL
MATTER UNDER COMPLAINT --
Brian David Hill v. Executive Office
for United States Attorneys (EOUSA),
United States Department of Justice
(U.S. DOJ)
Civil Case Number 4:17-cv-00027**

**WESTERN ROCKINGHAM FAMILY MEDICINE, P.A.
BROWN SUMMIT FAMILY MEDICINE**

Donald W. Moore, M.D.
Tom Pickard, M.D.
Mary Beth Dixon, PA-C
Andrew Maier, PA-C,
Francis P. Wong, M.D.

Deann Steadman, R.N., C.S., N.P.
Mary Margaret Martin, FNP
Susan Weeks, FNP
Michelle Borovick, Pharm-D, CPP
Tazzy Eckard, Pharm-D, CPP

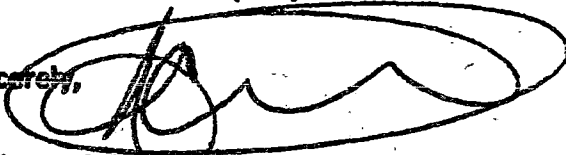
September 6, 2012

**Re: Brian Hill
DOB: 5-26-90**

To Whom It May Concern:

Brian Hill is a current patient at Western Rockingham Family Medicine. He has a diagnosis of Type I Diabetes, GERD, Autism, and depression with suicidal thoughts. His medication list is as follows: Nexium 40 mg, 1 po qd, Lantus Solo star pen, 36 units q hs, Novolog flex pen--sliding scale, Lisinopril 5mg, 1 po qd. Mr. Hill has an inability to take of himself, therefore needs around the clock care. If further assistance is required, please do not hesitate to contact our office at (336) 548-9618.

Sincerely,



**Andrew Maier, PA-C
Western Rockingham Family Medicine**

401 W. DECATUR STREET, MADISON, NORTH CAROLINA 27025 OFFICE: (336) 548-9618 FAX: (336) 548-4877
4901 NC HWY. 150 EAST, BROWN SUMMIT, NC 27214 OFFICE: (336) 656-9905 FAX: (336) 656-5227
WEBSITE: www.wrfm.com

EXHIBIT 10

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

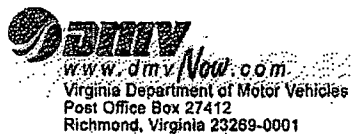
**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



EXHIBIT 1

**For Federal civil complaint
Brian David Hill v. Executive Office
for United States Attorneys (EOUSA),
United States Department of Justice
(U.S. DOJ)**



DISABLED PARKING PLACARDS OR LICENSE PLATES APPLICATION

MED 10 (02/17/2011)

Purpose: Use this form to apply for a disabled parking placard or disabled parking license plates.

Instructions: Submit to any Customer Service Center, DMV Select or mail to DMV, Data Integrity, P.O. Box 85815, Richmond, VA 23285-5815.

- For a parking placard, submit this form with a \$5.00 check or money order payable to DMV. Placard will be mailed to you in approximately 15 days. Only one placard may be issued to a customer.
- For disabled parking license plates, submit this form, a License Plate Application (VSA 10) and applicable fees.

DISABLED PARKING PLACARD ONLY (Disabled parking placard hangs from the rearview mirror.)			
CHECK ONE			
PERMANENT (5 years) <input checked="" type="checkbox"/> Original (medical professional certification required) <input type="checkbox"/> Renewal (No medical professional certification required.)	PERMANENT REPLACEMENT (5 years) <input type="checkbox"/> Lost <input type="checkbox"/> Destroyed <input type="checkbox"/> Reissue	TEMPORARY (up to 6 months) <input type="checkbox"/> Stolen <input type="checkbox"/> Mutilated	TEMPORARY REPLACEMENT <input type="checkbox"/> Original <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Mutilated <input type="checkbox"/> Reissue

DISABLED PARKING (HP) LICENSE PLATES ONLY			
ORIGINAL PLATES <input type="checkbox"/> Complete and submit form VSA 10	DUPLICATE <input type="checkbox"/> Lost <input type="checkbox"/> Destroyed	REISSUE <input type="checkbox"/> Unreadable (License plate letters or numbers unclear) <input type="checkbox"/> Never received license plates	<input type="checkbox"/> Check this box if this vehicle is specifically equipped and used for transporting groups of physically disabled persons.

VEHICLE IDENTIFICATION NUMBER (VIN)	TITLE NUMBER
-------------------------------------	--------------

I am the vehicle owner and the parent/legal guardian of a disabled dependent(s). List the name of each disabled person below.

APPLICANT INFORMATION					
FULL LEGAL NAME (last)	(first)	(middle)	(suffix)	DMV ASSIGNED NUMBER OR SOCIAL SECURITY NUMBER	
HILL	BRIAN	David		[REDACTED]	
CURRENT RESIDENCE ADDRESS			CITY	STATE	ZIP CODE
310 Forest St, Apt. 2			Martinsville	VA	24112
CITY OR COUNTY OF RESIDENCE			DAYTIME TELEPHONE NUMBER OR CELL PHONE NUMBER		
Martinsville			276-790-3505		
MAILING ADDRESS (if different from above)			CITY	STATE	ZIP CODE
BIRTH DATE (mm/dd/yyyy)	GENDER	HAIR COLOR	EYE COLOR	HEIGHT	WEIGHT
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			FT IN	LBS

APPLICANT CERTIFICATION	
I understand that misuse, counterfeiting, or alteration of disabled placards may result in fines up to \$1000, and up to 6 months in jail and/or revocation of disabled parking privileges. I certify that I have a (check one): <input type="checkbox"/> Temporary <input checked="" type="checkbox"/> Permanent disability that limits or impairs my ability to walk or creates a safety concern while walking.	
I also understand that the disabled parking placard or plates issued to me cannot be loaned to anyone, including family members or friends, to benefit a person other than myself.	
I further certify and affirm that all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.	
APPLICANT SIGNATURE	DATE (mm/dd/yyyy)
Brian D. Hill <i>Signed</i>	08/18/2016

LICENSED PHYSICIAN/PHYSICIAN ASSISTANT/NURSE PRACTITIONER MEDICAL CERTIFICATION

(This section does not have to be completed to renew permanent placards.)

- Permanently limited or impaired. A permanent disability as it relates to disabled parking privileges shall mean: a condition that limits or impairs movement from one place to another or the ability to walk as defined in Virginia Code §46.2-1240, and that has reached the maximum level of improvement and is not expected to change even with additional treatment.
- Temporarily limited or impaired beginning in the month of _____ and ending in the month of _____ (not to exceed 6 months).

Reason this patient's ability to walk is limited or impaired or creates a safety condition while walking. (check below)

- Cannot walk 200 feet without stopping to rest.
- Uses portable oxygen.
- Cannot walk without the use of or assistance from any of the following: another person, brace, cane, crutch, prosthetic device, wheelchair, or other assistive device.
- Has a cardiac condition to the extent that functional limitations are classified in severity as Class III or Class IV according to standards set by the American Heart Association.
- Is restricted by lung disease to such an extent that forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than one liter, or the arterial oxygen tension is less than 60 millimeters of mercury on room air at rest.
- Is severely limited in ability to walk due to an arthritic, neurological, or orthopedic condition.
- Has been diagnosed with a mental or developmental amentia or delay that impairs judgment including, but not limited to, an autism spectrum disorder.
- Has been diagnosed with Alzheimer's disease or another form of dementia.
- Is legally blind or deaf.
- Other condition that limits or impairs the ability to walk. Specific condition description must be specified below.

I certify and affirm that the described applicant is my patient, whose ability to walk, based on my examination, is limited or impaired or creates a safety concern while walking as described above.

I further certify and affirm that to the best of my knowledge and belief, all information I have presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.

MEDICAL PROFESSIONAL NAME SHYAM BALAKRISHNAN		OFFICE TELEPHONE NUMBER (276) 870 3300	OFFICE FAX NUMBER (276) 634-0362
LICENSE TYPE MD	LICENSE NUMBER (required) [REDACTED]	STATE ISSUING LICENSE (required) VA	LICENSE EXPIRATION DATE (mm/dd/yyyy) (required) [REDACTED]
MEDICAL PROFESSIONAL SIGNATURE [REDACTED]			DATE (mm/dd/yyyy) 8/31/16

LICENSED CHIROPRACTOR OR PODIATRIST MEDICAL CERTIFICATION

(This section does not have to be completed to renew permanent placards.)

- Permanently limited or impaired. A permanent disability as it relates to disabled parking privileges shall mean: a condition that limits or impairs movement from one place to another or the ability to walk as defined in Virginia Code §46.2-1240, and that has reached the maximum level of improvement and is not expected to change even with additional treatment.
- Temporarily limited or impaired beginning in the month of _____ and ending in the month of _____ (not to exceed 6 months).

Reason this patient's ability to walk is limited or impaired or creates a safety condition while walking. (Checked below)

- Cannot walk 200 feet without stopping to rest.
- Cannot walk without the use of or assistance from any of the following: another person, brace, cane, crutch, prosthetic device, wheelchair, or other assistive device.
- Is severely limited in ability to walk due to an arthritic, neurological or orthopedic condition.
- Other condition that limits or impairs the ability to walk. Specific condition description must be specified below.

I certify and affirm that the described applicant is my patient, whose ability to walk, based on my examination, is limited or impaired or creates a safety concern while walking as described above.

I further certify and affirm that to the best of my knowledge and belief, all information I have presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.

MEDICAL PROFESSIONAL NAME		OFFICE TELEPHONE NUMBER ()	OFFICE FAX NUMBER ()
LICENSE TYPE	LICENSE NUMBER (required)	STATE ISSUING LICENSE (required)	LICENSE EXPIRATION DATE (mm/dd/yyyy) (required)
MEDICAL PROFESSIONAL SIGNATURE			DATE (mm/dd/yyyy)

DMV USE ONLY		
PLATE/PLACARD NUMBER	PLACARD EXPIRATION DATE (mm/dd/yyyy)	EMPLOYEE STAMP
CUSTOMER CREDIT CARD NUMBER	CREDIT CARD EXPIRATION DATE (mm/yyyy)	FEE COLLECTED

Hill, Brian (MRN 7244793)

Encounter Date: 07/18/2016

Brian Hill

7/18/2016 3:30 PM Office Visit

Provider: Demetrios Herodotou, MD

Department: Carilion Clinic, Endocrinology

Dept Phone: 540-224-5170

Patient Preferred Name

No data filed

Basic Information

Date Of Birth	Sex	Race	Ethnicity	Preferred Language
5/26/1990	Male	White or Caucasian	Non-Hispanic	English

Department

Name	Address	Phone	Fax
Carilion Clinic, Endocrinology	3 Riverside Circle Roanoke VA 24016	540-224-5170	540-983-8229

Reason for Visit**Follow-up****Diabetes**

type 1

Reason for Visit History

Your Vitals Were

BP	Pulse	HT	WT	BMI	Smoking Status
132/78 mmHg	89	1.753 m (5' 9")	92.126 kg (203 lb 1.6 oz)	29.98 kg/m2	Never Smoker

To Do ListFriday September 02, 2016
10:45 AMAppointment with Herodotou, Demetrios at Carilion Clinic, Endocrinology
(540-224-5170)
3 Riverside Circle
Roanoke VA 24016**Pending Health Maintenance**

	Date Due	Completion Dates
TDAP IMMUNIZATION	5/26/2001	—
DIABETIC FOOT EXAM	5/26/2008	—
DIABETIC EYE EXAM	5/26/2008	—
DIABETIC 6 MONTH HGA1C	11/6/2016	5/6/2016, 2/1/2016, 10/22/2015, 7/2/2015, 5/4/2015, 1/19/2015, 3/22/2013

Allergies**Anesthetic [Benzocaine-Aloe Vera]**

Other - See Comments

Resident gets out of control

Vaccine Adjuvant Emulsion Combination

No. 1

Resident stated he gets out of control

Zantac [Ranitidine Hcl]

Diarrhea

Your Current Medications Are

insulin aspart (NOVOLOG FLEXPEN) 100 unit/mL Insulin Pen (Taking)	10 Units by Subcutaneous route as directed for Other (follow the sliding scale.)
insulin glargine (LANTUS) 100 unit/mL Solution (Taking)	36 Units by Subcutaneous route every night
omeprazole (PRILOSEC OTC) 20 mg Tablet, Delayed Release (E.C.) (Taking)	take 1 Tab by mouth every day
BD INSULIN SYRINGE ULTRA-FINE 0.5 mL 31 gauge x 5/16 Syringe	1 Each by Subcutaneous route four times daily
BD INSULIN PEN NEEDLE UF MINI 31 X 3/16" (BD INSULIN PEN NEEDLE UF MINI)	1 Each by Subcutaneous route four times daily

PATIENT COPY—Hill, Brian (MRN 7244793) Printed at
7/18/16 4:04 PM

Page 1 of 3

Hill, Brian (MRN 7244793)

Encounter Date: 07/18/2016

Your Current Medications Are (continued)**31 gauge x 3/16" Needle**

Insulin Needles, Disposable, (BD INSULIN PEN NEEDLE UF SHORT) 31 gauge x 5/16" Needle 1 Units by Does not apply route four times daily

glucose blood VI test strips (FREESTYLE INSULINX TEST STRIPS) Strip 1 Strip by external route three times daily

Blood-Glucose Meter (ACCU-CHEK AVIVA PLUS METER) Misc 1 Device by Does not apply route three times daily

Insulin Syringe-Needle U-100 (BD INSULIN SYRINGE ULTRA-FINE) 1 mL 30 x 1/2" Syringe 1 Each by Does not apply route four times daily

Pharmacy

WALGREENS DRUG STORE 12495 - MARTINSVILLE, VA - 2707 GREENSBORO RD AT NWC OF RIVES & US 220

2707 GREENSBORO RD MARTINSVILLE VA 24112-9104

Phone: 276-632-0180 Fax: 276-632-6759

Open 24 Hours?: No

EXHIBIT 11

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



EXHIBIT 2

**For Federal civil complaint
-- MOTION ASKING THE COURT TO
REQUEST LEGAL COUNSEL TO REPRESENT
THE PLAINTIFF -- MOTION AND BRIEF IN
SUPPORT OF THIS MOTION --**

**Brian David Hill v. Executive Office
for United States Attorneys (EOUSA),
United States Department of Justice
(U.S. DOJ)**

Civil Case Number 4:17-cv-00027

DIVISION FOR TREATMENT AND EDUCATION OF AUTISTIC
AND RELATED COMMUNICATION HANDICAPPED CHILDREN

Department of Psychiatry
University of North Carolina

D I A G N O S T I C E V A L U A T I O N

Patient: Brian Hill
Chart #: 60373

D.O.B. 5-26-90

Center: High Point, NC
Date: 10-19-94

Staff: Marquita Fair, Child Therapist
Allison Butwinski, Parent Consultant
Dr. Roger D. Cox, Licensed Practicing Psychologist and
Clinical Director

TESTS ADMINISTERED:

Psychoeducational Profile-Revised (PEP-R)
Vineland Adaptive Behavior Scale

REFERRAL INFORMATION:

Child's Name: Brian Hill
Age: 4 years 5 months
Address: 133 Mike Lane, Reidsville, NC 27320
Parents: Roberta Hill
Current Status: Lives at home with mother and is being served in
a preschool developmental delayed classroom at Bethany
Referral Source: Sheila Shelton
Reason for Referral: Clarification of diagnosis and educational
planning

DEVELOPMENTAL HISTORY:

Brian was born prematurely weighing 3 pounds, 13 1/2 ounces. He received phototherapy for hyperbilirubinemia and was discharged from the hospital at approximately 2 weeks of age. At 18 months, he was hospitalized for 6 days with the onset of insulin dependent Diabetes Mellitus. He currently is taking NPH insulin and Regular insulin and his diet is regulated according to the American Diabetic Association diet. At 35 months Brian was seen at the Greensboro DEC due to language delays. There were concerns regarding Brian's social relatedness and language development. It was felt that his neurodevelopmental profile may represent a form of a pervasive developmental disorder and a TEACCH referral was recommended.

Currently, Brian uses words and short phrases to express his needs. He exhibits pronoun reversals, immediate and delayed echolalia, and repeats some phrases he has heard over and over. He understands and follows simple routine commands but cannot use or answer "Wh" questions.

Though aware of others, Brian has difficulty interacting with them. He is beginning to show an interest in other children but does not initiate interactions. Brian's favorite activities include stacking blocks and listening to music. He recently has become more aware of his mother when she picks him up from school and sometimes greets her by saying "mommy". Brian occasionally becomes upset when he does not have his way and is prone to small episodes of temper tantrums.

FAMILY STATUS:

Brian lives at home with his mother, Roberta Hill in Reidsville. His mother and father are divorced and Brian does not have contact with his father. His maternal grandparents live nearby and he sees them frequently. During the evaluation, Roberta was very friendly and easy to talk to. She offered some very nice information about Brian.

EDUCATIONAL PLACEMENT:

Brian is currently being served in a preschool developmental delayed class at Bethany Preschool in Reidsville. Brian's teacher, Sheila Shelton, who attended the evaluation, felt that Brian had made very nice progress since his enrollment. She appeared flexible and willing to develop a program that considers Brian's individual needs.

DESCRIPTION OF CHILD:

Brian is a cute 4 year 4 month old boy. He was appropriately dressed in long pants and a long sleeved shirt. He was accompanied to the TEACCH Center by his mother, Roberta Hill.

BEHAVIORAL OBSERVATIONS DURING TESTING:

Relating, Cooperating, and Human Interest:

Brian, joined by his mother, accompanied the examiner to the testing room. He whimpered as his mother left the room. When offered a toy, Brian immediately settled down and showed a fleeting interest in the toys on a table. At the start of testing, Brian resisted joining the examiner at the work table. When he became upset, his language consisted largely of echolalia. Although he frequently whined when he did not get his way, he never actually cried. Brian's behavior was unpredictable when he attempted to engage in an activity. When materials were presented, Brian perseverated with them, making it difficult for him to relinquish materials when the task was completed. For example, Brian continued to fuss and ask for bubbles and play-doh

even when they were put away. He asked for the bubbles so often that they were eventually used as a reinforcer when he completed tasks.

Brian's attention to test items varied depending on his interest in the task. When he showed an interest in the items presented, he resisted putting them away. For example, Brian enjoyed doing puzzles, matching colors, and copying shapes. When he was instructed to put them away, he whined and said "do again, do again". Once he became familiar with placing the completed tasks in the "finished basket" it was easier for him to continue on to the next task. He showed limited interest in the kaliedoscope and counting which resulted in him placing incomplete tasks in the "finished basket". Brian was distracted by noises heard outside the door and in the observation booth, which made it difficult to redirect him back to tasks.

Brian was always aware of the examiner's presence. Eye contact was frequent and usually brief. He initiated social interaction by requesting the examiner to join him at the mini-trampoline and holding his hand. Brian appropriately asked for help and used gestures. He often asked for a "tissue please", returning the tissue to the examiner for disposal. He enjoyed being tickled, and although he did not ask for this activity to continue, he backed into the examiner with his arms stretched out as if to indicate that he wanted more.

Sensory Behavior:

Brian usually responded to his name by repeating it. He did not look at the examiner. He appropriately responded to various noisemakers. No unusual interests in taste or textures were noted during testing.

Play and Interest in Materials:

Although Brian often resisted sitting at the work table, he was able to focus on materials when they were presented. He was usually creative in how he used many of the materials. For example, when he used blocks, he made a three dimensional design twice and called them "pyramids". Another time he used the blocks to build "towers". As he identified letters, he told the examiner what each letter stood for; "G for goose", "A for apple", and "Y for yarn". When he used the scissors, he cut out shapes (rectangle and square) and identified them. Brian had his own agenda for completing the tasks. He became upset whenever the examiner suggested that he attempt a task differently.

Brian was most cooperative with tasks that involved writing, copying, matching, and coloring. He anxiously wrote his first and last name several times although not in sequential order. Brian copied shapes, focusing his attention on the examples presented when he was not sure how to draw a shape (triangle and diamond). Brian showed little interest in playing with puppets and pantomiming object use.

During free play, Brian chose to jump on the mini-trampoline, play with a toy motorcycle with a man on it, and walk up and down the

wooden steps. When he realized the steps could be turned over to be a rocking boat, he asked for help to turn it over so he could use it alternately as steps and a boat. Several times, he stood near the door and asked for his mother. However, he was easily redirected back to a play activity.

Competence Motivation:

Brian quickly understood the routine of placing finished materials in the "finished basket" to his right. He often returned to the table if he forgot to put his completed tasks in the "finished basket". Organizing three tasks at a time on a table on Brian's left helped him understand how much work he had to do before he could leave the table to go play.

Brian often expressed pleasure with himself by smiling at the examiner and frequently saying "good job". Verbal praise from the examiner was also motivating to Brian.

Language:

Brian used language and gestures to communicate. At the start of testing, Brian's language consisted mostly of delayed and immediate echolalia. At times, his language was difficult to understand. He often commented during testing, but seldom directing his comments to the examiner. Brian asked questions such as, "can I blow?", "can I do bell again?", and "is this a birthday cake"? However, Brian had much more difficulty answering questions.

RESULTS AND SUMMARY OF THE PEP-R:

The Psychoeducational Profile-Revised (PEP-R) is a developmental test designed specifically for autistic and communication handicapped children. The child's performance is scored in several different function areas, and totalled to provide an overall developmental age score. Brian's overall score was 101, which resulted in an age equivalent of approximately 3 years 9 months.

On the PEP-R, Brian scored as follows:

<u>Function Area</u>	<u>Age Level</u>
Imitation	4 yrs. 6 mos.
Perception	4 yrs. 1 mo.
Fine Motor	3 yrs. 3 mos.
Gross Motor	3 yrs. 1 mo.
Eye Hand Integration	4 yrs. 7 mos.
Cognitive Performance	3 yrs. 3 mos.
Cognitive Verbal	3 yrs. 9 mos.
Developmental Score	3 yrs. 9 mos

When assessed with the PEP-R, Brian's test scores indicated relative weaknesses in the motor area and relative strengths in eye-hand integration.

Brian was able to receptively and expressively identify pictures in a language book, demonstrate the function of objects, sort cards, identify numbers, and sort objects. He had several emerging abilities, including identifying objects by touch, drawing a person, and copying a diamond.

DIAGNOSIS:

Autism - mild range

INTERPRETIVE CONFERENCE SUMMARY:

Attending Brian's interpretive conference were his mother, Roberta Hill, his preschool teacher, Sheila Shelton, and TEACCH staff, Allison Butwinski and Dr. Roger Cox. Results of the test administered were shared indicating Brian has many of the characteristics of mild autism. It is felt that Brian would benefit from a classroom with a small teacher to student ratio, individualized instruction, and autistic interventions.

RECOMMENDATIONS:

1. Brian would benefit from placement in a classroom with a small teacher to student ratio. The classroom environment should be free of distractions. A specific work area should be set up for Brian with a desk and boundaries to minimize distractions.
2. The classroom teacher should be experienced in autism, and have knowledge of structured teaching techniques. A three day training is being offered November 28-30 at the Gateway Education Center in Greensboro. The purpose of this training is to teach strategies that are typically successful in working with and teaching new skills to children with autism.
3. Brian should receive one-on-one teaching sessions 2-3 times a day to develop new skills. A teacher should sit across from Brian and present materials using the routine of working from left to right. Brian will place completed work to his right in a "finished basket". This will help him understand that what he has to do is in a basket to his left, how much work he has to do by the number of baskets with work in them, and he is finished when all the baskets are gone. He should be allowed breaks away from the table between tasks. It is important that Brian understand the contingency of working first and then receiving a break.
4. Brian's IEP should reflect the acknowledgement that he is a child diagnosed with autism. Specific strategies and teaching methods recommended by TEACCH should be addressed.

5. Brian's teacher for next year should be identified as early as possible in order that a request to attend TEACCH summer training for next year can be submitted.

Marquita Fair

Marquita Fair, Child Therapist

Allison Butwinski

Allison Butwinski, Parent Consultant

Roger D. Cox, Ph.D.

Roger D. Cox, Ph.D.
Licensed Practicing Psychologist

EXHIBIT 12

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



URGENT LETTER TO MARTINSVILLE POLICE DEPARTMENT AND CITY OF MARTINSVILLE – FOIA REQUEST

FRIDAY, JANUARY 20, 2022

City of Martinsville ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5000 Fax: 276-403-5280	Martinsville Police Department ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5300 Fax: 276-403-5306
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To Whom it may concern,

Pursuant to the Virginia Freedom of Information Act, I would like to submit a FOIA Request on three different questions I have which can locate records of my request. This is very important and my request is marked Urgent because I need this information as soon as possible. Thank You.

Question #1 (Public policy record question):

What is the length of the evidence retention period of police body-camera footage stored after an incident before it can destroyed? Is it a year? Is it two years? What is the policy of Martinsville Police Department's retention period of retaining body-camera evidence before it is destroyed? (referring to potential evidence not subject to a litigation)

The records I am seeking on this particular question is the policy papers of the Department, and the question may be answered additionally to requesting those records. Policy is usually same as a law or regulation.

Question #2 (Public policy record question):

If the police body-camera footage is subject to litigation (criminal or civil) or was in pending litigation and a Court had ordered the body-camera

footage to either be retained or to be turned over to a defendant as Brady material, does the body-camera footage still fall under the normal retention then destruction period for preserving body-camera footage before the body-camera footage is destroyed or does litigation involving the Police Department prohibit the Police Department from destroying the body-camera footage during pending litigation?

The records I am seeking on this particular question is the policy papers of the Department, and the question may be answered additionally to requesting those records. Policy is same as law, subject to public review.

Question #3:

When did the Martinsville Police Department destroy the body-camera footage recorded on September 21, 2018 of the subject/suspect Brian David Hill? When in 2018 or 2019 was the body-camera footage destroyed regarding Brian David Hill? Any records of when it was destroyed?

It was recorded by Officer Robert Jones at the time. I know it was recording because I saw the device on his uniform light up red. So I know that was a body-camera device and I know it had recorded on that day.

My source told me that the body-camera footage was destroyed. I was told this in August, 2019 or September, 2019, claiming that it was the body-camera evidence retention period as to why it was destroyed. I was told that the body-camera footage was destroyed. My source told me this.

If you do have the body-camera footage, may I have a copy of it to have experts look at it including the Innocence Project of Virginia?

The third question is asking for records concerning myself. **The litigation of the case is closed and the direct appeal had closed.** So I am filing this FOIA request because any post-conviction motions I file, the judge says he does not have jurisdiction, so there is no pending litigation. I have no attorney. That is why I am filing this FOIA request. The Court will not accept any motion I file because the case is closed under Rule 1:1.

I am on a limited income, my only source of income is my Supplemental Security Income (SSI) disability from the Social Security Administration. I am on limited income. So please let me know how much the cost is going to be. **I really need this information. It is very important to me. I have questions that I have a right to have answers to.**

I am Brian David Hill. My SS# is [REDACTED]. DOB is : May 26, 1990.

I am requesting through FOIA, the records concerning myself. The first two questions are just asking about public policy documentation and/or questions about public policy situations, which is usually subject to public review and public scrutiny. So the first two questions should be easy to obtain documents of public police department policy. The third question is answers I need because my source told me that the body-camera footage had been destroyed and was told this around August, 2019 or September, 2019. I needed the body-camera footage because it would have proven that I may have been intoxicated around the time of my arrest and the officer spoke with me when I was possibly intoxicated and/or dehydrated (due to carbon monoxide or anything). My behavior at the time, the way I was acting while being asked questions by Officer Robert Jones. I need the body-camera footage or I need to know when it was destroyed. This would prove something that needs to be proven. I need this information. There is no open criminal case, and any motions I file are denied because of the case being closed under Rule 1:1. So there is no open case. I have to ask through FOIA.

Please I need answers. I need them so that things can be resolved.

Thank You, Where We Go One, We Go All. I appreciate your time and attention to this matter. I am with Q, I am an ally of Qanon because I need answers. I need answers, I need to get to the truth. Jesus Christ said: The Truth shall make me free. I need to know the truth so I can be free.

I do have evidence in the billing record from the Sovah Hospital that I was dehydrated after I was detained by Martinsville Police. The lab work had been deleted from the chart so I may have been intoxicated since the

hospital destroyed evidence I may have been intoxicated at the time of my arrest. There was a cover up, so I need to know the truth so I can have my conviction overturned by the Governor of Virginia.


Signed

Brian D. Hill

God bless you,
Brian D. Hill

Ally of Q, Former news reporter of U.S.W.G.O. Alternative News
310 Forest Street, Apartment 2
Martinsville, Virginia 24112
(276) 790-3505

JusticeForUSWGO.NL or JusticeForUSWGO.wordpress.com



Date: 1/20/2023
Number of pages: 4
Attn.: FOIA Officer
Recipient's number: T1-276-403-5280
Filename: C:\ProgramData\Venta\VentaFax & Voice 6\Out\January 20, 2023(2) {202
File description: Letter to City of Martinsville and Police on FOIA - January 20,
Recipient's Fax ID:
Rate: 14400 bps

Time: 2:04:44 PM
Session duration: 3:56
To: City of Martinsville
Message type: Fax
Error Correction: Yes
Resolution: 200*200 dpi
Record number: 8513

**URGENT LETTER TO MARTINSVILLE POLICE DEPARTMENT
AND CITY OF MARTINSVILLE – FOIA REQUEST**

FRIDAY, JANUARY 20, 2022

City of Martinsville ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5000 Fax: 276-403-5280	Martinsville Police Department ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5300 Fax: 276-403-5306
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The records I am seeking on this particular question is the policy papers of the Department, and the question may be answered additionally to requesting those records. Policy is usually same as a law or regulation.

Question #2 (Public policy record question):

If the police body-camera footage is subject to litigation (criminal or civil) or was in pending litigation and a Court had ordered the body-camera

Date: 1/20/2023
Number of pages: 4
Attn.: FOIA Officer
Recipient's number: T1-276-403-5306
Filename: C:\ProgramData\Venta\VentaFax & Voice 6\Out\January 20, 2023(2) {202
File description: Letter to City of Martinsville and Police on FOIA - January 20,
Recipient's Fax ID: ATA Connector
Rate: 14400 bps
Time: 1:12:42 PM
Session duration: 3:16
To: Martinsville Police Department
Message type: Fax
Error Correction: No
Resolution: 200*200 dpi
Record number: 8511

**URGENT LETTER TO MARTINSVILLE POLICE DEPARTMENT
AND CITY OF MARTINSVILLE – FOIA REQUEST**

FRIDAY, JANUARY 20, 2022

City of Martinsville ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5000 Fax: 276-403-5280	Martinsville Police Department ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5300 Fax: 276-403-5306
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Date: 1/20/2023
Number of pages: 4
Attn.: FOIA Officer
Recipient's number: T1-276-403-5280
Filename: C:\ProgramData\Venta\VentaFax & Voice 6\Out\January 20, 2023(2) {202
File description: Letter to City of Martinsville and Police on FOIA - January 20,
Recipient's Fax ID:
Rate: 14400 bps

Time: 1:15:58 PM
Session duration: 4:08
To: City of Martinsville
Message type: Fax
Error Correction: Yes
Resolution: 200*200 dpi
Record number: 8512

**URGENT LETTER TO MARTINSVILLE POLICE DEPARTMENT
AND CITY OF MARTINSVILLE – FOIA REQUEST**

FRIDAY, JANUARY 20, 2022

City of Martinsville ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5000 Fax: 276-403-5280	Martinsville Police Department ATTN: FOIA Officer or FOIA Authorized official P.O. Box 1112 55 West Church St. Martinsville, VA 24112 Phone: 276-403-5300 Fax: 276-403-5306
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EXHIBIT 13

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



MARTINSVILLE
 1123 SPRUCE ST
 MARTINSVILLE, VA 24112-0098
 518657-0967
 (800) 275-8777
 07/19/2019 09:12 AM

Product	Qty	Unit Price	Price
RM 1-Day (Domestic) (MARTINSVILLE, VA 24112) (Weight: 0 Lb 13.30 Oz) (Expected Delivery Day) (Saturday 07/20/2019)	1	\$7.35	\$7.35
Return Receipt (USPS Return Receipt #) (95590540295271275749741)			\$2.80
Cert Mail RestrDel (Recipient name) (G E CASSADY) (USPS Certified Mail #) (70172680000057509122)			\$8.80
Total:			\$18.95
Cash		\$20.00	
Change		(\$1.05)	

Includes up to \$50 insurance

Text your tracking number to 28777 (USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

Save this receipt as evidence of insurance. For information on filing an insurance claim go to <https://www.usps.com/help/claims.htm>

Preview your Mail
 Track your Packages
 Sign up for FREE @
www.informeddelivery.com

All sales final on stamps and postage. Refunds for guaranteed services only. Thank you for your business.

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RECENT POSTAL EXPERIENCE

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<https://lc.stateexperience.com/Pos>

800-5250-0004-003-00041-12438-02

or scan this code with your mobile device:



U.S. Postal Service
CERTIFIED MAIL RECEIPT

OFFICIAL USE

7017 2680 0000 5750 9122

0242
 13
 edev
 Postmark
 JUL 19 2019
 07/19/2019
 STANLEY

Basic Service Fee	\$2.80
Priority Mail Flat Rate Box, with fee	\$13.55
Return Receipt (hardcopy)	\$3.80
Certified Mail Postage and Insurance	\$0.00
Adult Signature Restricted Delivery	\$0.00
Postage	\$7.35
Total Postage and Insurance	\$13.95

Sent To: **ATTN: Chief G. E. Cassidy**
Martinsville Police Department
55 West Church St.
Martinsville, VA 24112

Very Important Evidence.
 Please sign for it Chief G. E. Cassidy.

I am sorry that it is restricted delivery but I wanted to make sure that the evidence was picked up by somebody in your Department.

Medical records/reports, statement from expert witness Pete Compton a chimney expert. Evidence of threatening greeting card that was received by a citizen of Martinsville.

A lot of important evidence that needs to be picked up and reviewed by the Police Chief and given to Officer R. D. Jones. Please sign for it. Thank you for your time and attention to this matter. Thank you for your service. God Bless. USPS rather it be picked up than redelivered. - Brian

For Fax: 276.403.5306



U.S.W.G.O.

Brian D. Hill
310 Forest Street, Apt. 1
Martinsville, VA 24112

*Brian D. Hill
Signed*



7017 2680 0000 5750 9322



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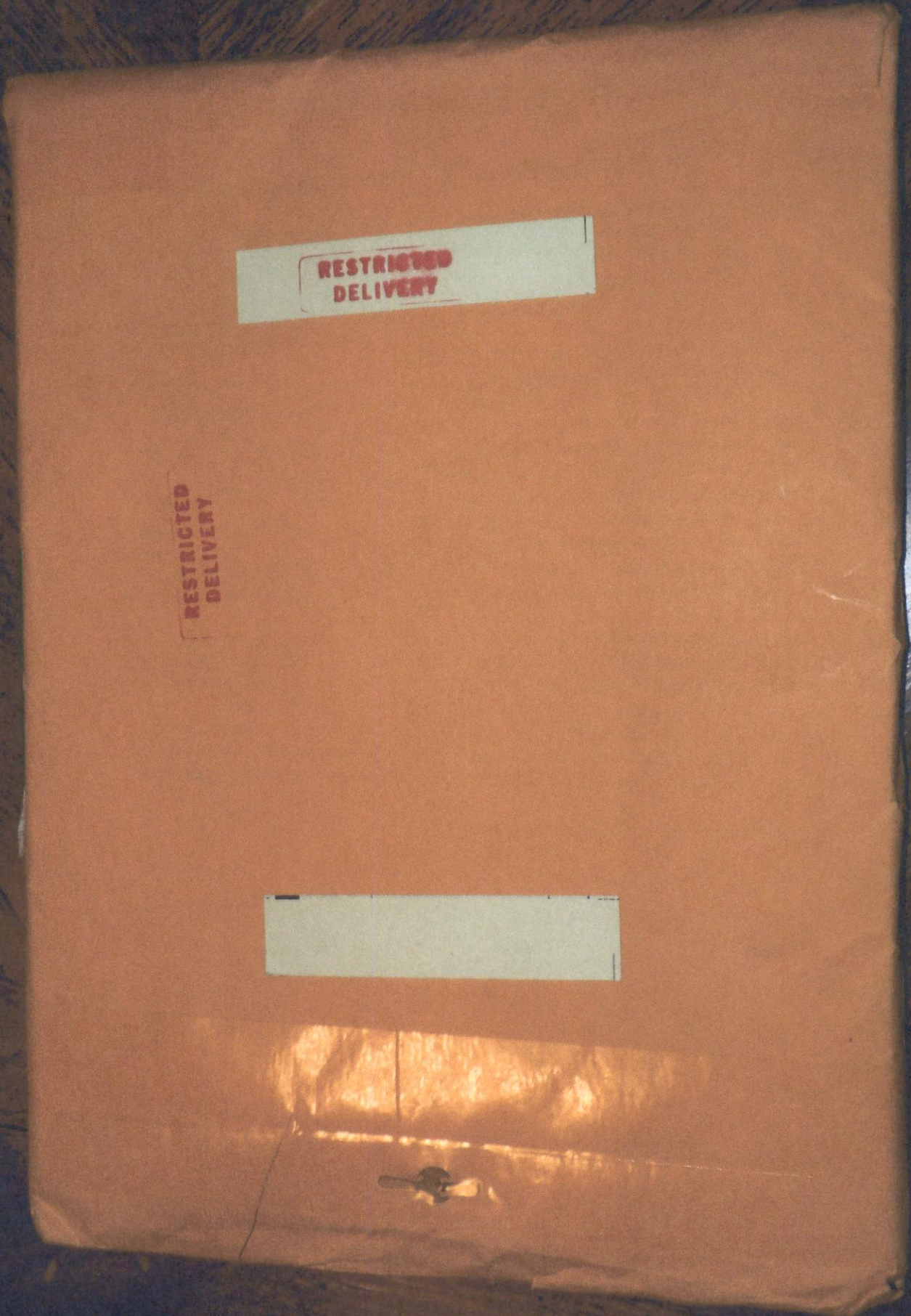
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Brian D. Hill

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Brian D. Hill
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EXHIBIT 14

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

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Additional Responsibilities Of A Prosecutor

A lawyer engaged in a prosecutorial function shall:

- (a) not file or maintain a charge that the prosecutor knows is not supported by probable cause;
- (b) not knowingly take advantage of an unrepresented defendant;
- (c) not instruct or encourage a person to withhold information from the defense after a party has been charged with an offense;
- (d) make timely disclosure to counsel for the defendant, or to the defendant if he has no counsel, of the existence of evidence which the prosecutor knows tends to negate the guilt of the accused, mitigate the degree of the offense, or reduce the punishment, except when disclosure is precluded or modified by order of a court; and
- (e) not direct or encourage investigators, law enforcement personnel, employees or other persons assisting or associated with the prosecutor in a criminal case to make an extrajudicial statement that the prosecutor would be prohibited from making under Rule 3.6.

Comment

[1] A prosecutor has the responsibility of a minister of justice and not simply that of an advocate. This responsibility carries with it specific obligations to see that the defendant is accorded procedural justice and that guilt is decided upon the basis of sufficient evidence.

[1a] Paragraph (a) prohibits a prosecutor from initiating or maintaining a charge once he knows that the charge is not supported by even probable cause. The prohibition recognizes that charges are often filed before a criminal investigation is complete.

[1b] Paragraph (b) is intended to protect the unrepresented defendant from the overzealous prosecutor who uses tactics that are intended to coerce or induce the defendant into taking action that is against the defendant's best interests, based on an objective analysis. For example, it would constitute a violation of the provision if a prosecutor, in order to obtain a plea of guilty to a charge or charges, falsely represented to an unrepresented defendant that the court's usual disposition of such charges is less harsh than is actually the case, e.g., that the court usually sentences a first-time offender for the simple possession of marijuana under the deferred prosecution provisions of *Code of Virginia* Section 18.2-251 when, in fact, the court has a standard policy of not utilizing such an option.

[2] At the same time, the prohibition does not apply to the knowing and voluntary waiver by an accused of constitutional rights such as the right to counsel and silence which are governed by controlling case law. Nor does (b) apply to an accused appearing *pro se* with the ultimate approval of the tribunal. Where an accused does appear *pro se* before a tribunal, paragraph (b) does not prohibit discussions between the prosecutor and the defendant regarding the nature of the charges and the prosecutor's intended actions with regard to those charges. It is permissible, therefore, for a prosecutor to state that he intends to reduce a charge in exchange

for a guilty plea from a defendant if nothing in the manner of the offer suggests coercion and the tribunal ultimately finds that the defendant's waiver of his right to counsel and his guilty plea are knowingly made and voluntary.

[3] The qualifying language in paragraph (c), i.e., “. . . after a party has been charged with an offense,” is intended to exempt the rule from application during the investigative phase (including grand jury) when a witness may be requested to maintain secrecy in order to protect the integrity of the investigation and support concerns for safety. The term "encourage" in paragraph (c) is intended to prevent a prosecutor from doing indirectly what cannot be done directly. The exception in paragraph (d) also recognizes that a prosecutor may seek a protective order from the tribunal if disclosure of information to the defense could result in substantial harm to an individual or to the public interest.

[4] Paragraphs (d) and (e) address knowing violations of the respective provisions so as to allow for better understanding and easier enforcement by excluding situations (paragraph (d)), for example, where the lawyer/prosecutor does not know the theory of the defense so as to be able to assess the exculpatory nature of evidence or situations (paragraph (e)) where the lawyer/prosecutor does not have knowledge or control over the *ultra vires* actions of law enforcement personnel who may be only minimally involved in a case.

Virginia Code Comparison

With respect to paragraphs (a), DR 8-102(A)(1) provided that a “public prosecutor or other government lawyer shall . . . refrain from prosecuting a charge that [he] . . . knows is not supported by probable cause.”

Paragraph (b) is derived from DR 8-102(A)(2) which prohibited prosecutors from inducing an unrepresented defendant to "surrender important procedural rights."

The counterpart to paragraph (c) is DR 8-102(A)(3) which proscribed “discouraging” a person from giving relevant information to the defendants.

Paragraph (d) is similar to DR 8-102(A)(4), but requires actual knowledge on the part of prosecuting lawyers that they are in possession of exculpatory evidence as opposed to simply being in knowing possession of evidence that may be determined to be of such a nature, although acknowledging that such disclosure may be affected by court orders.

Paragraph (e) has no direct counterpart in *Virginia Code*, but it generally parallels DR 7-106 (B), now Rule 3.6(b), which directed that a lawyer “exercise reasonable care to prevent his employees and associates from making a [prohibited] extrajudicial statement.”

Paragraph DR 8-102(A)(5), which prohibited the subpoena of an attorney as a witness in a criminal prosecution regarding a present or past client without prior judicial approval, has been deleted in light of prevailing case law.

Committee Commentary

The Committee retitled this Rule “Additional Responsibilities of a Prosecutor,” rather than “Special Responsibilities of a Prosecutor,” as in the *ABA Model Rule*, to make it clear that the Rule's provisions are in addition to the obligations of the attorney acting in a prosecutorial role as set forth in the remaining Rules. The Committee also thought it appropriate to address the proscriptions of the Rule to any “lawyer engaged in a prosecutorial function” as opposed to just a “prosecutor in a criminal case” so as to eliminate any confusion on the part of any lawyer (such as a County Attorney or assistant Attorney General) who may be acting in the role of a prosecutor without being a member of a Commonwealth's Attorney's office.

The Committee believed that paragraph (a) in which actual knowledge is required is more understandable and more susceptible to ready enforcement where any more subjective standard (such as “or it is obvious”) is too vague. At the same time, the Committee wanted to strengthen the proscription set forth in the *Virginia Code* (“shall refrain”) so as to make clear that the prosecutor should not even file a charge if it is not supported by “probable cause” and should certainly not pursue a charge to trial, even if initially supported by the minimum standard of “probable cause,” if it cannot reasonably be expected to survive a motion to strike the evidence or motion for judgment of acquittal. The original *ABA Model Rule* language only proscribed “prosecuting a charge that... is not supported by probable cause.”

The Committee did not include the language of *ABA Model Rule 3.8(b)* in which the prosecutor is required to “make reasonable efforts to assure that the accused has been advised of the right to, and the procedure for obtaining, counsel and has been given reasonable opportunity to obtain counsel” because the Committee did not believe that such an obligation should formally be placed on the lawyer-prosecutor.

The Committee concluded that the language of proposed paragraph (b) more accurately focuses on the type of prosecutorial conduct that is prohibited, rather than the provision of the existing DR and *ABA Model Rule 3.8(c)* which address the waiver of important procedural rights which, in fact, can be knowingly waived as the Comment attempts to explain. In addition, the Committee felt that the example of the waiver of such a procedural right as that of a preliminary hearing as set forth in the existing DR and *ABA Model Rule* is misleading at best, since it is exceedingly rare that a defendant charged with a felony would insist on proceeding *pro se* and then agree to waive the hearing.

The Committee felt that it was appropriate to strengthen the provisions of DR 8-102(A)(3) to provide that the lawyer acting in a prosecutorial function shall not “instruct or encourage a person to withhold information from the defense” as opposed to the more subjective and less enforceable “shall not discourage.” In addition, in recognition of the reality of the investigative stage of a matter in which a witness may be asked to “keep quiet” in order to protect the witness and the integrity of the investigation, the Committee felt it appropriate to restrict application of the prohibition to that point in the process after formal charge when the “person” becomes a “party.”

The Committee felt a change from existing DR 8-102(A)(4) concerning the disclosure of exculpatory evidence to the defense was appropriate by clarifying that it would apply only to that evidence which the prosecutor knows is exculpatory as opposed to a more subjective analysis of evidence which may be in the knowing possession of the prosecutor but which he does not have reason to believe would be exculpatory.

The Committee felt that the language of the *ABA Model Rule* which speaks in terms of “exercising reasonable care” to prevent others involved in a prosecution from making prohibited extrajudicial statements placed an unreasonable affirmative duty on the attorney acting in a prosecutorial role whereby the attorney would be held responsible for attempting to control the conduct of others.

Finally, the Committee decided to recommend deletion of DR 8-102(5) prohibiting the subpoena of an attorney as a witness in a criminal matter involving a present or former client without prior judicial approval because of prevailing case law and judicial fiat (the United States District Court for the Eastern District of Virginia) which does not require same.

Updated: October 30, 2009

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EXHIBIT 15

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
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EXHIBIT 2

for

EVIDENCE FOR

**MOTION FOR JUDGMENT OF ACQUITTAL BASED UPON
NEW EVIDENCE WHICH COULD NOT BE ADMISSIBLE AT
THE TIME OF CONVICTION; NEW EVIDENCE OF
SPOILIATION OF EVIDENCE COMMITTED BY
COMMONWEALTH OF VIRGINIA; REQUEST FOR
SANCTIONS AGAINST COUNSEL GLEN ANDREW HALL,
ESQUIRE (OFFICER OF THE COURT) FOR VIOLATING
COURT ORDERS FOR NOT TURNING OVER BODY-CAMERA
FOOTAGE AND IT IS LIKELY DESTROYED AND
BIOLOGICAL EVIDENCE OF BLOOD VIALS OBTAINED ON
DAY OF CHARGE**

**Commonwealth of Virginia, City of Martinsville v. Brian David Hill
CASE NO: CR19000009-00**

Thursday, January 20, 2022



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VIRGINIA:
IN THE CIRCUIT COURT OF THE CITY OF MARTINSVILLE

_____)	
COMMONWEALTH OF VIRGINIA,)	
)	
Plaintiff,)	
)	
v.)	Criminal Action No. CR19000009-00
)	
BRIAN DAVID HILL)	
)	
Defendant,)	
)	Motion for Discovery
_____)	
)	

Motion for Discovery

Pursuant to Rule 4:1 of the Virginia Rules of the Supreme Court and U.S. Supreme Court decision of Brady v. Maryland, 373 U.S. 83 S. Ct. 1194; 10 L. Ed. 2d 215; 1963, criminal Defendant Brian David Hill (“Brian”, “Hill”) would like to request that the Commonwealth Attorney (“CA”) be compelled to provide discovery materials to Defense counsel which are both material and relevant to the case. That is for the jury trial for the charge of “indecent exposure” as defined in Virginia Code § 18.2-387. The jury trial is scheduled for August 30, 2019, unless the court considers changing the date for any reason including but not limited to expert witnesses and a mental evaluation to determine sanity at the time of the offense.

Hill and/or his family have attempted to contact Martinsville Police Department (“CC: Commonwealth Attorney”) through written multiple correspondences asking for the body camera footage of Officer Sgt. R. D. Jones, by Hill writing the Martinsville Chief of Police G. E. Cassady asking for the body-camera footage to be turned over to

Brian's defense counsel (*Note: Attorney Scott Albrecht, at the time*) as pertinent to Virginia discovery requirements.

Evidence of attempting to request the police-body-camera footage of September 21, 2018, are made in the following Exhibits:

Exhibit 1) 2-Page U.S.W.G.O. Mailing Log from Brian David Hill of important legal mailings which was mailed while Hill was being mentally evaluated at the Federal Correctional Institution 1 in Butner, North Carolina. The #4 entry was the mailing to the Chief of Police asking for the body-camera footage. Mailing was delivered to the prison Mail Room on January 30, 2019, treated as legal mail and was not fettered with in accordance with Federal Bureau of Prisons policies. **Total of 2-pages.**

Exhibit 2) Photocopy of 1-Page letter from Brian David Hill to the Martinsville Police Chief dated January 19, 2019 while Hill was being mentally evaluated at the Federal Correctional Institution 1 in Butner, North Carolina. Also the second page of this Exhibit is a 1-page photocopy of the mailing envelope with mailing label before it was delivered to the prison Mail Room, treated as legal mail and was not fettered with in accordance with Federal Bureau of Prisons policies. **Total of 2-pages.**

Exhibit 3) 1-Page of U.S.W.G.O. Mailing Log from Brian David Hill of important legal mailings which was mailed while Hill was being mentally evaluated at the Federal Correctional Institution 1 in Butner, North Carolina. The #8 entry was the mailing to the Chief of Police asking for the body-camera footage. Mailing was delivered to the prison Mail Room on January 22, 2019 with

the original letter before the photocopy of that same discovery letter was mailed at a later time (See Exhibit 1). The prison treated the mailing as legal mail and was not fettered with in accordance with Federal Bureau of Prisons policies. **Total of 1-page.**

Exhibit 4) 3-Page letter to the Martinsville Chief of Police, was typed up and mailed to them by Brian David Hill's grandparents. Noted: January 19, 2019 (Typed letter March 13, 2019), "Dear Chief of Police of Martinsville Police Dept: G. Edward Cassady", "CC: Commonwealth Attorney, Case no C18-3138,". Note: The Defendant will be looking for the return receipt to see if it can be located in the pile of papers in the multiple boxes full of legal papers, so that the court will have proof of receipt if necessary. Total of 3-pages.

Exhibit 5) A 2-page news article titled "Body Cameras Proving Useful for Martinsville Police | WSET". It proves that since 2013, Martinsville Police Department records body-camera footage of incidents. That may include recording of Brian David Hill on September 21, 2018, and any statements that he had made in regards to a "man wearing a hoodie" and may be useful in proving that Brian David Hill was not acting right at the time which would help prove that he was under carbon monoxide poisoning. **Total of 2-pages.**

Total evidence of 10 pages of five (5) Exhibits, 5 additional pages for the Exhibit page markers. 15 pages attached to this letter.

ANALYSIS:

From the Virginia Supreme Court rules document:

"The parties have a duty to seasonably supplement and amend discovery responses

pursuant to Rule 4:1(e) of the Rules of Supreme Court of Virginia. Seasonably means as soon as practical. No provision of this Order supersedes the Rules of Supreme Court of Virginia governing discovery. Any discovery motion filed shall contain a certification that counsel has made a good faith effort to resolve the matters set forth in the motion with opposing counsel.”

Since Defendant has sent two letters with “CC: Commonwealth Attorney, Case no. C18-3138,” and family sent one typed letter asking for the police body-camera footage for Hill's case, it is clear that Hill had made a good faith effort to explain to the prosecution and the Police Department that the body-camera footage of what had happened on September 21, 2018, was needed for discovery purposes for the case. The old case number for the General District Court case was referenced because Hill did not know the Circuit Court case number at the time he was sending those letters, but that case number is the very same case number of what was appealed. No responses were ever found or noted. As far as Hill is concerned, there are no responses to his discovery requests. Hill had mailed a copy of the letter (Exhibit 2) to Scott Albrecht while he was still Hill's counsel of record at the time. Attorney Scott Albrecht never informed Hill as to whether or not the body-camera footage was turned over to defense counsel. Therefore no responses are noted and no responses exist in regards to Hill's two attempts to ask for the body-camera footage and Hill's families one attempt in a typed letter asking for the body-camera footage. Three written attempts have been made asking for the body-camera footage this year, in a request to Martinsville Police Department and “CC: Commonwealth Attorney”.

It is clear that Brian David Hill as Defendant is entitled to the police body-camera footage pursuant to Rule 4:1 of the Supreme Court Rules for Virginia Courts as well as Brady v. Maryland case law from the U.S. Supreme Court (law of the land) which also applies to state courts, and any other rule or statute for the discovery process.

Also Hill would like to request from the Commonwealth Attorney and from Martinsville Police Department, that Hill's defense counsel get access to any blood-work or blood samples taken from Hill while he was at Sovah Hospital on September 21, 2018, before he was arrested. This includes any laboratory results, blood vials taken at the time of Hill's arrest, blood samples taken at the time of Hill's arrest, etc etc. Blood was clearly taken from Hill while he was at the Hospital, but since he was arrested, the Hospital likely would have given the blood drawn to the Police for conducting their own laboratory tests including but not limited to possible drugs.

Last page of Exhibit 10 in the evidence Exhibits which were attached to Brian's filed pro se Motion (Seq. # 22, filed 07/19/2019, evidence attached to this filing was filed on 07/22/2019 after being given to Clerk's office) for Defense of Mental Insanity "INSANITY DEF-FILED BY DEF", shows that laboratory results were ordered but later deleted from the chart and then Hill was released to Martinsville City Jail as stated in the medical records. Because Hill was escorted there with law enforcement, the Hospital likely had given the blood vials to the Martinsville Police Department to conduct their own laboratory work. That would mean a possibility that the Police Department has the blood samples, and the blood vials are likely in evidence storage for the indecent exposure investigation. Those are also subject to discovery for defense counsel. The blood vials are needed to conduct laboratory tests to find evidence of Carbon Monoxide poisoning in the blood with a lab test of "carboxyhemoglobin" which would prove that Carbon Monoxide was in the blood of Brian David Hill during the time of the alleged offense on September 21, 2018. Hill had asked Attorney Scott Abrecht, after he had turned himself in (Seq. #15, 05/30/2019, "HILL TURNED HIMSELF IN") to find the laboratory results but Hill later learned from his family that the Commonwealth Attorney didn't have the laboratory results, but the Commonwealth

Attorney never said anything to Scott Albrecht about the blood vials and blood-work that was drawn while Hill was at the hospital. So the blood vials may still exist as evidence and may be retained by Martinsville Police Department due to Sovah Hospital's policy in regards to a patient that is escorted by law enforcement or was with law enforcement.

Therefore for the following reasons, Hill respectfully requests with this honorable Court that the Court grant this motion for Discovery and compel the Commonwealth Attorney and Martinsville Police Department (who the Commonwealth represents) to turn over the evidence of the body-camera footage (*as noted above*) to Defense counsel, and the blood-work and/or blood-vials of Brian David Hill (*at the time he was arrested*) to Defense counsel. That the Court order all discovery evidence that the Commonwealth Attorney and Martinsville Police Department has withheld be turned over to Defense counsel As Soon As Possible.

WHEREFORE, the Defendant, Brian David Hill, prays that this Court enter an Order compelling discovery materials be turned over to Defense Counsel in regards to the issues stated herein.

Hill respectfully files this Motion with this honorable Court, this the 26th day of July, 2019.

Signed, Brian D. Hill
Signed
 Brian D. Hill (Pro Se)
 Phone #: 276-790-3505
 310 Forest Street, Apartment 1
 Martinsville, Virginia 24112

U.S.W.G.O.

Amazon: The Frame Up of Journalist Brian D. Hill
Stanley's 2255 blog: JusticeForUSWGO.wordpress.com

Qanon

Brian D. Hill asks President Donald John Trump and QANON for help.

This pleading has been filed by hand delivery to the office of the Hon. Ashby Pritchett, Clerk's office at the Martinsville Circuit Court on July 26, 2019, at the address of 55 West Church Street, Martinsville, Virginia 24112.

CERTIFICATE OF SERVICE

I hereby certify that on this 26th day of July, 2019, a true copy of the foregoing Motion/Pleading was hand delivered to the office of the Commonwealth Attorney of Martinsville, at 55 West Church Street, Martinsville, Virginia 24112, counsel for Plaintiff of the Commonwealth of Virginia.

Signed, Brian D. Hill
Signed

Brian D. Hill (Pro Se)
Phone #: 276-790-3505
310 Forest Street, Apartment 1
Martinsville, Virginia 24112

U.S.W.G.O.

Amazon: The Frame Up of Journalist Brian D. Hill
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Qanon

Brian D. Hill asks President Donald John Trump and QANON for help.

Exhibit 1

USWGO
QANON // DRAIN THE SWAMP
MAKE AMERICA GREAT AGAIN

Qanon **U.S.W.G.O.** Qanon

MARTINSVILLE VIRGINIA CIRCUIT COURT CASE NO. CR19000009-00
"Motion for Discovery"

UNITED STATES DISTRICT COURT CASE NO. 1:13-CR-435-1
MIDDLE DISTRICT OF NORTH CAROLINA

Mailing Log 2019 U.S.W.G.O. Brian David Hill #29947-057

Federal Correctional Institution 1, Butner, N.C.
Old N.C. Hwy 75 - P.O. Box 1000 - 27509

#1	4pg	Jason McMurray, Western Dist. of Virginia, U.S. Probation Office, 210 Franklin RD SW, Roanoke, VA 24011 01/25/2019
#2	4pg	Alexandria Veletsis, Exe. Office of President, 1600 Pennsylvania Ave NW, The White House, Washington DC 20005, US 01/28/2019
#3	10pg	Hon Ashby Pritchett, Clerk of the Court, P.O. Box 1206, Martinsville Circuit CRT, Martinsville, VA 24114-1206, US 01/28/2019
#4	2pg	Chief of Police, Police of Martinsville, Martinsville VA Police, 55 West Church St, Municipal Building, Martinsville, VA 24112 US 01/30/2019
#5	5pg	Alexandria Veletsis, Exe. Office of President, 1600 Pennsylvania Ave NW, The White House, Washington DC 20005, US 01/31/2019
#6	1pg	Law Office of Marcia G. Shein (Attorney), Marcia G. Shein, 2392 N Decatur RD, Decatur, GA 30033, US 02/01/2019
#7	1pg	Law Offices of Alan Ellis (Attorney), Alan Ellis, 271 Madison Ave 20th Floor, New York, NY 10016, US 02/04/2019
#8	4pg	ATTN: National Security Council, The White House, Exe. Office of President, 1600 Pennsylvania Ave, NW, National Security Council, Washington, DC 20005, US 02/04/2019, Letter Feb. 3 2019
#9	3pg	Clerk of The Court, 210 Franklin RD SW, U.S. District Court, Roanoke, VA 24011, US 02/06/2019
#10	1pg	Office of The Clerk, Middle Dist North Carolina, 324 W Market St, U.S. District Court, Ste. 1, Greensboro, NC 27401-2513, US 02/07/2019
#11	5pg	ATTN: National Security Council. Same mailing address as #8 02/14/2019

- #1. 2-page letter to U.S. Probation Officer Jason McMurray, Copy of 1-page letter to Chief of Police dated January 19th, 2019 and Copy of 1-page letter to Chief of Police dated January 20th, 2019.
- #2. 4-page letter to Alexandria Veletsis dated January 26, 2019.
- #3. 3-page Testimony of Brian David Hill - Declaration and 3-page copy for Commonwealth Attorney; 2-page Notice of Additional Evidence and 2-page copy dated Jan 28, 2019, for Commonwealth Attorney. Testimony dated January 27, 2019.
- #4. copy of 1-page letter to Chief of Police dated January 20, 2019, and copy of 1-page letter to Chief of Police dated January 19, 2019.
- #5. Photocopy of same 4-page letter to Alexandria Veletsis (#2.) dated January 26, 2019; Copy of 1-page letter personally delivered to Bernie Maidoff delivered 5:35PM January 30, 2019.
Certified mail tracking number: 7018 1130 0000 8936 6290
- #6. 1-page letter to Attorney Marcia G. Shein dated February 1, 2019.
- #7. 1-page letter to Attorney Alan Ellis dated February 1, 2019.
- #8. 4-page letter to the National Security Council dated February 3, 2019.
Certified Mail tracking number: Feb. 3 7018 1130 0000 8936 6320
- #9. 1-page Motion to Request Transcripts, 1-page Certificate of Service, and 1-page letter to the Clerk of the Court dated February 6, 2019.
- #10. 1-page Docket Report request letter to Clerk of the Court dated February 7, 2019.
- #11. 4-page letter to National Security Council dated February 13, 2019. 1-page photocopy of Request to Staff dated 02/13/2019 06:49:30PM. Certified Mail tracking no. 7018 1130 0000 8936 6306

Exhibit 2

USWGO
QANON // DRAIN THE SWAMP
MAKE AMERICA GREAT AGAIN

Qanon **U.S.W.G.O.** Qanon

MARTINSVILLE VIRGINIA CIRCUIT COURT CASE NO. CR19000009-00
"Motion for Discovery"

UNITED STATES DISTRICT COURT CASE NO. 1:13-CR-435-1
MIDDLE DISTRICT OF NORTH CAROLINA

Dear Chief of Police of Martinsville Police Dept,
 CC: Commonwealth Attorney, Case no. C18-3138,
 55 West Church Street,
 Municipal Building,
 Martinsville, VA 24112, Martinsville Circuit Court case
 Discovery Request

Under Virginia Code in regards to discovery requirements for misdemeanor and felony trials in the Commonwealth of Virginia, Brady v. Maryland, Giglio v. U.S., Brian David Hill hereby requests a copy of Police Body-Camera footage presumably recorded by Sgt. R.D. Jones of Martinsville Police Department between the times of 3:00AM and 4:00AM, September ~~20~~ 21, 2018, where I gave statements about the man wearing the hoodie who had threatened to kill my mother Roberta Hill on the late night of September 20, 2018. Please turn over that Police body camera footage recording evidence copy to my Attorney Scott Albrecht of the Martinsville Public Defender Office, As Soon As Possible. Thank You for your service.

My Respects,
 Brian D. Hill

Dated January 19, 2019.

P.S. Brian Hill has Autism
 Spectrum Disorder in DMV
 handicap placard records.

^{Signed}
 Brian David Hill #29947-057
 Federal Correctional Institution 1
 Old NC Hwy 75; P.O. Box 1000
 Butner, N.C. 27509
 JusticeForUSWGO.wordpress.com
 U.S.W.G.O.

Exhibit 3

USWGO
QANON // DRAIN THE SWAMP
MAKE AMERICA GREAT AGAIN

Qanon **U.S.W.G.O.** Qanon

MARTINSVILLE VIRGINIA CIRCUIT COURT CASE NO. CR19000009-00
“Motion for Discovery”

UNITED STATES DISTRICT COURT CASE NO. 1:13-CR-435-1
MIDDLE DISTRICT OF NORTH CAROLINA

FCI², Butner, N.C.
 Brian David Hill #29947-057

Mailing Log 2019 U.S.W.G.O.

Brian David Hill #29947-057

Federal Correctional Institution¹, Butner, N.C.

- | | | |
|-----|------|--|
| #1 | 1 pg | ↔29947-057 ↔ Federal Building, 324 W Market St
Suite 1, Greensboro, NC 27401-2513, US 01/14/2019
Clerk of the Court - 01/26/2019 01-14-2019 |
| #2 | 2 pg | Hon Ashby Pritchett, Clerk of the Court PO Box 1206,
Martinsville Circuit CRT, Martinsville, VA 1206, US
01/14/2019 |
| #3 | 2 pg | Scott Albrecht Public Defender Office, 31 P.O. Drawer,
Martinsville, VA 24114 US - 01/15/2019 01/18/2019 |
| #4 | 2 pg | Clerk of the Court, U.S. District Court, Federal Building, 324
W Market St Suite 1, Greensboro, NC 27401-2513,
US 01/18/2019 |
| #5 | 2 pg | Office of VA Attorney General 202 N 9TH ST
Virginia Attorney General, Richmond VA 23219 US
01/17/2019 - 7018-1130-0000-8936-6214 Certified |
| #6 | 2 pg | Administra Office Of Us Courts Admin. Office of US
Courts 1 Columbus CIR NE Probation Oversight Branch,
Washington, DC 20002 US [Urgent] 01/17/2019 |
| #7 | 4 pg | Clerk of the Court 210 Franklin Rd SW U.S. District Court,
Roanoke VA 24011 US 01/18/2019 |
| #8 | 4 pg | Chief of Police, Police of Martinsville, 55 W Church St,
Municipal Building, Martinsville, VA 24112 US 01/22/2019 |
| #9 | 4 pg | Us Federal Courthouse, Hon. Judge Joe Webster, Magistrate 323 E Chapel
Hill St, Room 2, Durham, NC 27701-3351, US 01/24/2019 |
| #10 | 4 pg | Anand P Ramaswamy, AUSA United States Attorney 101 S Edgeworth St
4th Floor, Greensboro NC 27401 US 01/24/2019 |
| #11 | 2 pg | Attorney Scott Albrecht, Public Defender Office, 31 P.O. Drawer,
Martinsville, VA 24114 US 01/24/2019 |

Exhibit 4

USWGO
QANON // DRAIN THE SWAMP
MAKE AMERICA GREAT AGAIN

Qanon **U.S.W.G.O.** Qanon

MARTINSVILLE VIRGINIA CIRCUIT COURT CASE NO. CR19000009-00
“Motion for Discovery”

UNITED STATES DISTRICT COURT CASE NO. 1:13-CR-435-1
MIDDLE DISTRICT OF NORTH CAROLINA

January 19, 2019 (Typed letter March 13, 2019)

Dear Chief of Police of Martinsville Police Dept: G. Edward Cassady

CC: Commonwealth Attorney, Case no C18-3138,

55 West Church Street Municipal Building Martinsville, VA 24112

Martinsville Circuit Court case Discovery Request

Under Virginia Code in regards to discovery requirements for misdemeanor and felony trials in the Commonwealth of Virginia, Brady v Maryland, Giglio v U.S., Brian Hill hereby requests a copy of Police-Camera footage presumably recorded by Sgt. R.D. Jones of Martinsville Police Department between the times of 3:00AM and 4:00AM, September 20, 2018, where I gave statements about the man wearing the hoodie, who had threatened to kill my mother Roberta Hill on the late night of September 20, 2018. Please turn over that Police body camera footage recording evidence copy to my Attorney Scott Albrecht of the Martinsville Public Defender Office, As Soon As Possible. Thank you for your service.

My Regards,

Brian D. Hill (Signed)

Dated January 19, 2019

P.S. Brian Hill has Autism Spectrum Disorder in DMV handicap placard records

Brian David Hill #29947-057 Federal Correctional Institution 1
Old NC Hwy 75; P.O. Box 1000 Butner, NC 27509
JusticeForUSWGO.wordpress.com USWGO

(Letter 1)

January 20, 2019 (Typed letter March 13, 2019)

Dear Chief of Police of Martinsville Police Department: G. Edward Cassady

CC: Commonwealth Attorney, Case no C18-3138,

55 West Church Street Municipal Building Martinsville, VA 24112

Martinsville Circuit Court case

There are more facts that must be known about me in this case which involve my mental/neurological disability/handicap of Autism Spectrum Disorder. The man that had threatened to kill my mother Roberta Hill if I didn't get naked and take pictures of myself is a form of verbal sexual abuse similar to a pedophile threatening a kid to get naked. I almost would have gotten sexually taken advantage of by an inmate named Crutchfield while I'm being evaluated mentally here meaning, I would have been raped if other inmates with life sentences had not taken up for me and protected me that are against rape. Research on Google that people with Autism are more likely to be verbally and physically sexually abused. The man wearing the hoodie wanted to take advantage of me. Please contact Renetta Craighead of Piedmont Community Services and REACH. They will explain to you about my condition. I never should have been arrested and should have been placed in witness protection. This case should be dismissed. I am Innocent. Thank you.

My respects,

Brian D. Hill (Signed)

Dated January 20, 2019

Caretaker: Roberta Hill:
276-790-3505, 276-224-7373
Kenneth Forinash, U.S.A.F:
276-632-2599, 276-224-4527

Brian David Hill #29947-057
Federal Correctional Institution
Old NC Hwy 75; PO Box 1000
Butner, NC 27509

Copy of note mailed with letter dated January 19, 2019

**Chief of Police and Commonwealth Attorney in Martinsville,
VA,**

Please acknowledge receipt of letters. Please write response.

Thank you

Brian D. Hill

God bless you!

Note: In a week of no response, I will assume that it was lost and mail another copy. Thanks.

Note from Brian's grandparents. Brian wrote this on January 19, 2019 and January, 20, 2019. He received no response, He sent it again and received no response a week later. After waiting almost two months, his grandparents will have to go to the post office and send this out return receipt requested. You also should know that Brian has been on disability since the age of 19 months; has brittle diabetes requiring insulin shots, has seizures, autism, anxiety and OCD. His actions that night were not normal. He was a victim who was arrested and sent to jail by the police who are supposed to protect its citizens and disabled. Brian's mom and grandparents were at the trial and noticed the prosecuting attorney making derogatory comments and making fun of this disabled citizen of Martinsville in front of his family and many other people in the court room.

*Brian, We are also sending a copy
of the 3 page disabled parking placard
with your disability (autism) &
your name & address with this letter ^{to} chief _{of} Police*

Exhibit 5

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Qanon **U.S.W.G.O.** Qanon

MARTINSVILLE VIRGINIA CIRCUIT COURT CASE NO. CR1900009-00
“Motion for Discovery”

UNITED STATES DISTRICT COURT CASE NO. 1:13-CR-435-1
MIDDLE DISTRICT OF NORTH CAROLINA



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Tip: To quickly find your search term on this page, press **Ctrl+F** or **⌘-F** (Mac) and use the find bar.

ADVERTISEMENT



Useful for Martinsville Po

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Martinsville, VA -- The Martinsville Police Department says a small device has been making a big difference in fighting crime.

About a year ago, they got 38 cameras that the officers wear. They received the cameras because of a grant from the Virginia Municipal League. And they say they have really proven themselves.

Even on a very routine call, every word spoken and every movement taken will be captured clearly.

"Having this thing with us is like having someone with us whose memory is infallible," said Sgt. Chad Rhoads with the Martinsville Police Department.

Captain Eddie Cassady calls the cameras "like another officer" watching out for his force.

"They have been very useful for us," said Cassady.

For about a year, every Martinsville Police patrolling officer has worn one of these cameras. And for such a small device, it does a lot even capturing the sound of cars driving by in the distance.

"It helps clear up any disagreements. Anytime you talk to somebody, there are two different versions of what went on," said Rhodes.

And Rhoads explains, this camera shows the real version.

"It helps us investigate cases. It also helps us identify potential witnesses in other crime scenes too," said Cassady.

In the past few months, it did something they didn't even expect. When a man

FILED IN THE CLERK'S OFFICE
OF THE CIRCUIT COURT OF THE
MARTINSVILLE CIRCUIT COURT

DATE: 07/26/2019 @10:59:43

TESTE: Jennifer C. Coplin
CLERK DEPUTY CLERK

EXHIBIT 16

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



EXHIBIT PAGE 248 OF 337

Billing Provider National Provider Identifier (NPI)	Billing Provider Name	Servicing Provider National Provider Identifier (NPI)	Servicing Provider Name	Claim Number	Legacy Claim Number	Service From Date	Service Through Date	Paid Date	Primary Diagnosis Code	Primary Diagnosis Name	Claim Line	Pro- cedure Code	Procedure Name	NDC	Drug Brand Name	Billed Amount	Paid Amount	Claim Enc Code
1033143466	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$1,838.00	\$171.86	Total
1033143466	EDNA E EKUBAN-GORDON , MD	1033143466	EDNA E EKUBAN-GORDON , MD	T1804160138747BCPEPO	2018106923412601	11/19/2017	11/19/2017	3/23/2018	S0181XA	Laceration w/o foreign body of oth part	1	99285	EMERGENCY DEPT VISIT			\$1,450.00	\$122.22	Y
1033143466	EDNA E EKUBAN-GORDON , MD	1033143466	EDNA E EKUBAN-GORDON , MD	T1804160138748BCPEPO	2018106923412701	11/19/2017	11/19/2017	3/23/2018	S0181XA	Laceration w/o foreign body of oth part	1	12013	RPR F/E/E/N/L/M 2.6-5.0 CM			\$388.00	\$49.64	Y
1386720183	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	Total	\$9,123.62	\$760.23	Total
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	1	96361	HYDRATE IV INFUSION ADD-ON			\$9,123.62	\$760.23	Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	2	80053	COMPREHEN METABOLIC PANEL					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	3	82962	GLUCOSE, BLOOD BY GLUCOSE MONITORIN					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	4	84443	ASSAY THYROID STIM HORMONE					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	5	85025	COMPLETE CBC W/AUTO DIFF WBC					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	6	71010	CHEST X-RAY 1 VIEW FRONTAL					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	7	70450	CT HEAD/BRAIN W/O DYE					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	8	12002	RPR S/N/AX/GEN/TRNK2.6-7.5CM					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	9	96374	THER/PROPH/DIAG INJ IV PUSH					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	10	99284	EMERGENCY DEPT VISIT					Y
1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	1386720183	Danville Regional Medical LLC dba Sovah Health-Dan	T1808200009661BCPEIR	2018232916719901	11/19/2017	11/19/2017	7/18/2018	E1165	Type 2 diabetes mellitus with hyperglyce	11	93005	ELECTROCARDIOGRAM TRACING					Y

EXHIBIT 17

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



Re: Brian D. Hill asked me to send this email to you about his appealed case

From: Eric S Clark (eric@whitestonepublishing.org)
To: kenstella2007@yahoo.com; salbrecht@mar.IDC.Virginia.gov
Cc: rbhill67@yahoo.com
Date: Thursday, December 27, 2018 at 11:21 PM EST

Concerning this part:

Also please email Scott Albrecht and see if he wishes to represent me on appeal or notify the Court that he cannot represent me so a new lawyer can be appointed as soon as possible for Circuit Court

If Scott wishes to get involved, he will have to work with Eric Clark since he has the three Virginia appeal case laws that I had messaged him.

Brian already had me forward messages on Christmas day and those messages (MESSAGE 1) had the three case law citations.

Obtaining body cam footage through discovery and an expert witness from REACH (concerning autism) are probably

the key things. Should be able to file a motion in limine or a motion for directed verdict base on those evidences.

**As for the January 28, 2019 Court date, they should allow a "motion for continuance"
IF Brian and his attorney (whether Scott or someone else) are not ready for trial.**

Let me know if there's anything I can do to help.

**Eric Clark
785-214-8904**

From: [Ken & Stella](#)
Sent: Thursday, December 27, 2018 9:46 PM
To: salbrecht@mar.IDC.Virginia.gov
Cc: [Eric S. Clark](#) ; [Roberta Hill](#)
Subject: Brian D. Hill asked me to send this email to you about his appealed case

Attorney Albrecht:

Brian David Hill, our grandson is in the Western Regional Virginia jail. He has asked us to send you an email with these statements and asking these

questions: Please reply to this email letting us know that you have read this.

My scheduled court date for the Martinsville Circuit Court is January 28, 2019.

I will file a motion for Writ of Actual Innocence and motion for new trial pursuant to Virginia Code Sec. 19.2-265.4 a failure to provide discovery in Misdemeanor and felony cases. The bodycam footage and 911 recording is another one. I will fill out the ADA Accommodation form for my Circuit Court case on January 28, 2019.

Also please email Scott Albrecht and see if he wishes to represent me on appeal or notify the Court that he cannot represent me so a new lawyer can be appointed as soon as possible for Circuit Court

If Scott wishes to get involved, he will have to work with Eric Clark since he has the three Virginia appeal case laws that I had messaged him. (Eric's email address is above).

Brian is also filling out an accommodation form for disabled citizens.

Sincerely,

Ken & Stella Forinash
(Brian David Hill's grandparents)

EXHIBIT 18

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
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Brian Hill
 MRN: MM00370912
 ACCT: MM7806761243

Sovah Health Martinsville

320 Hospital Drive
 Martinsville, VA 24112
 276-666-7237

7806761243

**Emergency Department
 Instructions for:**

Hill, Brian D

Arrival Date:

Friday, September 21, 2018

Thank you for choosing **Sovah Health Martinsville** for your care today. The examination and treatment you have received in the Emergency Department today have been rendered on an emergency basis only and are not intended to be a substitute for an effort to provide complete medical care. You should contact your follow-up physician as it is important that you let him or her check you and report any new or remaining problems since it is impossible to recognize and treat all elements of an injury or illness in a single emergency care center visit.

Care provided by: Hinchman, Brant, DO

Diagnosis: Abrasion, right knee; Abrasion of unspecified front wall of thorax

DISCHARGE INSTRUCTIONS	FORMS
VIS, Tetanus, Diphtheria (Td) - CDC Abrasion, Easy-to-Read Knee Pain, Easy-to-Read	Medication Reconciliation
FOLLOW UP INSTRUCTIONS	PRESCRIPTIONS
Private Physician When: Tomorrow; Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care Emergency Department When: As needed; Reason: Fever > 102 F, Trouble breathing, Worsening of condition	None
SPECIAL NOTES	
None	

National Hopeline Network: 1-800-784-2433

If you received a narcotic or sedative medication during your Emergency Department stay you should not drive, drink alcohol or operate heavy machinery for the next 8 hours as this medication can cause drowsiness, dizziness, and decrease your response time to events.

I hereby acknowledge that I have received a copy of my transition care record and understand the above instructions and prescriptions.

Brian D. Hill

 Brian Hill

Jenica Tate, RN, BSN

 ED Physician or Nurse
 09/21/2018 04:52

EMERGENCY DEPARTMENT RECORD

Physician Documentation
Sovah Health Martinsville
Name: Brian Hill

Age: 28 yrs

Sex: Male

DOB: 05/26/1990

MRN: MM00370912

Arrival Date: 09/21/2018

Time: 04:04

Account#: MM7806761243

Bed ER 9

Private MD:

ED Physician Hinchman, Brant

HPI:

09/21

04:40 This 28 yrs old White Male presents to ER via Law Enforcement with complaints of Knee Pain. bdh

09/21

04:48 28-year-old male with diabetes and autism presents for evaluation after complaining of right knee pain and scrapes and abrasions. bdh
Patient was apparently taking pictures of himself in the nude across town this evening and when police attempted apprehend him brain through Briar patch. Patient does report scratches and abrasions to the right knee but no pain on range of motion. Unknown last tetanus..

Historical:

- Allergies: Ranitidine;

- PMHx: autism; Diabetes - IDDM; OCD;

- Exposure Risk/Travel Screening:: Patient has not been out of the country in last 30 days. Have you been in contact with anyone who is ill that has traveled outside of the country in the last 30 days? No.

- Social history:: Tobacco Status: The patient states he/she has never used tobacco. The patient/guardian denies using alcohol, street drugs, The patient's primary language is English. The patient's preferred language is English.

- Family history:: No immediate family members are acutely ill.

- Sepsis Screening:: Sepsis screening negative at this time.

- Suicide Risk Screen:: Have you been feeling depressed in the last couple of weeks? No Have you been feeling hopeless to the extent that you would want to end your life? No Have you attempted suicide or had a plan to attempt within the last 12 months? No.

- Abuse Screen:: Patient verbally denies physical, verbal and emotional abuse/neglect.

- Tuberculosis screening:: No symptoms or risk factors identified.

- The history from nurses notes was reviewed: and my personal history differs from that reported to nursing.

ROS:

09/21

04:49 All other systems are negative, except as documented below. bdh

Constitutional: Negative for chills, fever. Respiratory: Negative for

Brian Hill
MRN: MM00370912
ACCT: MM7806761243

FOLLOW UP INSTRUCTIONS

Private Physician

When: Tomorrow

Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care

Emergency Department

When: As needed

Reason: Fever > 102 F, Trouble breathing, Worsening of condition

→ 806761243

Brian Hill
MRN: MM00370912
ACCT: MM7806761243

MRN # MM00370912

X-RAYS and LAB TESTS:

If you had x-rays today they were read by the emergency physician. Your x-rays will also be read by a radiologist within 24 hours. If you had a culture done it will take 24 to 72 hours to get the results. If there is a change in the x-ray diagnosis or a positive culture, we will contact you. Please verify your current phone number prior to discharge at the check out desk.

MEDICATIONS:

If you received a prescription for medication(s) today, it is important that when you fill this you let the pharmacist know all the other medications that you are on and any allergies you might have. It is also important that you notify your follow-up physician of all your medications including the prescriptions you may receive today.

TESTS AND PROCEDURES

Labs

None

Rad

None

Procedures

None

Other

Call ERT, IV saline lock

Chart Copy

7806761234

cough, dyspnea on exertion, shortness of breath. MS/extremity:
Positive for pain, Negative for decreased range of motion,
paresthesias, swelling, tenderness, tingling. Skin: Positive for
abrasion(s), Negative for rash, swelling.

Exam:

09/21

04:49 Constitutional: This is a well developed, well nourished patient who bdh
is awake, alert, and in no acute distress. Head/Face: Normocephalic,
atraumatic. Eyes: Pupils equal round and reactive to light,
extra-ocular motions intact. Lids and lashes normal. Conjunctiva
and sclera are non-icteric and not injected. Cornea within normal
limits. Periorbital areas with no swelling, redness, or edema. ENT:
Oropharynx with no redness, swelling, or masses, exudates, or
evidence of obstruction, uvula midline. Mucous membranes moist. No
meningismus. Neck: Supple, full range of motion without nuchal
rigidity, or vertebral point tenderness. No Meningismus. No JVD
Cardiovascular: Regular rate and rhythm with a normal S1 and S2. No
gallops, murmurs, or rubs. No JVD. No pulse deficits. Respiratory:
Lungs have equal breath sounds bilaterally, clear to auscultation and
percussion. No rales, rhonchi or wheezes noted. No increased work
of breathing, no retractions or nasal flaring. Abdomen/GI: Soft,
non-tender, with normal bowel sounds. No distension or tympany. No
guarding or rebound. No pulsatile mass. Back: No spinal
tenderness. No costovertebral tenderness. Full range of motion.
Skin: Multiple superficial abrasions to the groin and abdomen
without fluctuance or tenderness. MS/ Extremity: Pulses equal, no
cyanosis. Neurovascular intact. Full, normal range of motion. No
peripheral edema, tenderness. Abrasion to right knee but nontender,
no deformity or swelling. Ambulating without difficulty. Neuro:
Awake and alert, GCS 15, oriented to person, place, time, and
situation. Cranial nerves II-XII grossly intact. Psych: Awake,
alert, with orientation to person, place and time. Behavior, mood,
and affect are within normal limits.

Vital Signs:

09/21

04:09 BP 124 / 86; Pulse 119; Resp 19; Temp 98; Pulse Ox 98% ; Weight 99.79 jt
kg; Height 6 ft. 0 in. (182.88 cm); Pain 0/10;

09/21

05:01 BP 119 / 80; Pulse 106; Resp 16; Temp 98.2; Pulse Ox 99% ; Pain 0/10; jt
09/21

04:09 Body Mass Index 29.84 (99.79 kg, 182.88 cm) jt

MDM:

09/21

04:04 MSE Initiated by Provider. bdh

09/21

04:50 Differential diagnosis: fracture, sprain, penetrating trauma, et al. bdh
ED course: Cleared from a psychiatric standpoint by Behavioral
Health. Patient will be discharged to jail. No new complaints.. Data
reviewed: vital signs, nurses notes. Counseling: I had a detailed

discussion with the patient and/or guardian regarding: the historical
points, exam findings, and any diagnostic results supporting the

discharge/admit diagnosis, the need for outpatient follow up, to return to the emergency department if symptoms worsen or persist or if there are any questions or concerns that arise at home.

09/21
 04:16 Order name: Call ERT; Complete Time: 04:25 bdh
 09/21
 04:16 Order name: IV saline lock; Complete Time: 04:36 bdh
 09/21
 04:29 Order name: Other: NO suicidal homicidal risk; Complete Time: 05:03 bdh

Dispensed Medications:

Discontinued: NS 0.9% 1000 ml IV at 999 mL/hr once
 09/21
 04:36 Drug: Tetanus-Diphtheria Toxoid Adult 0.5 ml {Manufacturer: Grifols Therapeutics. Exp: 09/27/2020. Lot #: A112A. } Route: IM; Site: right deltoid; lb1
 09/21
 05:04 Follow up: Response: No adverse reaction lb1
 09/21
 04:36 Drug: NS 0.9% 1000 ml Route: IV; Rate: 999 mL/hr; Site: right arm; Delivery: Primary tubing; lb1
 09/21
 05:11 Follow up: IV Status: Completed infusion dr

Disposition:

09/21
 04:52 Electronically signed by Hinchman, Brant, DO at 04:52 on 09/21/2018. bdh
 Chart complete.

Disposition:

09/21/18 04:52 Discharged to Jail/Police. Impression: Abrasion, right knee, Abrasion of unspecified front wall of thorax.
 - Condition is Stable.
 - Discharge Instructions: VIS, Tetanus, Diphtheria (Td) - CDC, Abrasion, Easy-to-Read, Knee Pain, Easy-to-Read.
 - Medication Reconciliation form.
 - Follow up: Private Physician; When: Tomorrow; Reason: Further diagnostic work-up, Recheck today's complaints, Continuance of care. Follow up: Emergency Department; When: As needed; Reason: Fever > 102 F, Trouble breathing, Worsening of condition.
 - Problem is new.
 - Symptoms have improved.

Order Results:

There are currently no results for this order.

Signatures:

Dispatcher MedHost		EDMS
Tate, Jessica, RN	RN	jt
Hinchman, Brant, DO	DO	bdh

Ramey, Nicole		nmr
Bouldin, Lauren, RN	RN	lbl
Reynolds, Daniel R	RN	dr

Corrections: (The following items were deleted from the chart)

09/21
04:48 09/21 04:16 COMPREHENSIVE METABOLIC PANEL+LAB ordered. EDMS EDMS
09/21
04:48 09/21 04:16 COMPLETE BLD COUNT W/AUTO DIFF+LAB ordered. EDMS EDMS
09/21
04:49 09/21 04:16 CPK, TOTAL+LAB ordered. EDMS EDMS
09/21
04:50 09/21 04:16 ALCOHOL, ETHYL+LAB ordered. EDMS EDMS
09/21
04:50 09/21 04:16 STAT OVERDOSE PANEL+LAB ordered. EDMS EDMS
09/21
04:52 09/21 04:52 09/21/2018 04:52 Discharged to Jail/Police. Impression: bdh
Abrasion, right knee; Abrasion of unspecified front wall of thorax.
Condition is Stable. Discharge Instructions: Medication
Reconciliation. Follow up: Private Physician; When: Tomorrow; Reason:
Further diagnostic work-up, Recheck today's complaints, Continuance
of care. Follow up: Emergency Department; When: As needed; Reason:
Fever > 102 F, Trouble breathing, Worsening of condition. Problem is
new. Symptoms have improved. bdh
09/21
04:54 09/21 04:16 URINALYSIS W/REFLEX TO CULTURE+LAB ordered. EDMS EDMS

EXHIBIT 19

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



Brian D. Hill asked me to send this email to you about his appealed case

From: Ken & Stella (kenstella2007@yahoo.com)
To: salbrecht@mar.IDC.Virginia.gov
Cc: eric@whitestonepublishing.org; rbhill67@yahoo.com
Date: Thursday, December 27, 2018 at 10:50 PM EST

Attorney Albrecht:

Brian David Hill, our grandson is in the Western Regional Virginia jail. He has asked us to send you an email with these statements and asking these questions: Please reply to this email letting us know that you have read this.

My scheduled court date for the Martinsville Circuit Court is January 28, 2019.

I will file a motion for Writ of Actual Innocence and motion for new trial pursuant to Virginia Code Sec. 19.2-265.4 a failure to provide discovery in Misdemeanor and felony cases. The bodycam footage and 911 recording is another one. I will fill out the ADA Accommodation form for my Circuit Court case on January 28, 2019.

Also please email Scott Albrecht and see if he wishes to represent me on appeal or notify the Court that he cannot represent me so a new lawyer can be appointed as soon as possible for Circuit Court

If Scott wishes to get involved, he will have to work with Eric Clark since he has the three Virginia appeal case laws that I had messaged him. (Eric's email address is above).

Brian is also filling out an accommodation form for disabled citizens.

Sincerely.

Ken & Stella Forinash
(Brian David Hill's grandparents)

EXHIBIT 20

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
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by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



Fw: Brian D. Hill request

From: Ken & Stella (kenstella2007@yahoo.com)

To: rbhill67@yahoo.com

Date: Wednesday, December 26, 2018 at 04:30 PM EST

----- Forwarded Message -----

From: Eric S Clark <eric@whitestonepublishing.org>

To: Ken & Stella <kenstella2007@yahoo.com>

Sent: Wednesday, December 26, 2018, 7:27:15 AM EST

Subject: Re: Brian D. Hill request

Yes, if the attorney has not filed by Friday, then take those two documents to the court (Fri or next Wed).

Those documents should work okay.

RE Albrecht was not a good attorney.

Yes and no.

He did bring up the same argument that WON on several appeals but maybe did not identify those cases specifically enough and maybe did not lay out enough facts for the appeal process.

If the appeal is "new trial" then more evidence can be brought up. If the appeal is just review of the trial below, then generally the appeal court will not consider new evidence.

I don't know what evidence the State presented, but I doubt it was enough to show the legal standard of "obscene" was met.

The quotes below are from the appeal court in another case:

"A portrayal of nudity is not, as a matter of law, a sufficient basis for finding that [it] is obscene."

The State must establish that Brian's "actions had as their dominant

purpose an appeal to the prurient interest in sex."

With "prurient interest in sex" meaning

"a shameful or morbid interest in nudity, sexual conduct, sexual excitement, excretory functions or products thereof or sadomasochistic abuse, and which goes substantially beyond customary limits of candor in description or representation of such matters and which, taken as a whole, does not have serious literary, artistic, political or scientific value."

PS

Lowest level (trial court) judges sometimes(often?) do not know the

necessary meanings if the particular law in question so they sometimes rule incorrectly.

Again, I don't know what evidence the State presented, but, at this point, I think Brian has 95+% of wining on appeal.

From: [Ken & Stella](#)

Sent: Wednesday, December 26, 2018 4:48 AM

To: [Eric S Clark](#)

Subject: Re: Brian D. Hill request

Thank you, Eric. We will check to make sure that an appeal is filed by this Friday. If not, do we need to take something to the court ourselves by this Friday? Brian's trial was on Friday, Dec 21st. Court was closed on Sat - Tue Christmas Day. Will be opened this Wed., Thur, Fri. then closed for New Years Sat. - Tuesday. Albrecht was not a good attorney. We saw him lose another case before Brian's. We can't afford an attorney and appreciate all of your help!

On Tuesday, December 25, 2018, 9:58:25 PM EST, Eric S Clark <eric@whitestonepublishing.org> wrote:

I forwarded the information in the bottom email to the Public Defender that represented Brian. It is his DUTY as trial counsel to file the notice of appeal if he knows Brian wants to appeal.

So, there will probably be nothing more you need to do other than check with the court to see if a notice of appeal has been filed already.

I looked at the cases Brian researched and based on those, he should win the appeal.

That said, if the appeal requires a "new trial" rather than just filing a brief to identify the trial court error, I encouraged Brian to seek a PLEA DEAL. Only because that is an extra avenue to keep from having his supervised release from being revoked. That is, PLEA to a Jaywalking charge and pay a fine, something like that.

It was WRING to hold Brian in jail so long on this charge. Even with a GUILTY, the sentence was only 30 days. It sounds like he was in jail way longer than that before trial. Disgusting.

If the Public Defender wants to stay out of trouble, HE WILL FILE the notice of appeal -- probably right away. :-0)
From here down was sent to his Public Defender's email

From: [Eric S Clark](#)
Sent: Tuesday, December 25, 2018 4:46 PM
To: salbrecht@mar.IDC.Virginia.gov
Subject: Brian D. Hill request

I was asked to forward these messages from Brian Hill.

MESSAGE 1

Scott Albrecht can be forwarded my email.

Scott Albrecht salbrecht@mar.IDC.Virginia.gov,

I attempted to file a pro se Notice of Appeal to the Circuit Court on late December 21, 2018, but the mail will go out till Wednesday morning if the jail doesn't fetter with it.

The facts are simple 1. Brian was not aroused in the pictures. Brian hadpsd Autism Spectrum Disorder. Brian exhibited an extreme form of compliance so that his mother Roberta Hill wouldn't be killed. 2. Brian attempted to file two pro se motions to the Clerk of the Martinsville General District Court which never made docket in November prior to the trial. 3. Arguably, Nudists can take pictures of themselves and they were not aroused in pictures. The pictures in the case of Brian was to satisfy the guy who threatened to kill his mother. 4. Evidence of coercion exists but was not disclosed under Discovery violating Brady rights. Police bodycam footage during interview of Brian after arrest. The 911 call recording mast mention of Brian placing his hand ovrper his mouth or face which is unusual for indecent exposures. There are no Virginia indecent exposure cases with a guy putting his hand over his mouth and the other to his side. Brian has Autism. The witness who called 911 was never subpoenaed. An psychologist expert never reviewed over the pictures, bodycam footage, and interview Brian before testifying at the trial.

Brian was not aroused, Brian was coerced, his whole affidavit should have been presented before the Judge at trial, not bits and pieces of testimony but only the whole truth and nothing but the truth so help me God.

If the court of appeals adopts the three case laws to Brian's situation then he is not guilty of indecent exposure.

A.M v. Commonwealth of Virginia Alexandria, VA Circuit Court Case no 1150-12-4

Kenneth Samuel Moses v. Commonwealth of Virginia Salem, VA Circuit court Case no 0985-03-3

Kimberly F. Neice v. Commonwealth of Virginia Teleconference, VA Circuit Court CASE NO. 1477-09-3

Scott, all three were acquitted based exactly on your argument that I am innocent and didn't do anything indecent. The Court of Appeals may adopt those three rulings. I was never aroused in the photos. Competency was never a good strategy. An evaluation for the photos and an Autism expert under a certified psychology license would determine that I didn't behave appropriate in response to a threatening situation by over-complying. I showed signs of coercion when Iqpw was interviewed by the officer who turned on his body camera and the red recording light was on. That would show coercion as I was shaken up and explaining to the officer what had happened.

Scott I am innocent of indecent exposure based on the evidence that the prosecutor and police knew about and did not present during the trial.

MESSAGE 2

Scott, Eric knows he is forwarding this message and the other message. Scott you know I was wrongfully convicted. I can still win. Three different Appellate rulings.

Scott, Eric is a witness that knows that I wanted to appeal to the Circuit Court. Scott please follow my request as my representative to directly appeal my wrongful conviction.

Thank you Scott and Thank you Eric. God bless you both.

Best Regards, Brian D. Hill U.S.W.G.O.

MESSAGE 3

If they can push for a plea deal to a small infraction charge of illegal parking or even Jaywalking or some small stupid infraction charge in a plea deal, my Supervised Release will not be revoked.

Something that carries only a fine.

Mention that to Scott Albrecht.

He can also push for deferred prosecution requiring me to take safety courses.

EXHIBIT 21

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
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ORDER IN MISDEMEANOR OR TRAFFIC INFRACTION PROCEEDING

COMPLETE DATA BELOW IF KNOWN

MARTINSVILLE CIRCUIT COURT Circuit Court
MARTINSVILLE

Table with columns: RACE, SEX, BORN (MO, DAY, YR), HT. (FT, IN), WGT., EYES, HAIR. Values: W, M, 05, 26, 1990, 6, 00, 150, BL, BR. Includes SSN field with redacted value.

v. BRIAN DAVID HILL
310 FOREST ST, APT 1
MARTINSVILLE, VA. 24112

SEPTEMBER 21, 2018

NOVEMBER 15, 2019

OFFENSE DATE

TRIAL DATE

The Defendant was this day [] tried in absence [x] present

Attorney: CLARK, MATT [x] Appointed [] Retained

Original Charge: INDECENT EXPOSURE

Code Section: 18.2-387 [] State Code [x] Local Ordinance

Virginia Crime Code: OBS-3713-01 Offense Tracking Number: 690GM180003560

Plea:

- [x] Not Guilty [] Consent by Defendant to Waiver of Jury
[] Guilty as Charged [] Concurrence of Court and Commonwealth's Attorney
[] Guilty to Amended Charge [] Plea voluntarily and intelligently entered after defendant was apprised of his right against compulsory self-incrimination, right to confront the witnesses against him, and right to a jury trial.
[] Nolo Contendere

Charge: INDECENT EXPOSURE

Code Cite: 18.2-387 Virginia Crime Code: OBS-3713-01

Finding:

- [] Not Guilty [] Guilty of
[] Guilty as Charged [] Plea Agreement Accepted [x] Appeal/Withdraw/Affirm [] Appeal not timely filed
[] Facts sufficient to find guilt but defer adjudication/disposition to

DATE AND TIME

Charge: INDECENT EXPOSURE

Code Cite: 18.2-387 Virginia Crime Code: OBS-3713-01

Order:

[] Nolle Prosequi [] Dismissed [] Dismissed with Prejudice [] Continued to [x] COSTS imposed

DATE AND TIME

[] FINE [] CIVIL PENALTY of \$ with \$ suspended

[x] JAIL SENTENCE of 30 DAYS imposed, [] of which days mandatory minimum, with suspended for a period of, conditioned upon being of good behavior, keeping the peace, obeying this order and for paying fines and costs.

Credit is allowed pursuant to § 53.1-187 for time spent in confinement.

- [] Serve jail sentence beginning [] on weekends only
[] Work release [] authorized if eligible [] required [] Public work force [] authorized [] not authorized
[] on PROBATION for [] VASAP [] local community-based probation agency

[] DRIVER'S LICENSE suspended for

[] Restricted Driver's License per attached order [] Ignition Interlock for

[] Attached ORDER FOR RESTITUTION incorporated.

[] COMMUNITY SERVICE hours to be completed by and supervised by [] to be credited against fines and costs

[] Contact prohibited between defendant and victim/victim's family or household members

[] Reimburse Commonwealth for investigatory medical fees [] Pay \$50 fee to the Court for Trauma Center Fund

[] Registration pursuant to Code § 9.1-903 for offenses defined in § 9.1-902 is required.

[] Remanded for [] CCRE Report []

[] Bail on Appeal \$

[x] Other: DEF CHANGED HIS PLEA TO GUILTY AND AFFIRMED JUDGE GDC, PAY COURT COSTS.

11/18/19 DATE

Judge signature and name

JUDGE

EXHIBIT 22

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



VIRGINIA: IN THE GENERAL DISTRICT COURT FOR THE CITY OF MARTINSVILLE

COMMONWEALTH OF VIRGINIA,)
)
v.)
)
BRIAN DAVID HILL,)
Defendant.)

CASE NO: C18-3138

ORDER

This case came this day to be heard upon the written motion of the Defendant, BRIAN DAVID HILL, by counsel, who moved, pursuant to Rule 7C:5 of the Rules of the Supreme Court of Virginia, that the Commonwealth's Attorney be directed to permit the Defendant discovery in this case, as set forth in said Rule, and

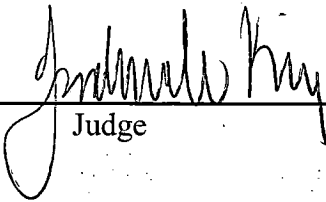
It appearing to the Court that discovery pursuant to Rule 7C:5 should be granted to the Defendant, it is hereby ORDERED and DECREED that the Commonwealth's Attorney permit counsel for the Defendant to inspect and copy or photograph, within a reasonable time, before the preliminary hearing, the following:

- (1) Any relevant written or recorded statements or confessions made by the Defendant, or copies thereof, or the substance of any oral statements or confessions made by the Defendant to any law enforcement officer, the existence of which is known to the attorney for the Commonwealth;
- (2) A copy of any criminal record of the accused; and
- (3) Any exculpatory information or evidence as set forth by *Brady v. Maryland* and its progeny that is known to the Commonwealth.

And it is further ADJUDGED, ORDERED and DECREED that the Commonwealth shall promptly notify counsel for the Defendant of the existence of any additional material

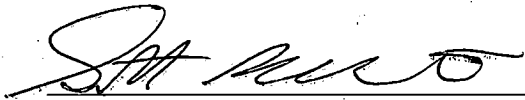
subsequently discovered which falls within the scope of this motion and make all such additional material available to the Defendant's attorney in accordance with the text and intention of this Motion.

ENTER this 28 day of November, 2018.



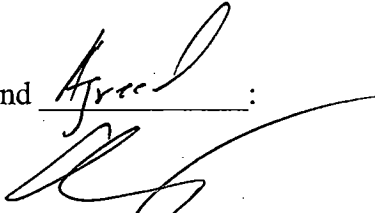
Judge

I ASK FOR THIS:



Scott Albrecht, Esq. (VSB #88411)
Office of the Public Defender
P.O. Drawer 31
Martinsville, VA 24114
T: (276) 666-2206 ext. 106
F: (276) 666-8929
salbrecht@mar.idc.virginia.gov
Counsel for Defendant

Michael McPherson
Retained for
Bond Hearing
10-12-18
9:45a

SEEN and Agreed :


Attorney for the Commonwealth
City of Martinsville, Virginia
P.O. Box 1311
Martinsville, VA 24112
T: (276) 403-5470

RECEIVED
DATE/TIME 11-28-18 11am
BY D. Collier D. Clark
MARTINSVILLE GENERAL DISTRICT COURT

VIRGINIA: IN THE CIRCUIT COURT FOR THE CITY OF MARTINSVILLE

COMMONWEALTH OF VIRGINIA,
Plaintiff

vs.

CR19-009

BRIAN DAVID HILL,
Defendant.

ORDER REGARDING DISCOVERY

Came this day, the Defendant, Brian David Hill, by counsel, who moved, pursuant to Rule 3A:11 of the Rules of Court, that the Commonwealth's Attorney be directed to permit the Defendant discovery in this case, as set forth in the said Rule, and upon the motion of the attorney of the Commonwealth requesting reciprocal discovery under the said Rule; and,

It appearing to the Court that discovery pursuant to Rule 3A:11(b) should be granted to the Defendant, it is hereby ORDERED that the Commonwealth's Attorney permit counsel for the Defendant to inspect and copy or photograph, within a reasonable time, before the trial or sentencing, the following:

(1) Any relevant written or recorded statements or confessions made by the Defendant, or copies thereof, or the substance of any oral statements or confessions made by the Defendant to any law enforcement officer, the existence of which is known to the attorney for the Commonwealth, any certificates of analysis pursuant to §19.2-187, and any relevant written reports of autopsies, ballistic tests, fingerprint analyses, handwriting analyses, blood, urine, and breath tests, other scientific reports, and written reports of a physical or mental examination of the Defendant or the alleged victim made in connection with this particular case, or copies thereof, that are known by the Commonwealth's Attorney to be within the possession, custody, or

control of the Commonwealth.

(2) Any exculpatory information or evidence under the guidelines established by Brady v. Maryland, 373 U.S. 83 (1963), and subsequent case law, whether by way of statements, real evidence, scientific analysis, or reports, known to or in the possession of the Commonwealth.

(3) The Commonwealth shall promptly notify counsel for the Defendant of the existence of any additional material subsequently discovered (until the time of trial and at trial) which falls within the scope of this motion and make all such additional material available to the Defendant's attorney in accordance with the text and intention of this Motion.

It appearing to the Court that the motion for reciprocal discovery filed by the attorney for the Commonwealth pursuant to Rule 3A:11 should also be granted, it is hereby ORDERED that counsel for the Defendant permit the Commonwealth's Attorney to inspect, copy, or photograph, within a reasonable time, but not less than ten days before the trial or sentencing, any written reports of autopsy examinations, ballistic tests, fingerprints, blood, urine, and breath analyses, and other scientific tests that may be within the Defendant's possession, custody, or control and which the defense intends to proffer or introduce into evidence at the trial or sentencing:

It is further ORDERED that the Defendant disclose whether he or she intends to introduce evidence to establish an alibi, and, if so, to disclose the place at which he or she claims to have been at the time of the commission of the alleged offense.


It is further ORDERED that if the Defendant intends to rely upon the defense of insanity or feeble-mindedness, the Defendant shall permit the Commonwealth to inspect, copy, or photograph any written reports of physical or mental examination of the Defendant made in connection with this particular case.

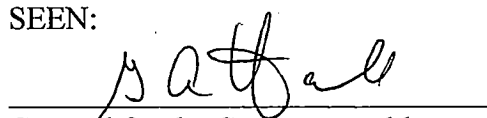
It is further ORDERED that the inspection and copying or photographing by the counsel for the Defendant shall take place at the office of the Commonwealth's Attorney at Martinsville, Virginia, or at some other mutually agreeable location, by appointment or at any convenient time during regular office hours, and that the inspection and copying or photographing by the attorney for the Commonwealth shall take place at the office of the counsel for the Defendant, or at some other mutually agreeable location, by appointment or at any convenient time during regular office hours.

ENTERED this 6th day of February, 2019.


Judge

I ASK FOR THIS:


Scott Albrecht (VSB #88411)
Office of the Public Defender
P. O. Drawer 31
Martinsville, VA 24114
276-666-2206
276-666-8929 (fax)
salbrecht@mar.idc.virginia.gov

SEEN:

Counsel for the Commonwealth

VIRGINIA: IN THE CIRCUIT COURT FOR THE CITY OF MARTINSVILLE

COMMONWEALTH OF VIRGINIA,
Plaintiff

vs.

CR19000009-00

BRIAN DAVID HILL,
Defendant.

ORDER REGARDING DISCOVERY

Came this day, the Defendant, Brian David Hill, by counsel, who moved, pursuant to Rule 3A:11 of the Rules of Court, that the Commonwealth's Attorney be directed to permit the Defendant discovery in this case, as set forth in the said Rule, and upon the motion of the attorney of the Commonwealth requesting reciprocal discovery under the said Rule; and,

It appearing to the Court that discovery pursuant to Rule 3A:11(b) should be granted to the Defendant, it is hereby ORDERED that the Commonwealth's Attorney permit counsel for the Defendant to inspect and copy or photograph, within a reasonable time, before the trial or sentencing, the following:

(1) Any relevant written or recorded statements or confessions made by the Defendant, or copies thereof, or the substance of any oral statements or confessions made by the Defendant to any law enforcement officer, the existence of which is known to the attorney for the Commonwealth, any certificates of analysis pursuant to §19.2-187, and any relevant written reports of autopsies, ballistic tests, fingerprint analyses, handwriting analyses, blood, urine, and breath tests, other scientific reports, and written reports of a physical or mental examination of the Defendant or the alleged victim made in connection with this particular case, or copies thereof, that are known by the Commonwealth's Attorney to be within the possession, custody, or

control of the Commonwealth.

(2) Any exculpatory information or evidence under the guidelines established by Brady v. Maryland, 373 U.S. 83 (1963), and subsequent case law, whether by way of statements, real evidence, scientific analysis, or reports, known to or in the possession of the Commonwealth.

(3) The Commonwealth shall promptly notify counsel for the Defendant of the existence of any additional material subsequently discovered (until the time of trial and at trial) which falls within the scope of this motion and make all such additional material available to the Defendant's attorney in accordance with the text and intention of this Motion.

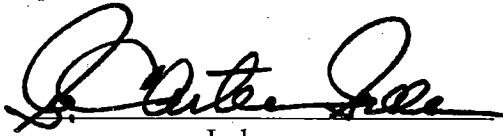
It appearing to the Court that the motion for reciprocal discovery filed by the attorney for the Commonwealth pursuant to Rule 3A:11 should also be granted, it is hereby ORDERED that counsel for the Defendant permit the Commonwealth's Attorney to inspect, copy, or photograph, within a reasonable time, but not less than ten days before the trial or sentencing, any written reports of autopsy examinations, ballistic tests, fingerprints, blood, urine, and breath analyses, and other scientific tests that may be within the Defendant's possession, custody, or control and which the defense intends to proffer or introduce into evidence at the trial or sentencing:

It is further ORDERED that the Defendant disclose whether he or she intends to introduce evidence to establish an alibi, and, if so, to disclose the place at which he or she claims to have been at the time of the commission of the alleged offense.


It is further ORDERED that if the Defendant intends to rely upon the defense of insanity or feeble-mindedness, the Defendant shall permit the Commonwealth to inspect, copy, or photograph any written reports of physical or mental examination of the Defendant made in connection with this particular case.

It is further ORDERED that the inspection and copying or photographing by the counsel for the Defendant shall take place at the office of the Commonwealth's Attorney at Martinsville, Virginia, or at some other mutually agreeable location, by appointment or at any convenient time during regular office hours, and that the inspection and copying or photographing by the attorney for the Commonwealth shall take place at the office of the counsel for the Defendant, or at some other mutually agreeable location, by appointment or at any convenient time during regular office hours.

ENTERED this 15th day of July, 2019.


Judge

I ASK FOR THIS:


Scott Albrecht (VSB #88411)
Office of the Public Defender
P. O. Drawer 31
Martinsville, VA 24114
276-666-2206
276-666-8929 (fax)
salbrecht@mar.idc.virginia.gov


SEEN:

Counsel for the Commonwealth

EXHIBIT 23

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM



Discharge Instructions for: Brian Hill

HILL, BRIAN D
 MM7805836274 PRE ER MM.ER
 11/19/17 0850 UNKNOWN, UNKNOWN
 DOB: 05/26/90 27 M MR# MM00370912
 Sovah Health - Martinsville



Sovah Health Martinsville

320 Hospital Drive
 Martinsville, VA 24112
 276-666-7237

11/9/17
 97
 98.1
 18

**Emergency Department
 Instructions for:**

Hill, Brian D

Arrival Date:

Sunday, November 19, 2017

Thank you for choosing **Sovah Health Martinsville** for your care today. The examination and treatment you have received in the Emergency Department today have been rendered on an emergency basis only and are not intended to be a substitute for an effort to provide complete medical care. You should contact your follow-up physician as it is important that you let him or her check you and report any new or remaining problems since it is impossible to recognize and treat all elements of an injury or illness in a single emergency care center visit.

Care provided by: Ekuban-Gordon, Edna, MD

Diagnosis: Head Laceration/ Open wound of head; Hyperglycemia, unspecified

DISCHARGE INSTRUCTIONS	FORMS
Head Injury, Adult Facial Laceration Hyperglycemia, Easy-to-Read Stitches, Staples, or Adhesive Wound Closure, Easy-to-Read	Medication Reconciliation
FOLLOW UP INSTRUCTIONS	PRESCRIPTIONS
Private Physician When: 2 - 3 days; Reason: Wound Recheck	None
SPECIAL NOTES	
None	

Suicide National Hotline: 1-800-273-8255 (800-273-TALK)

If you received a narcotic or sedative medication during your Emergency Department stay you should not drive, drink alcohol or operate heavy machinery for the next 8 hours as this medication can cause drowsiness, dizziness, and decrease your response time to events.

I hereby acknowledge that I have received a copy of my transition care record and understand the above instructions and prescriptions.

Brian D Hill

Brian Hill
 MRN # MM00370912

Belle Tranter, RN

ED Physician or Nurse
 11/19/2017 12:14

X-RAYS and LAB TESTS:

If you had x-rays today they were read by the emergency physician. Your x-rays will also be read by a radiologist within 24 hours. If you

Discharge Instructions for: Brian Hill

had a culture done it will take 24 to 72 hours to get the results. If there is a change in the x-ray diagnosis or a positive culture, we will contact you. Please verify your current phone number prior to discharge at the check out desk.

MEDICATIONS:

If you received a prescription for medication(s) today, it is important that when you fill this you let the pharmacist know all the other medications that you are on and any allergies you might have. It is also important that you notify your follow-up physician of all your medications including the prescriptions you may receive today.

TESTS AND PROCEDURES

Labs

CMP, Complete Blood Count W/auto Diff, Thyroid Stimulating Hormone, POC GLU, POC GLU

Rad

CT Head w/o Contrast, Chest 1 View - Portable

Procedures

Blood Sugar, 12 Lead EKG, Laceration

Other

Seizure precautions, Accucheck, Cardiac Monitor, Apply to Pt, Pulse ox continuous, Oxygen at 2 L/NC, IV saline lock, EKG ED, Laceration repair set up

Chart Copy

HILL, BRIAN D
MM7805836274 PRE ER MM.ER
11/19/17 0850 UNKNOWN, UNKNOWN
DOB: 05/26/90 27 M MR# MM00370912
Sovah Health - Martinsville



EMERGENCY DEPARTMENT RECORD

Nurse's Notes

Sovah Health Martinsville

Name: Brian Hill

Age: 27 yrs

Sex: Male

DOB: 05/26/1990

MRN: MM00370912

Arrival Date: 11/19/2017

Time: 08:51

Account#: MM7805836274

Bed ER 6

Private MD:

Diagnosis: Head Laceration/ Open wound of head;Hyperglycemia, unspecified

Presentation:

11/19

09:08 Presenting complaint: Patient states: had a seizure this morning due 11 to low blood sugar, laceration to head per pt, bleeding controlled. Airway is patent with good air movement. The patient is breathing without difficulty. The patient is pink,warm and dry. Heart rate is within normal limits. Patient is alert and oriented to person, place and time, Patient is moving all extremities appropriately.

11/19

09:08 Acuity: Urgent (3) 11

Historical:

- Allergies: Ranitidine;

- Home Meds:

1. Unable to Obtain

- PMHx: OCD; autism; Diabetes - IDDM;

- Sepsis Screening:: Sepsis screening negative at this time.

- Social history:: Tobacco Status: The patient states he/she has never used tobacco. The patient's primary language is English. The patient's preferred language is English.

- Family history:: Reviewed and not pertinent.

- Exposure Risk/Travel Screening:: Patient has not been out of the country in last 30 days. Have you been in contact with anyone who is ill that has traveled outside of the country in the last 30 days? No.

- Suicide Screening:: Have you recently had thoughts about hurting yourself or others? No.

- Tuberculosis screening:: No symptoms or risk factors identified.

Screening:

11/19

09:41 Fall Risk: Total Points: Med. Risk (25-44);. Abuse Screen: Patient mkk verbally denies physical, verbal and emotional abuse/neglect. There are no cultural/spiritual considerations for care for this patient.

Assessment:

11/19

09:38 Complains of pain in face Pain does not radiate. Pain currently is 7 mkk

out of 10 on a pain scale. The level of pain that is acceptable is 0 out of 10 on a pain scale. General: Appears in no apparent distress, comfortable, well developed, well nourished, well groomed, Behavior is appropriate for age, cooperative, pleasant. Neuro: Reports headache. Neuro: Reports seizure due to low blood sugar. EENT: Denies. Cardiovascular: Denies. Respiratory: Denies. GI: Denies. GU: Denies. Derm: Denies. Musculoskeletal: Denies. Injury Description: Laceration sustained to face is clean, 0.5 to 2.5 cm long, not bleeding, was sustained 4-6 hours ago.

11/19
09:38 Method Of Arrival: EMS mkk

Vital Signs:

11/19
09:08 BP 131 / 76; Pulse 118; Resp 20; Temp 98.2; Pulse Ox 97% ; Weight 11
91.63 kg; Height 5 ft. 10 in. (177.80 cm);

11/19
09:46 mkk

11/19
10:59 BP 124 / 73; Pulse 93; Resp 18; Pulse Ox 100% on R/A; mkk

11/19
12:57 BP 119 / 67; Pulse 97; Resp 19; Pulse Ox 98% on R/A; pt3

11/19
09:08 Body Mass Index 28.98 (91.63 kg, 177.80 cm) 11

11/19
09:46 patient has OCD and had to do his "routines" prior to coming, has mkk
been about 4 hours since injury occurred

Glasgow Coma Score:

11/19
12:16 Eye Response: spontaneous(4). Verbal Response: oriented(5). Motor eeg
Response: obeys commands(6). Total: 15.

ED Course:

11/19
08:51 Patient arrived in ED. knm

11/19
09:09 Rapid Initial Assessment completed. 11

11/19
09:27 Ekuban-Gordon, Edna, MD is Attending Physician. eeg

11/19
09:41 Patient has correct armband on for positive identification. Placed in mkk
gown. Bed in low position. Call light in reach. Side rails up X2.
Adult with patient. Seizure precautions initiated. NIBP on. Pulse ox
on.

11/19
09:41 No physician assisted procedures were completed. mkk

11/19
10:01 Inserted saline lock: 20 gauge right arm blood drawn from IV and sent mkk
to lab per order.

11/19
10:08 EKG Done By ED Tech 10:06 Reviewed by Physician Edna Ekuban-Gordon MD.bh

11/19
10:40 Critical Lab Value: Patient Name verified: Brian Hill, Patient DOB 11

Verified May 26, 1990 Critical value glucose 459 reported read back to reporting lab personnel, and reported to Dr. Edna Ekuban-Gordon MD.

11/19
 10:59 Assist provider with laceration repair Set up tray. mkk
 11/19
 11:53 Troncoso, Priscilla, RN is Primary Nurse. pt3

Administered Medications:

11/19
 10:59 Drug: NS 0.9% 1000 ml Route: IV; Rate: 999 mL/hr; Site: right arm; mkk
 11/19
 12:59 Follow up: Response: No adverse reaction; IV Status: Completed pt3
 infusion
 11/19
 11:02 Drug: NovoLIN R 7 units {Co-Signature: mkk (Michaela Karet RN).} 11
 Route: IVP; Site: right arm;
 11/19
 12:58 Follow up: Response: No adverse reaction pt3

Point of Care Testing:

Blood Glucose:
 11/19
 09:40 Glucose Value: 489; mkk
 11/19
 09:43 Glucose Value: 435; mkk
 11/19
 09:40 test repeated mkk
 Ranges:

Output:

11/19
 11:28 Urine: 600ml (Voided); Total: 600ml. dab

Outcome:

11/19
 12:14 Discharge ordered by Provider. eeg
 11/19
 12:57 Discharged to home ambulatory, with family. pt3
 12:57 Instructions given to patient, parent, Instructed on discharge instructions. follow up and referral plans. . Patient and/or family voiced understanding of instructions using teach back method.
 12:57 The patients' shirt, pants, shoes, socks and underwear were sent with the patient.
 12:57 Discharge Assessment: Patient
 12:57 Discharge Assessment: Patient has no functional deficits.
 12:57 Discontinued IV lock intact, bleeding controlled, pressure dressing applied, No redness/swelling at site.
 11/19
 13:24 Patient left the ED. jkp

Signatures:

Harrison, Rindi, RN RN 11
 Ekuban-Gordon, Edna, MD MD eeg

EMERGENCY DEPARTMENT RECORD

Physician Documentation
Sovah Health Martinsville
Name: Brian Hill

Age: 27 yrs

Sex: Male

DOB: 05/26/1990

MRN: MM00370912

Arrival Date: 11/19/2017

Time: 08:51

Account#: MM7805836274

Bed ER 6

Private MD:

ED Physician Ekuban-Gordon, Edna

HPI:

11/19

11:49 This 27 yrs old White Male presents to ER via EMS with complaints of eeg
Fall Injury.

11/19

11:49 Onset: The symptoms/episode began/occurred today. Associated eeg
injuries: The patient sustained injury to the head. Associated signs
and symptoms: Loss of consciousness: the patient experienced no loss
of consciousness. Severity of symptoms: in the emergency department
the symptoms are unchanged. Pain Management: Patient denies pain. The
patient has experienced similar episodes in the past, a few times.
The patient has not recently seen a physician. Family report history
of low blood sugar, general low will have seizure episode when the
blood sugar is low. Blood sugar was obtained by mom at 20 repeat 40
was subsequently given some oral glucose and brought here for further
evaluation. Patient denies any headache palpitation no neck pain and
stiffness. Admits to feeling like himself..

Historical:

- Allergies: Ranitidine;

- Home Meds:

1. Unable to Obtain

- PMHx: OCD; autism; Diabetes - IDDM;

- Sepsis Screening:: Sepsis screening negative at this time.

- Social history:: Tobacco Status: The patient states he/she has
never used tobacco. The patient's primary language is English. The
patient's preferred language is English.

- Family history:: Reviewed and not pertinent.

- Exposure Risk/Travel Screening:: Patient has not been out of the
country in last 30 days. Have you been in contact with anyone who
is ill that has traveled outside of the country in the last 30
days? No.

- Suicide Screening:: Have you recently had thoughts about hurting
yourself or others? No.

- Tuberculosis screening:: No symptoms or risk factors identified.

- The history from nurses notes was reviewed: and I agree with what
is documented up to this point.

ROS:

11/19

11:52 Eyes: Negative for injury, pain, redness, and discharge, ENT: Negative for injury, pain, and discharge, Neck: Negative for injury, pain, and swelling, Cardiovascular: Negative for chest pain, palpitations, and edema, Respiratory: Negative for shortness of breath, cough, wheezing, and pleuritic chest pain, Abdomen/GI: Negative for abdominal pain, nausea, vomiting, diarrhea, and constipation, Back: Negative for injury and pain, MS/Extremity: Negative for injury and deformity. All other systems are negative, except as documented below. Skin: Positive for laceration(s), of the face. Neuro: Negative for dizziness, headache, weakness. Psych: Negative for depression, alcohol dependence, homicidal ideation, suicide gesture.

eeg

Exam:

11/19

11:53 Eyes: Pupils equal round and reactive to light, extra-ocular motions intact. Lids and lashes normal. Conjunctiva and sclera are non-icteric and not injected. Cornea within normal limits. Periorbital areas with no swelling, redness, or edema. ENT: Nares patent. No nasal discharge, no septal abnormalities noted. Tympanic membranes are normal and external auditory canals are clear. Oropharynx with no redness, swelling, or masses, exudates, or evidence of obstruction, uvula midline. Mucous membrane moist Neck: Trachea midline, no thyromegaly or masses palpated, and no cervical lymphadenopathy. Supple, full range of motion without nuchal rigidity, or vertebral point tenderness. No Meningismus. Chest/axilla: Normal chest wall appearance and motion. Nontender with no deformity. No lesions are appreciated. Cardiovascular: Regular rate and rhythm with a normal S1 and S2. ,no jvd No pulse deficits. Respiratory: Lungs have equal breath sounds bilaterally, clear to auscultation and percussion. No rales, rhonchi or wheezes noted. No increased work of breathing, no retractions or nasal flaring. Abdomen/GI: Soft, non-tender, with normal bowel sounds. No distension or tympany. No guarding or rebound. No evidence of tenderness throughout. Back: No spinal tenderness. No costovertebral tenderness. Full range of motion. MS/ Extremity: Pulses equal, no cyanosis. Neurovascular intact. Full, normal range of motion. Neuro: Awake and alert, GCS 15, oriented to person, place, time, and situation. Cranial nerves II-XII grossly intact. Motor strength 5/5 in all extremities. Sensory grossly intact. Cerebellar exam normal. Normal gait., slow, but appropriate Psych: Awake, alert, with orientation to person, place and time. Behavior, mood, and affect are within normal limits.

11:53 Constitutional: The patient appears alert, awake, non-diaphoretic.

11:53 Head/face: Noted is a laceration(s), that is linear, 3 cm(s).

11:53 Musculoskeletal/extremity: Extremities: all appear grossly normal, with no appreciated pain with palpation, ROM: intact in all extremities, Circulation is intact in all extremities. Sensation intact.

11:53 Psych: Behavior/mood is cooperative.

Vital Signs:

11/19

SOVAH HEALTH - MARTINSVILLE
 320 HOSPITAL DRIVE - P.O. BOX 4788
 MARTINSVILLE, VA 24112 (276)666-7360
 CLIA NO. 49D0231853 RT CLIA NO. 4D0661287

RUN DATE:11/23/17

DISCHARGE SUMMARY FOR MEDICAL RECORDS FOR LABORATORY

Patient: HILL,BRIAN D		#MM7805836274	(Continued)
*****CHEMISTRY*****			
Date	11/19/17		
Time	1007	Reference	Units
BUN	7	(5-25)	MG/DL
CREATININE	1.01	(0.90-1.30)	MG/DL
eGFR NON-AA	102 (A)		
(A) Non-African American			
eGFR AA	118 (B)		
(B) African American. eGFR UNITS: ml/min/1.73m2. *eGFR >= 60 = Normal GFR or mild decrease in GFR *eGFR 30-59 = Moderate decrease in GFR (Stage 3 CKD) *eGFR 15-29 = Severe decrease in GFR (Stage 4 CKD) *eGFR <15 = End-stage kidney failure (Stage 5 CKD)			
The equation has not been validated in patients >70 YRS OLD.			
SODIUM	131 L	(135-145)	MMOL/L
POTASSIUM	4.4	(3.5-5.0)	MMOL/L
CHLORIDE	96 L	(98-109)	MMOL/L
CO2	26	(20-30)	MMOL/L
ANION GAP	9.0	(1-10)	
GLUCOSE	459 (C) *H	(65-100)	MG/DL
(C) CRITICAL RESULTS CALLED ON 11/19/17 AT 1035 TO: RINDY LAPRADE/RB/CALLED X 2 SNCE 1035 BY: CLIFTON,LYDIA C			
CALCIUM	9.0	(8.5-10.3)	MG/DL
TOTAL PROTEIN	7.8	(6.0-8.0)	G/DL
ALBUMIN	4.3	(3.2-5.5)	G/DL
AG	1.2	(1.2-1.7)	RATIO
GLOBULIN	3.5	(2.5-3.9)	G/DL
T BILI	0.50	(0.20-1.00)	MG/DL
SGOT/AST	27	(10-42)	IU/L
SGPT/ALT	21	(10-60)	IU/L
ALK PHOS	74	(42-121)	IU/L
TSH	1.29	(0.34-5.60)	uIU/ML
Patient: HILL,BRIAN D		Age/Sex: 27/M	Acct#MM7805836274 Unit#MM00370912

SOVAH HEALTH - MARTINSVILLE
RADIOLOGY DEPT
320 HOSPITAL DR
MARTINSVILLE, VA 24112
PHONE #: 276-666-7223
FAX #: 276-666-7591

Name: HILL, BRIAN D
Phys: EKUBAN-GORDON, EDNA MD
DOB: 05/26/1990 Age: 27 Sex: M
Acct: MM7805836274 Loc: MM.ER
Exam Date: 11/19/2017 Status: DEP ER
Radiology No:
Unit No: MM00370912

EXAMS: 000898111 CHEST 1 VIEW - PORTABLE
EXAM REASON: Chest Tightness

PORTABLE CHEST

HISTORY: Seizure.

COMPARISON: 11/10/2015

FINDINGS: The heart size and configuration are within normal limits for age and portable technique. The lungs are clear. There is no evidence of pleural effusions or pneumothorax. No acute bony abnormality.

IMPRESSION: No evidence of acute cardiopulmonary disease.

** Electronically Signed by MAROON B KHOURY on 11/19/2017 at 1424 **
Reported by: DR. MAROON B KHOURY
Signed by: KHOURY, MAROON B

CC: EDNA EKUBAN-GORDON MD

Technologist: KYLEA ANN KEATTS
Transcribed Date/Time: 11/19/2017 (1146)
Transcriptionist: MMTRSPSB
Orig Print D/T: S: 11/19/2017 (1424)

BATCH NO: N/A

PAGE 1

Signed Report

HILL, BRIAN

ID: 000370912

19-Nov-2017 10:06:44

Memorial Hospital of Martinsville

27years
Male Caucasian

Vent. rate 105 bpm
PR interval 158 ms
QRS duration 92 ms
QT/QTc 328/433 ms
P-R-T axes 64 64 52

Sinus tachycardia
Possible Left atrial enlargement
Borderline ECG

Room: *6*
Loc: 15

Time: *10:07*
Initials: *[Signature]*
Bed 6
Signature: *[Signature]*

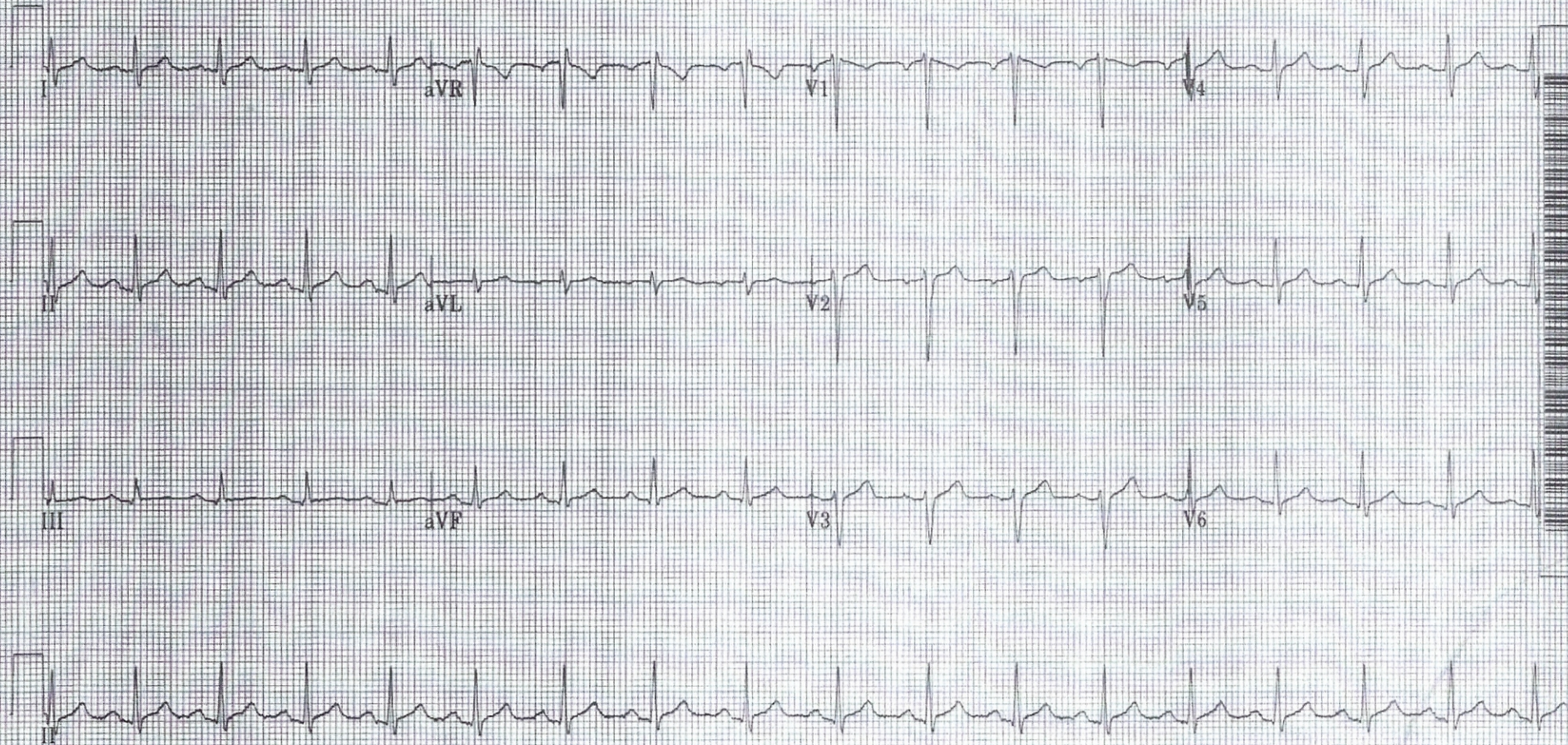
T HILL, BRIAN D

MM7805836274 PRE ER MM.ER
11/19/17 0850 UNKNOWN, UNKNOWN
DOB: 05/26/90 27 M MR# MM00370912
Sovah Health - Martinsville

Visit: MM7805836274
Secondary ID: MM216937
Referred by: EKUBAN-GORDON, EDNA

Order no.: 211490013
Unconfirmed

CHEST PAIN



100 Hz 25.0 mm/s 10.0 mm/mV

4 by 2.5s + 1 rhythm ld

MAC55 010B

12SL™ v241 HD

MM00370912 MM7805836274 SOVAH Health - Martinsville
Job: 12468 (07/02/2019 14:03) - Page 35 Doc# 1

SOVAH HEALTH - MARTINSVILLE
 320 HOSPITAL DRIVE - P.O. BOX 4788
 MARTINSVILLE, VA 24112 (276)666-7360
 CLIA NO. 49D0231853 RT CLIA NO. 4D0661287

PAGE:1

RUN DATE:11/23/17

DISCHARGE SUMMARY FOR MEDICAL RECORDS FOR LABORATORY

CMAX: MM00370912~MM7805836274~LABDATA~20171123~LABDISMM1001869144~COCMMH~COCVAE~LAB.COCMMH~

PATIENT: HILL, BRIAN D	ACCT #: MM7805836274	LOC: MM.ER	U #: MM00370912
	AGE/SX: 27/M	ROOM:	REG: 11/19/17
REG DR: EKUBAN-GORDON, EDNA MD	DOB: 05/26/90	BED:	DIS:
	STATUS: DEP ER	TLOC:	

*****POINT OF CARE*****

Date	-----11/19/17-----			
Time	1006	0943	Reference	Units
POC GLU	429 H	435 H	(65-100)	MG/DL

*****HEMATOLOGY*****

Date	11/19/17			
Time	1007		Reference	Units
WBC	11.6 H		(4.5-11.0)	K/UL
RBC	5.32		(4.50-5.90)	M/UL
HGB	15.8		(14.0-17.5)	G/DL
HCT	46.0		(35.0-49.0)	%
MCV	86.5		(80-96)	UM3
MCH	29.7		(27-32)	PG
MCHC	34.3		(32-37)	G/DL
RDW	13.1		(11.5-14.5)	%
RDW-SD	41.1		(35.1-43.9)	fl
PLT	241		(140-440)	K/UL
MPV	10.8 H		(7.4-10.4)	fl
SEGS %	84 H		(37-80)	%
SEG ABSOLUTE	9.77 H		(1.5-6.8)	K/UL
LYMPH %	10		(10-50)	%
LYMPH ABSOLUTE	1.10		(1.0-4.0)	K/UL
MONO %	6		(0-12)	%
MONO ABSOLUTE	0.64		(0.2-1.0)	K/UL
EOS %	0		(0-7)	%
EOS ABSOLUTE	0.05		(0.0-0.5)	K/UL
BASO %	0		(0-2)	%
BASO ABSOLUTE	0.04		(0.0-0.2)	K/UL
IG %	0.3			%
IG ABSOLUTE	0.0		(0.0-0.1)	

Patient: HILL, BRIAN D Age/Sex: 27/M Acct#MM7805836274 Unit#MM00370912

09:08 BP 131 / 76; Pulse 118; Resp 20; Temp 98.2; Pulse Ox 97% ; Weight 11
 91.63 kg; Height 5 ft. 10 in. (177.80 cm);
 11/19
 09:46 mkk
 11/19
 10:59 BP 124 / 73; Pulse 93; Resp 18; Pulse Ox 100% on R/A; mkk
 11/19
 12:57 BP 119 / 67; Pulse 97; Resp 19; Pulse Ox 98% on R/A; pt3
 11/19
 09:08 Body Mass Index 28.98 (91.63 kg, 177.80 cm) 11
 11/19
 09:46 patient has OCD and had to do his "routines" prior to coming, has mkk
 been about 4 hours since injury occurred

Glasgow Coma Score:

11/19
 12:16 Eye Response: spontaneous(4). Verbal Response: oriented(5). Motor eeg
 Response: obeys commands(6). Total: 15.

Laceration:

11/19
 12:11 Wound Repair of 3cm (1.2in) subcutaneous laceration to forehead. eeg
 Linear shaped.. No foreign body noted. Distal neuro/vascular/tendon
 intact. Anesthesia: Wound infiltrated with 3 mls of 1% lidocaine w/
 Epi. Wound prep: Simple cleansing with betadine. Skin closed with 6
 1-0 Prolene using Staple gun. Dressed with pressure dressing. Patient
 tolerated well.

MDM:

11/19
 09:27 MSE Initiated by Provider. eeg
 11/19
 12:12 Differential diagnosis: abrasion, closed head injury, concussion, eeg
 contusion, dislocation, fracture, laceration, multiple trauma,
 sprain, Substance abuse. Data reviewed: vital signs, nurses notes,
 lab test result(s), radiologic studies. Data interpreted: Cardiac
 monitor: Normal rate. Counseling: I had a detailed discussion with
 the patient and/or guardian regarding: the historical points, exam
 findings, and any diagnostic results supporting the discharge/admit
 diagnosis, lab results, radiology results, the need for outpatient
 follow up, to return to the emergency department if symptoms worsen
 or persist or if there are any questions or concerns that arise at
 home. Response to treatment: the patient's symptoms have markedly
 improved after treatment.

11/19
 09:46 Order name: POC GLU; Complete Time: 09:57 EDMS
 11/19
 09:56 Order name: CMP; Complete Time: 10:53 eeg
 11/19
 09:56 Order name: Complete Blood Count W/auto Diff; Complete Time: 10:53 eeg
 11/19
 09:56 Order name: Thyroid Stimulating Hormone; Complete Time: 10:53 eeg
 11/19

11/19/17 12:14 Discharged to Home. Impression: Head Laceration/ Open wound of head, Hyperglycemia, unspecified.

- Condition is Stable.

- Discharge Instructions: Head Injury, Adult, Facial Laceration, Hyperglycemia, Easy-to-Read, Stitches, Staples, or Adhesive Wound Closure, Easy-to-Read.

- Medication Reconciliation form.

- Follow up: Private Physician; When: 2 - 3 days; Reason: Wound Recheck.

- Problem is new.

- Symptoms have improved.

Order Results:

Lab Order: POC GLU; SPEC'M 11/19/17 09:46

Test: POC GLU; Value: 435; Range: 65-100; Abnormal: Above high normal; Units: MG/DL; Status: F; Updated: 11/19 09:46

Lab Order: CMP; SPEC'M 11/19/17 10:11

Test: SODIUM; Value: 131; Range: 135-145; Abnormal: Below low normal; Units: MMOL/L; Status: F; Updated: 11/19 10:24

Test: POTASSIUM; Value: 4.4; Range: 3.5-5.0; Abnormal: ; Units: MMOL/L; Status: F; Updated: 11/19 10:24

Test: CHLORIDE; Value: 96; Range: 98-109; Abnormal: Below low normal; Units: MMOL/L; Status: F; Updated: 11/19 10:24

Test: CARBON DIOXIDE; Value: 26; Range: 20-30; Abnormal: ; Units: MMOL/L; Status: F; Updated: 11/19 10:24

Test: ANION GAP; Value: 9.0; Range: 1-10; Abnormal: ; Status: F; Updated: 11/19 10:24

Test: CALCIUM; Value: 9.0; Range: 8.5-10.3; Abnormal: ; Units: MG/DL; Status: F; Updated: 11/19 10:24

Test: BLOOD UREA NITROGEN; Value: 7; Range: 5-25; Abnormal: ; Units: MG/DL; Status: F; Updated: 11/19 10:34

Test: CREATININE; Value: 1.01; Range: 0.90-1.30; Abnormal: ; Units: MG/DL; Status: F; Updated: 11/19 10:34

Test: GLOMERULAR FILTRATION RATE; Value: 102; Abnormal: ; Status: F; Updated: 11/19 10:34

Test Note: 11/19 10:34 T nbsp;; Non-African American

Test: GLOMERULAR FILTRATION RATE-AA; Value: 118; Abnormal: ; Status: F; Updated: 11/19 10:34

Test Note: 11/19 10:34 T nbsp;; African American. eGFR UNITS: ml/min/1.73m2. *eGFR >= 60 = Normal GFR or mild decrease in GFR *eGFR 30-59 = Moderate decrease in GFR (Stage 3 CKD) *eGFR 15-29 = Severe decrease in GFR (Stage 4 CKD) *eGFR <15 = End-stage kidney failure (Stage 5 CKD) The equation has not been validated in patients >70 YRS OLD.

Test: TOTAL PROTEIN; Value: 7.8; Range: 6.0-8.0; Abnormal: ; Units: G/DL; Status: F; Updated: 11/19 10:34

Test: ALBUMIN; Value: 4.3; Range: 3.2-5.5; Abnormal: ; Units: G/DL; Status: F; Updated: 11/19 10:34

Test: ALB/GLOB RATIO; Value: 1.2; Range: 1.2-1.7; Abnormal: ; Units: RATIO; Status: F; Updated: 11/19 10:34

Test: GLOBULIN; Value: 3.5; Range: 2.5-3.9; Abnormal: ; Units: G/DL;

Status: F; Updated: 11/19 10:34
 Test: BILIRUBIN, TOTAL; Value: 0.50; Range: 0.20-1.00; Abnormal: ;
 Units: MG/DL; Status: F; Updated: 11/19 10:34
 Test: SGOT/AST; Value: 27; Range: 10-42; Abnormal: ; Units: IU/L;
 Status: F; Updated: 11/19 10:34
 Test: SGPT/ALT; Value: 21; Range: 10-60; Abnormal: ; Units: IU/L;
 Status: F; Updated: 11/19 10:34
 Test: ALKALINE PHOSPHATASE; Value: 74; Range: 42-121; Abnormal: ;
 Units: IU/L; Status: F; Updated: 11/19 10:34
 Test: GLUCOSE, SERUM; Value: 459; Range: 65-100; Abnormal: Above
 upper panic limits; Units: MG/DL; Status: F; Updated: 11/19 10:39
 Test Note: 11/19 10:39 T nbsp;; CRITICAL RESULTS CALLED ON 11/19/17 AT
 1035 TO: RINDY LAPRADE/RB/CALLED X 2 SNCE 1035 BY: CLIFTON,LYDIA C
 Lab Order: Complete Blood Count W/auto Diff; SPEC'M 11/19/17 10:11
 Test: WHITE BLOOD CELL; Value: 11.6; Range: 4.5-11.0; Abnormal: Above
 high normal; Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: RED BLOOD CELL; Value: 5.32; Range: 4.50-5.90; Abnormal: ;
 Units: M/UL; Status: F; Updated: 11/19 10:18
 Test: HEMOGLOBIN; Value: 15.8; Range: 14.0-17.5; Abnormal: ; Units:
 G/DL; Status: F; Updated: 11/19 10:18
 Test: HEMATOCRIT; Value: 46.0; Range: 35.0-49.0; Abnormal: ; Units:
 %; Status: F; Updated: 11/19 10:18
 Test: MEAN CELL VOLUME; Value: 86.5; Range: 80-96; Abnormal: ; Units:
 UM3; Status: F; Updated: 11/19 10:18
 Test: MCH; Value: 29.7; Range: 27-32; Abnormal: ; Units: PG; Status:
 F; Updated: 11/19 10:18
 Test: MCHC; Value: 34.3; Range: 32-37; Abnormal: ; Units: G/DL;
 Status: F; Updated: 11/19 10:18
 Test: RELL CELL DISTRIBUTION WIDTH; Value: 13.1; Range: 11.5-14.5;
 Abnormal: ; Units: %; Status: F; Updated: 11/19 10:18
 Test: RDW STANDARD DEVIATION; Value: 41.1; Range: 35.1-43.9;
 Abnormal: ; Units: fl; Status: F; Updated: 11/19 10:18
 Test: PLATELETS; Value: 241; Range: 140-440; Abnormal: ; Units: K/UL;
 Status: F; Updated: 11/19 10:18
 Test: MEAN PLATELET VOLUME; Value: 10.8; Range: 7.4-10.4; Abnormal:
 Above high normal; Units: fl; Status: F; Updated: 11/19 10:18
 Test: SEGMENTED NEUTROPHIL PERCENT; Value: 84; Range: 37-80;
 Abnormal: Above high normal; Units: %; Status: F; Updated: 11/19 10:18
 Test: SEGMENTED NEUTROPHIL ABSOLUTE; Value: 9.77; Range: 1.5-6.8;
 Abnormal: Above high normal; Units: K/UL; Status: F; Updated: 11/19
 10:18
 Test: LYMPHOCYTE PERCENT; Value: 10; Range: 10-50; Abnormal: ; Units:
 %; Status: F; Updated: 11/19 10:18
 Test: LYMPHOCYTES ABSOLUTE; Value: 1.10; Range: 1.0-4.0; Abnormal: ;
 Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: MONOCYTE PERCENT; Value: 6; Range: 0-12; Abnormal: ; Units: %;
 Status: F; Updated: 11/19 10:18
 Test: MONOCYTE ABSOLUTE COUNT; Value: 0.64; Range: 0.2-1.0; Abnormal:
 ; Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: EOSINOPHIL PERCENT; Value: 0; Range: 0-7; Abnormal: ; Units: %;
 Status: F; Updated: 11/19 10:18
 Test: EOSINOPHIL ABSOLUTE; Value: 0.05; Range: 0.0-0.5; Abnormal: ;
 Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: BASOPHIL PERCENT; Value: 0; Range: 0-2; Abnormal: ; Units: %;

Status: F; Updated: 11/19 10:18
 Test: BASOPHIL ABSOLUTE; Value: 0.04; Range: 0.0-0.2; Abnormal: ;
 Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: IMMATURE GRANS PERCENT; Value: 0.3; Abnormal: ; Units: %;
 Status: F; Updated: 11/19 10:18
 Test: IMMATURE GRANS ABSOLUTE; Value: 0.0; Range: 0.0-0.1; Abnormal:
 ; Status: F; Updated: 11/19 10:18
 Lab Order: Thyroid Stimulating Hormone; SPEC'M 11/19/17 10:11
 Test: THYROID STIMULATING HORMONE; Value: 1.29; Range: 0.34-5.60;
 Abnormal: ; Units: uIU/ML; Status: F; Updated: 11/19 10:48
 Lab Order: POC GLU; SPEC'M 11/19/17 10:13
 Test: POC GLU; Value: 429; Range: 65-100; Abnormal: Above high
 normal; Units: MG/DL; Status: F; Updated: 11/19 10:13

Radiology Order: Chest 1 View - Portable

Test: Chest 1 View - Portable

SOVAH HEALTH - MARTINSVILLE Name: HILL,BRIAN D ; RADIOLOGY DEPT Phys:
 EKUBAN-GORDON,EDNA MD ; 320 HOSPITAL DR DOB: 05/26/1990 Age: 27 Sex:
 M ; MARTINSVILLE, VA 24112 Acct: MM7805836274 Loc: MM.ER ; PHONE #:
 276-666-7223 Exam Date: 11/19/2017 Status: DEP ER ; FAX #:
 276-666-7591 Radiology No: ; Unit No: MM00370912 ; EXAMS: EXAM
 REASON: ; 000898111 CHEST 1 VIEW - PORTABLE Chest Tightness ;
 PORTABLE CHEST ; HISTORY: Seizure. ; COMPARISON: 11/10/2015 ;
 FINDINGS: The heart size and configuration are within normal limits ;
 for age and portable technique. The lungs are clear. There is no ;
 evidence of pleural effusions or pneumothorax. No acute bony ;
 abnormality. ; IMPRESSION: No evidence of acute cardiopulmonary
 disease. ; ** Electronically Signed by MAROON B KHOURY on 11/19/2017
 at 1424 ** ; Reported by: DR. MAROON B KHOURY ; Signed by:
 KHOURY,MAROON B ; ; CC: EDNA EKUBAN-GORDON MD ; ; Technologist: KYLEA
 ANN KEATTS ; Transcribed Date/Time: 11/19/2017 (1146) ;
 Transcriptionist: MMTRSPSB ; Orig Print D/T: S: 11/19/2017 (1424) ;
 Reprint D/T: 11/19/2017 (1424) BATCH NO: N/A ;
 Radiology Order: CT Head w/o Contrast

Test: CT Head w/o Contrast

SOVAH HEALTH - MARTINSVILLE Name: HILL,BRIAN D ; RADIOLOGY DEPT Phys:
 EKUBAN-GORDON,EDNA MD ; 320 HOSPITAL DR DOB: 05/26/1990 Age: 27 Sex:
 M ; MARTINSVILLE, VA 24112 Acct: MM7805836274 Loc: MM.ER ; PHONE #:
 276-666-7223 Exam Date: 11/19/2017 Status: DEP ER ; FAX #:
 276-666-7591 Radiology No: ; Unit No: MM00370912 ; EXAMS: EXAM
 REASON: ; 000898114 CT HEAD W/O CONTRAST ; UNENHANCED HEAD CT ;
 HISTORY: Head injury. ; COMPARISON: 11/10/2015 ; TECHNIQUE: This CT
 examination was performed using one or more of the ; following dose
 reduction techniques: automated exposure control, ; adjustment of the
 MA and/or KV according to patient size, and/or use ; of iterative
 reconstruction techniques. ; Axial CT images were obtained through
 the brain without the use of ; intravenous contrast. ; FINDINGS:

There is no evidence of acute infarct, intracranial ; hemorrhage, or
 mass effect. Ventricles and sulci are normal for the ; patient's age.
 Calvarium is intact. Visualized portions of the ; paranasal sinuses
 and orbits are normal. ; IMPRESSION: Negative for acute intracranial
 process. ; ** Electronically Signed by MAROON B KHOURY on 11/19/2017
 at 1424 ** ; Reported by: DR. MAROON B KHOURY ; Signed by:
 KHOURY,MAROON B ; ; CC: EDNA EKUBAN-GORDON MD ; ; Technologist:

Discharge Instructions for: Brian Hill

HILL, BRIAN D
 MM7805836274 PRE ER MM.ER
 11/19/17 0850 UNKNOWN, UNKNOWN
 DOB: 05/26/90 27 M MR# MM00370912
 Sovah Health - Martinsville



Sovah Health Martinsville

320 Hospital Drive
 Martinsville, VA 24112
 276-666-7237

119167
 97
 98.1
 18

**Emergency Department
 Instructions for:**

Hill, Brian D

Arrival Date:

Sunday, November 19, 2017

Thank you for choosing **Sovah Health Martinsville** for your care today. The examination and treatment you have received in the Emergency Department today have been rendered on an emergency basis only and are not intended to be a substitute for an effort to provide complete medical care. You should contact your follow-up physician as it is important that you let him or her check you and report any new or remaining problems since it is impossible to recognize and treat all elements of an injury or illness in a single emergency care center visit.

Care provided by: Ekuban-Gordon, Edna, MD

Diagnosis: Head Laceration/ Open wound of head; Hyperglycemia, unspecified

DISCHARGE INSTRUCTIONS	FORMS
Head Injury, Adult Facial Laceration Hyperglycemia, Easy-to-Read Stitches, Staples, or Adhesive Wound Closure, Easy-to-Read	Medication Reconciliation
FOLLOW UP INSTRUCTIONS	PRESCRIPTIONS
Private Physician When: 2 - 3 days; Reason: Wound Recheck	None
SPECIAL NOTES	
None	

Suicide National Hotline: 1-800-273-8255 (800-273-TALK)

If you received a narcotic or sedative medication during your Emergency Department stay you should not drive, drink alcohol or operate heavy machinery for the next 8 hours as this medication can cause drowsiness, dizziness, and decrease your response time to events.

I hereby acknowledge that I have received a copy of my transition care record and understand the above instructions and prescriptions.

Brian D Hill

Brian Hill
MRN # MM00370912

Belletronas, MD

ED Physician or Nurse
11/19/2017 12:14

X-RAYS and LAB TESTS:

If you had x-rays today they were read by the emergency physician. Your x-rays will also be read by a radiologist within 24 hours. If you

Discharge Instructions for: Brian Hill

had a culture done it will take 24 to 72 hours to get the results. If there is a change in the x-ray diagnosis or a positive culture, we will contact you. Please verify your current phone number prior to discharge at the check out desk.

MEDICATIONS:

If you received a prescription for medication(s) today, it is important that when you fill this you let the pharmacist know all the other medications that you are on and any allergies you might have. It is also important that you notify your follow-up physician of all your medications including the prescriptions you may receive today.

TESTS AND PROCEDURES

Labs

CMP, Complete Blood Count W/auto Diff, Thyroid Stimulating Hormone, POC GLU, POC GLU

Rad

CT Head w/o Contrast, Chest 1 View - Portable

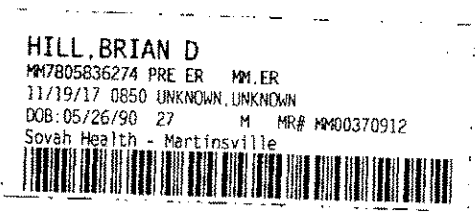
Procedures

Blood Sugar, 12 Lead EKG, Laceration

Other

Seizure precautions, Accucheck, Cardiac Monitor, Apply to Pt, Pulse ox continuous, Oxygen at 2 L/NC, IV saline lock, EKG ED, Laceration repair set up

Chart Copy



EMERGENCY DEPARTMENT RECORD

Nurse's Notes

Sovah Health Martinsville

Name: Brian Hill

Age: 27 yrs

Sex: Male

DOB: 05/26/1990

MRN: MM00370912

Arrival Date: 11/19/2017

Time: 08:51

Account#: MM7805836274

Bed ER 6

Private MD:

Diagnosis: Head Laceration/ Open wound of head;Hyperglycemia, unspecified

Presentation:

11/19

09:08 Presenting complaint: Patient states: had a seizure this morning due to low blood sugar, laceration to head per pt, bleeding controlled. 11
 Airway is patent with good air movement. The patient is breathing without difficulty. The patient is pink, warm and dry. Heart rate is within normal limits. Patient is alert and oriented to person, place and time, Patient is moving all extremities appropriately.

11/19

09:08 Acuity: Urgent (3)

11

Historical:

- Allergies: Ranitidine;

- Home Meds:

1. Unable to Obtain

- PMHx: OCD; autism; Diabetes - IDDM;

- Sepsis Screening:: Sepsis screening negative at this time.

- Social history:: Tobacco Status: The patient states he/she has never used tobacco. The patient's primary language is English. The patient's preferred language is English.

- Family history:: Reviewed and not pertinent.

- Exposure Risk/Travel Screening:: Patient has not been out of the country in last 30 days. Have you been in contact with anyone who is ill that has traveled outside of the country in the last 30 days? No.

- Suicide Screening:: Have you recently had thoughts about hurting yourself or others? No.

- Tuberculosis screening:: No symptoms or risk factors identified.

Screening:

11/19

09:41 Fall Risk: Total Points: Med. Risk (25-44);. Abuse Screen: Patient verbally denies physical, verbal and emotional abuse/neglect. There are no cultural/spiritual considerations for care for this patient. mkk

Assessment:

11/19

09:38 Complains of pain in face Pain does not radiate. Pain currently is 7 mkk

out of 10 on a pain scale. The level of pain that is acceptable is 0 out of 10 on a pain scale. General: Appears in no apparent distress, comfortable, well developed, well nourished, well groomed, Behavior is appropriate for age, cooperative, pleasant. Neuro: Reports headache. Neuro: Reports seizure due to low blood sugar. EENT: Denies. Cardiovascular: Denies. Respiratory: Denies. GI: Denies. GU: Denies. Derm: Denies. Musculoskeletal: Denies. Injury Description: Laceration sustained to face is clean, 0.5 to 2.5 cm long, not bleeding, was sustained 4-6 hours ago.

11/19

09:38 Method Of Arrival: EMS

mkk

Vital Signs:

11/19

09:08 BP 131 / 76; Pulse 118; Resp 20; Temp 98.2; Pulse Ox 97% ; Weight 91.63 kg; Height 5 ft. 10 in. (177.80 cm);

ll

11/19

09:46

mkk

11/19

10:59 BP 124 / 73; Pulse 93; Resp 18; Pulse Ox 100% on R/A;

mkk

11/19

12:57 BP 119 / 67; Pulse 97; Resp 19; Pulse Ox 98% on R/A;

pt3

11/19

09:08 Body Mass Index 28.98 (91.63 kg, 177.80 cm)

ll

11/19

09:46 patient has OCD and had to do his "routines" prior to coming, has been about 4 hours since injury occurred

mkk

Glasgow Coma Score:

11/19

12:16 Eye Response: spontaneous(4). Verbal Response: oriented(5). Motor Response: obeys commands(6). Total: 15.

eeg

ED Course:

11/19

08:51 Patient arrived in ED.

knm

11/19

09:09 Rapid Initial Assessment completed.

ll

11/19

09:27 Ekuban-Gordon, Edna, MD is Attending Physician.

eeg

11/19

09:41 Patient has correct armband on for positive identification. Placed in gown. Bed in low position. Call light in reach. Side rails up X2.

Adult with patient. Seizure precautions initiated. NIBP on. Pulse ox on.

11/19

09:41 No physician assisted procedures were completed.

mkk

11/19

10:01 Inserted saline lock: 20 gauge right arm blood drawn from IV and sent to lab per order.

11/19

10:08 EKG Done By ED Tech 10:06 Reviewed by Physician Edna Ekuban-Gordon MD.bh

11/19

10:40 Critical Lab Value: Patient Name verified: Brian Hill, Patient DOB

ll

Verified May 26, 1990 Critical value glucose 459 reported read back to reporting lab personnel, and reported to Dr. Edna Ekuban-Gordon MD.

11/19
 10:59 Assist provider with laceration repair Set up tray. mkk
 11/19
 11:53 Troncoso, Priscilla, RN is Primary Nurse. pt3

Administered Medications:

11/19
 10:59 Drug: NS 0.9% 1000 ml Route: IV; Rate: 999 mL/hr; Site: right arm; mkk
 11/19
 12:59 Follow up: Response: No adverse reaction; IV Status: Completed pt3
 infusion
 11/19
 11:02 Drug: NovoLIN R 7 units {Co-Signature: mkk (Michaela Karet RN).} ll
 Route: IVP; Site: right arm;
 11/19
 12:58 Follow up: Response: No adverse reaction pt3

Point of Care Testing:

Blood Glucose:
 11/19
 09:40 Glucose Value: 489; mkk
 11/19
 09:43 Glucose Value: 435; mkk
 11/19
 09:40 test repeated mkk
 Ranges:

Output:

11/19
 11:28 Urine: 600ml (Voided); Total: 600ml. dab

Outcome:

11/19
 12:14 Discharge ordered by Provider. eeg
 11/19
 12:57 Discharged to home ambulatory, with family. pt3
 12:57 Instructions given to patient, parent, Instructed on discharge instructions. follow up and referral plans. . Patient and/or family voiced understanding of instructions using teach back method.
 12:57 The patients' shirt, pants, shoes, socks and underwear were sent with the patient.
 12:57 Discharge Assessment: Patient
 12:57 Discharge Assessment: Patient has no functional deficits.
 12:57 Discontinued IV lock intact, bleeding controlled, pressure dressing applied, No redness/swelling at site.
 11/19
 13:24 Patient left the ED. jkp

Signatures:

Harrison, Rindi, RN RN ll
 Ekuban-Gordon, Edna, MD MD eeg

EMERGENCY DEPARTMENT RECORD

Physician Documentation

Sovah Health Martinsville

Name: Brian Hill

Age: 27 yrs

Sex: Male

DOB: 05/26/1990

MRN: MM00370912

Arrival Date: 11/19/2017

Time: 08:51

Account#: MM7805836274

Bed ER 6

Private MD:

ED Physician Ekuban-Gordon, Edna

HPI:

11/19

11:49 This 27 yrs old White Male presents to ER via EMS with complaints of eeg
Fall Injury.

11/19

11:49 Onset: The symptoms/episode began/occurred today. Associated eeg
injuries: The patient sustained injury to the head. Associated signs
and symptoms: Loss of consciousness: the patient experienced no loss
of consciousness. Severity of symptoms: in the emergency department
the symptoms are unchanged. Pain Management: Patient denies pain. The
patient has experienced similar episodes in the past, a few times.
The patient has not recently seen a physician. Family report history
of low blood sugar, general low will have seizure episode when the
blood sugar is low. Blood sugar was obtained by mom at 20 repeat 40
was subsequently given some oral glucose and brought here for further
evaluation. Patient denies any headache palpitation no neck pain and
stiffness. Admits to feeling like himself..

Historical:

- Allergies: Ranitidine;
- Home Meds:
- 1. Unable to Obtain
 - PMHx: OCD; autism; Diabetes - IDDM;
 - Sepsis Screening:: Sepsis screening negative at this time.
 - Social history:: Tobacco Status: The patient states he/she has never used tobacco. The patient's primary language is English. The patient's preferred language is English.
 - Family history:: Reviewed and not pertinent.
 - Exposure Risk/Travel Screening:: Patient has not been out of the country in last 30 days. Have you been in contact with anyone who is ill that has traveled outside of the country in the last 30 days? No.
 - Suicide Screening:: Have you recently had thoughts about hurting yourself or others? No.
 - Tuberculosis screening:: No symptoms or risk factors identified.
 - The history from nurses notes was reviewed: and I agree with what is documented up to this point.

ROS:

11/19

11:52 Eyes: Negative for injury, pain, redness, and discharge, ENT: eeg
 Negative for injury, pain, and discharge, Neck: Negative for injury,
 pain, and swelling, Cardiovascular: Negative for chest pain,
 palpitations, and edema, Respiratory: Negative for shortness of
 breath, cough, wheezing, and pleuritic chest pain, Abdomen/GI:
 Negative for abdominal pain, nausea, vomiting, diarrhea, and
 constipation, Back: Negative for injury and pain, MS/Extremity:
 Negative for injury and deformity. All other systems are negative,
 except as documented below. Skin: Positive for laceration(s), of the
 face. Neuro: Negative for dizziness, headache, weakness. Psych:
 Negative for depression, alcohol dependence, homicidal ideation,
 suicide gesture.

Exam:

11/19

11:53 Eyes: Pupils equal round and reactive to light, extra-ocular motions eeg
 intact. Lids and lashes normal. Conjunctiva and sclera are
 non-icteric and not injected. Cornea within normal limits.
 Periorbital areas with no swelling, redness, or edema. ENT: Nares
 patent. No nasal discharge, no septal abnormalities noted. Tympanic
 membranes are normal and external auditory canals are clear.
 Oropharynx with no redness, swelling, or masses, exudates, or
 evidence of obstruction, uvula midline. Mucous membrane moist Neck:
 Trachea midline, no thyromegaly or masses palpated, and no cervical
 lymphadenopathy. Supple, full range of motion without nuchal
 rigidity, or vertebral point tenderness. No Meningismus.
 Chest/axilla: Normal chest wall appearance and motion. Nontender
 with no deformity. No lesions are appreciated. Cardiovascular:
 Regular rate and rhythm with a normal S1 and S2. ,no jvd No pulse
 deficits. Respiratory: Lungs have equal breath sounds bilaterally,
 clear to auscultation and percussion. No rales, rhonchi or wheezes
 noted. No increased work of breathing, no retractions or nasal
 flaring. Abdomen/GI: Soft, non-tender, with normal bowel sounds. No
 distension or tympany. No guarding or rebound. No evidence of
 tenderness throughout. Back: No spinal tenderness. No
 costovertebral tenderness. Full range of motion. MS/ Extremity:
 Pulses equal, no cyanosis. Neurovascular intact. Full, normal range
 of motion. Neuro: Awake and alert, GCS 15, oriented to person,
 place, time, and situation. Cranial nerves II-XII grossly intact.
 Motor strength 5/5 in all extremities. Sensory grossly intact.
 Cerebellar exam normal. Normal gait., slow, but appropriate Psych:
 Awake, alert, with orientation to person, place and time. Behavior,
 mood, and affect are within normal limits.
 11:53 Constitutional: The patient appears alert, awake, non-diaphoretic.
 11:53 Head/face: Noted is a laceration(s), that is linear, 3 cm(s).
 11:53 Musculoskeletal/extremity: Extremities: all appear grossly normal,
 with no appreciated pain with palpation, ROM: intact in all
 extremities, Circulation is intact in all extremities. Sensation
 intact.
 11:53 Psych: Behavior/mood is cooperative.

Vital Signs:

11/19

SOVAH HEALTH - MARTINSVILLE
 320 HOSPITAL DRIVE - P.O. BOX 4788
 MARTINSVILLE, VA 24112 (276)666-7360
 CLIA NO. 49D0231853 RT CLIA NO. 4D0661287

RUN DATE:11/23/17

DISCHARGE SUMMARY FOR MEDICAL RECORDS FOR LABORATORY

Patient: HILL, BRIAN D #MM7805836274 (Continued)

*****CHEMISTRY*****

Date 11/19/17
 Time 1007 Reference Units

BUN	7		(5-25)	MG/DL
CREATININE	1.01		(0.90-1.30)	MG/DL
eGFR NON-AA	102 (A)			

(A) Non-African American

eGFR AA	118 (B)			
---------	---------	--	--	--

(B) African American.

eGFR UNITS: ml/min/1.73m2.
 *eGFR >= 60 = Normal GFR or mild decrease in GFR
 *eGFR 30-59 = Moderate decrease in GFR (Stage 3 CKD)
 *eGFR 15-29 = Severe decrease in GFR (Stage 4 CKD)
 *eGFR <15 = End-stage kidney failure (Stage 5 CKD)

The equation has not been validated in patients >70 YRS OLD.

SODIUM	131	L	(135-145)	MMOL/L
POTASSIUM	4.4		(3.5-5.0)	MMOL/L
CHLORIDE	96	L	(98-109)	MMOL/L
CO2	26		(20-30)	MMOL/L
ANION GAP	9.0		(1-10)	
GLUCOSE	459 (C)	*H	(65-100)	MG/DL

(C) CRITICAL RESULTS CALLED ON 11/19/17
 AT 1035 TO: RINDY LAPRADE/RB/CALLED X 2 SNCE 1035
 BY: CLIFTON, LYDIA C

CALCIUM	9.0		(8.5-10.3)	MG/DL
TOTAL PROTEIN	7.8		(6.0-8.0)	G/DL
ALBUMIN	4.3		(3.2-5.5)	G/DL
AG	1.2		(1.2-1.7)	RATIO
GLOBULIN	3.5		(2.5-3.9)	G/DL
T BILI	0.50		(0.20-1.00)	MG/DL
SGOT/AST	27		(10-42)	IU/L
SGPT/ALT	21		(10-60)	IU/L
ALK PHOS	74		(42-121)	IU/L
TSH	1.29		(0.34-5.60)	uIU/ML

Patient: HILL, BRIAN D Age/Sex: 27/M Acct#MM7805836274 Unit#MM00370912

SOVAH HEALTH - MARTINSVILLE
RADIOLOGY DEPT
320 HOSPITAL DR
MARTINSVILLE, VA 24112
PHONE #: 276-666-7223
FAX #: 276-666-7591

Name: HILL, BRIAN D
Phys: EKUBAN-GORDON, EDNA MD
DOB: 05/26/1990 Age: 27 Sex: M
Acct: MM7805836274 Loc: MM.ER
Exam Date: 11/19/2017 Status: DEP ER
Radiology No:
Unit No: MM00370912

EXAMS: 000898111 CHEST 1 VIEW - PORTABLE EXAM REASON: Chest Tightness

PORTABLE CHEST

HISTORY: Seizure.

COMPARISON: 11/10/2015

FINDINGS: The heart size and configuration are within normal limits for age and portable technique. The lungs are clear. There is no evidence of pleural effusions or pneumothorax. No acute bony abnormality.

IMPRESSION: No evidence of acute cardiopulmonary disease.

** Electronically Signed by MAROON B KHOURY on 11/19/2017 at 1424 **
Reported by: DR. MAROON B KHOURY
Signed by: KHOURY, MAROON B

CC: EDNA EKUBAN-GORDON MD

Technologist: KYLEA ANN KEATTS
Transcribed Date/Time: 11/19/2017 (1146)
Transcriptionist: MMTRSPSB
Orig Print D/T: S: 11/19/2017 (1424)

BATCH NO: N/A

PAGE 1

Signed Report

HILL, BRIAN

EXHIBIT PAGE 306 OF 337
ID: 000370912 19-Nov-2017 10:06:44

Memorial Hospital of Martinsville

27 years

Male Caucasian

Vent. rate 105 bpm

PR interval 158 ms

QRS duration 92 ms

QT/QTc 328/433 ms

P-R-T axes 64 64 52

Sinus tachycardia

Possible Left atrial enlargement

Borderline ECG

Room: 4

Loc: 15

T HILL, BRIAN D

MM7805836274 PRE ER MM.ER

11/19/17 0850 UNKNOWN, UNKNOWN

DOB: 05/26/90 27 M MR# MM00370912

Sovah Health - Martinsville

Visit: MM7805836274

Secondary ID: MM216937

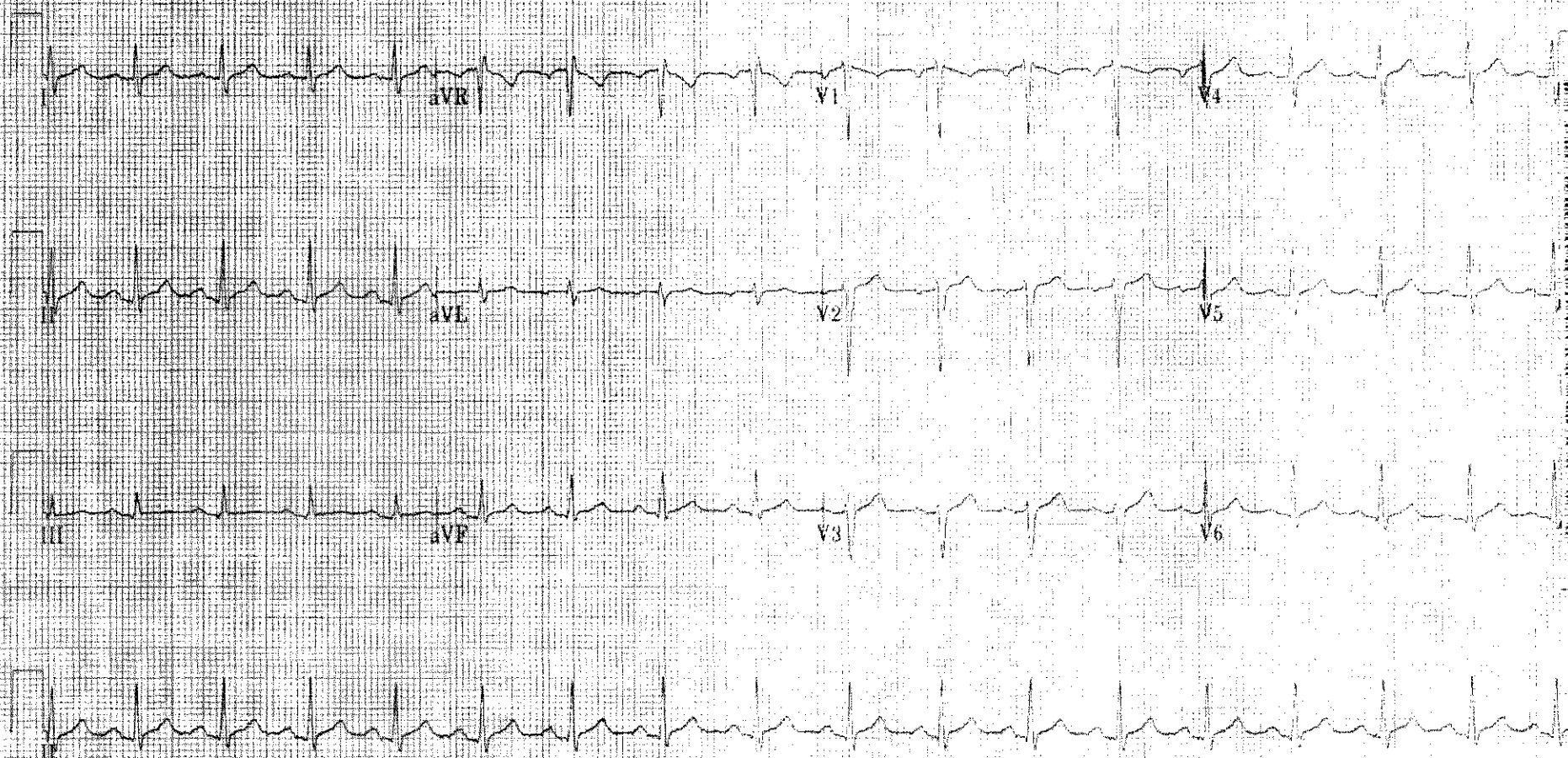
Referred by: EKUBAN-GORDON, EDNA

Order no: 211090013

Unconfirmed

1007
Bed 6

CHEST PAIN



100 Hz 25.0 mm/s 10.0 mm/mV

4 by 2.5s + 1 rhythm Id

MAC55 010B

12SL v241 HD

MM7805836274
Sovah Health - Martinsville
Job: 12468 (07/02/2019 14:03) - Page 35 Doc# 11
EKG Scanned Page 1/1

SOVAH HEALTH - MARTINSVILLE
 320 HOSPITAL DRIVE - P.O. BOX 4788
 MARTINSVILLE, VA 24112 (276)666-7360
 CLIA NO. 49D0231853 RT CLIA NO. 4D0661287

PAGE:1

RUN DATE:11/23/17

DISCHARGE SUMMARY FOR MEDICAL RECORDS FOR LABORATORY

CMAX: MM00370912~MM7805836274~LABDATA~20171123~LABDISMM1001869144~COCMMH~COCVAE~LAB.COCMMH~

PATIENT: HILL, BRIAN D ACCT #: MM7805836274 LOC: MM.ER U #: MM00370912
 AGE/SX: 27/M ROOM: REG: 11/19/17
 REG DR: EKUBAN-GORDON, EDNA MD DOB: 05/26/90 BED: DIS:
 STATUS: DEP ER TLOC:

*****POINT OF CARE*****

Date	Time	Reference	Units
11/19/17	1006 0943		
POC GLU	429 H 435 H	(65-100)	MG/DL

*****HEMATOLOGY*****

Date	Time	Reference	Units
11/19/17	1007		
WBC	11.6 H	(4.5-11.0)	K/UL
RBC	5.32	(4.50-5.90)	M/UL
HGB	15.8	(14.0-17.5)	G/DL
HCT	46.0	(35.0-49.0)	%
MCV	86.5	(80-96)	UM3
MCH	29.7	(27-32)	PG
MCHC	34.3	(32-37)	G/DL
RDW	13.1	(11.5-14.5)	%
RDW-SD	41.1	(35.1-43.9)	fl
PLT	241	(140-440)	K/UL
MPV	10.8 H	(7.4-10.4)	fl
SEGS %	84 H	(37-80)	%
SEG ABSOLUTE	9.77 H	(1.5-6.8)	K/UL
LYMPH %	10	(10-50)	%
LYMPH ABSOLUTE	1.10	(1.0-4.0)	K/UL
MONO %	6	(0-12)	%
MONO ABSOLUTE	0.64	(0.2-1.0)	K/UL
EOS %	0	(0-7)	%
EOS ABSOLUTE	0.05	(0.0-0.5)	K/UL
BASO %	0	(0-2)	%
BASO ABSOLUTE	0.04	(0.0-0.2)	K/UL
IG %	0.3		%
IG ABSOLUTE	0.0	(0.0-0.1)	

Patient: HILL, BRIAN D Age/Sex: 27/M Acct#MM7805836274 Unit#MM00370912

09:08 BP 131 / 76; Pulse 118; Resp 20; Temp 98.2; Pulse Ox 97% ; Weight 11
91.63 kg; Height 5 ft. 10 in. (177.80 cm);
11/19

09:46 mkk
11/19

10:59 BP 124 / 73; Pulse 93; Resp 18; Pulse Ox 100% on R/A; mkk
11/19

12:57 BP 119 / 67; Pulse 97; Resp 19; Pulse Ox 98% on R/A; pt3
11/19

09:08 Body Mass Index 28.98 (91.63 kg, 177.80 cm) 11
11/19

09:46 patient has OCD and had to do his "routines" prior to coming, has mkk
been about 4 hours since injury occurred

Glasgow Coma Score:
11/19

12:16 Eye Response: spontaneous(4). Verbal Response: oriented(5). Motor eeg
Response: obeys commands(6). Total: 15.

Laceration:
11/19

12:11 Wound Repair of 3cm (1.2in) subcutaneous laceration to forehead. eeg
Linear shaped.. No foreign body noted. Distal neuro/vascular/tendon
intact. Anesthesia: Wound infiltrated with 3 mls of 1% lidocaine w/
Epi. Wound prep: Simple cleansing with betadine. Skin closed with 6
1-0 Prolene using Staple gun. Dressed with pressure dressing. Patient
tolerated well.

MDM:
11/19

09:27 MSE Initiated by Provider. eeg
11/19

12:12 Differential diagnosis: abrasion, closed head injury, concussion, eeg
contusion, dislocation, fracture, laceration, multiple trauma,
sprain, Substance abuse. Data reviewed: vital signs, nurses notes,
lab test result(s), radiologic studies. Data interpreted: Cardiac
monitor: Normal rate. Counseling: I had a detailed discussion with
the patient and/or guardian regarding: the historical points, exam
findings, and any diagnostic results supporting the discharge/admit
diagnosis, lab results, radiology results, the need for outpatient
follow up, to return to the emergency department if symptoms worsen
or persist or if there are any questions or concerns that arise at
home. Response to treatment: the patient's symptoms have markedly
improved after treatment.

11/19

09:46 Order name: POC GLU; Complete Time: 09:57 EDMS
11/19

09:56 Order name: CMP; Complete Time: 10:53 eeg
11/19

09:56 Order name: Complete Blood Count W/auto Diff; Complete Time: 10:53 eeg

11/19

09:56 Order name: Thyroid Stimulating Hormone; Complete Time: 10:53 eeg
11/19

11/19/17 12:14 Discharged to Home. Impression: Head Laceration/ Open wound of head, Hyperglycemia, unspecified.

- Condition is Stable.
- Discharge Instructions: Head Injury, Adult, Facial Laceration, Hyperglycemia, Easy-to-Read, Stitches, Staples, or Adhesive Wound Closure, Easy-to-Read.
- Medication Reconciliation form.
- Follow up: Private Physician; When: 2 - 3 days; Reason: Wound Recheck.
- Problem is new.
- Symptoms have improved.

Order Results:

Lab Order: POC GLU; SPEC'M 11/19/17 09:46
 Test: POC GLU; Value: 435; Range: 65-100; Abnormal: Above high normal; Units: MG/DL; Status: F; Updated: 11/19 09:46
 Lab Order: CMP; SPEC'M 11/19/17 10:11
 Test: SODIUM; Value: 131; Range: 135-145; Abnormal: Below low normal; Units: MMOL/L; Status: F; Updated: 11/19 10:24
 Test: POTASSIUM; Value: 4.4; Range: 3.5-5.0; Abnormal: ; Units: MMOL/L; Status: F; Updated: 11/19 10:24
 Test: CHLORIDE; Value: 96; Range: 98-109; Abnormal: Below low normal; Units: MMOL/L; Status: F; Updated: 11/19 10:24
 Test: CARBON DIOXIDE; Value: 26; Range: 20-30; Abnormal: ; Units: MMOL/L; Status: F; Updated: 11/19 10:24
 Test: ANION GAP; Value: 9.0; Range: 1-10; Abnormal: ; Status: F; Updated: 11/19 10:24
 Test: CALCIUM; Value: 9.0; Range: 8.5-10.3; Abnormal: ; Units: MG/DL; Status: F; Updated: 11/19 10:24
 Test: BLOOD UREA NITROGEN; Value: 7; Range: 5-25; Abnormal: ; Units: MG/DL; Status: F; Updated: 11/19 10:34
 Test: CREATININE; Value: 1.01; Range: 0.90-1.30; Abnormal: ; Units: MG/DL; Status: F; Updated: 11/19 10:34
 Test: GLOMERULAR FILTRATION RATE; Value: 102; Abnormal: ; Status: F; Updated: 11/19 10:34
 Test Note: 11/19 10:34 T nbsp;; Non-African American
 Test: GLOMERULAR FILTRATION RATE-AA; Value: 118; Abnormal: ; Status: F; Updated: 11/19 10:34
 Test Note: 11/19 10:34 T nbsp;; African American. eGFR UNITS: ml/min/1.73m2. *eGFR >= 60 = Normal GFR or mild decrease in GFR *eGFR 30-59 = Moderate decrease in GFR (Stage 3 CKD) *eGFR 15-29 = Severe decrease in GFR (Stage 4 CKD) *eGFR <15 = End-stage kidney failure (Stage 5 CKD) The equation has not been validated in patients >70 YRS OLD.
 Test: TOTAL PROTEIN; Value: 7.8; Range: 6.0-8.0; Abnormal: ; Units: G/DL; Status: F; Updated: 11/19 10:34
 Test: ALBUMIN; Value: 4.3; Range: 3.2-5.5; Abnormal: ; Units: G/DL; Status: F; Updated: 11/19 10:34
 Test: ALB/GLOB RATIO; Value: 1.2; Range: 1.2-1.7; Abnormal: ; Units: RATIO; Status: F; Updated: 11/19 10:34
 Test: GLOBULIN; Value: 3.5; Range: 2.5-3.9; Abnormal: ; Units: G/DL;

Status: F; Updated: 11/19 10:34
 Test: BILIRUBIN, TOTAL; Value: 0.50; Range: 0.20-1.00; Abnormal: ;
 Units: MG/DL; Status: F; Updated: 11/19 10:34
 Test: SGOT/AST; Value: 27; Range: 10-42; Abnormal: ; Units: IU/L;
 Status: F; Updated: 11/19 10:34
 Test: SGPT/ALT; Value: 21; Range: 10-60; Abnormal: ; Units: IU/L;
 Status: F; Updated: 11/19 10:34
 Test: ALKALINE PHOSPHATASE; Value: 74; Range: 42-121; Abnormal: ;
 Units: IU/L; Status: F; Updated: 11/19 10:34
 Test: GLUCOSE, SERUM; Value: 459; Range: 65-100; Abnormal: Above
 upper panic limits; Units: MG/DL; Status: F; Updated: 11/19 10:39
 Test Note: 11/19 10:39 T nbsp;; CRITICAL RESULTS CALLED ON 11/19/17 AT
 1035 TO: RINDY LAPRADE/RB/CALLED X 2 SNCE 1035 BY: CLIFTON,LYDIA C
 Lab Order: Complete Blood Count W/auto Diff; SPEC'M 11/19/17 10:11
 Test: WHITE BLOOD CELL; Value: 11.6; Range: 4.5-11.0; Abnormal: Above
 high normal; Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: RED BLOOD CELL; Value: 5.32; Range: 4.50-5.90; Abnormal: ;
 Units: M/UL; Status: F; Updated: 11/19 10:18
 Test: HEMOGLOBIN; Value: 15.8; Range: 14.0-17.5; Abnormal: ; Units:
 G/DL; Status: F; Updated: 11/19 10:18
 Test: HEMATOCRIT; Value: 46.0; Range: 35.0-49.0; Abnormal: ; Units:
 %; Status: F; Updated: 11/19 10:18
 Test: MEAN CELL VOLUME; Value: 86.5; Range: 80-96; Abnormal: ; Units:
 UM3; Status: F; Updated: 11/19 10:18
 Test: MCH; Value: 29.7; Range: 27-32; Abnormal: ; Units: PG; Status:
 F; Updated: 11/19 10:18
 Test: MCHC; Value: 34.3; Range: 32-37; Abnormal: ; Units: G/DL;
 Status: F; Updated: 11/19 10:18
 Test: RELL CELL DISTRIBUTION WIDTH; Value: 13.1; Range: 11.5-14.5;
 Abnormal: ; Units: %; Status: F; Updated: 11/19 10:18
 Test: RDW STANDARD DEVIATION; Value: 41.1; Range: 35.1-43.9;
 Abnormal: ; Units: fl; Status: F; Updated: 11/19 10:18
 Test: PLATELETS; Value: 241; Range: 140-440; Abnormal: ; Units: K/UL;
 Status: F; Updated: 11/19 10:18
 Test: MEAN PLATELET VOLUME; Value: 10.8; Range: 7.4-10.4; Abnormal:
 Above high normal; Units: fl; Status: F; Updated: 11/19 10:18
 Test: SEGMENTED NEUTROPHIL PERCENT; Value: 84; Range: 37-80;
 Abnormal: Above high normal; Units: %; Status: F; Updated: 11/19 10:18
 Test: SEGMENTED NEUTROPHIL ABSOLUTE; Value: 9.77; Range: 1.5-6.8;
 Abnormal: Above high normal; Units: K/UL; Status: F; Updated: 11/19
 10:18
 Test: LYMPHOCYTE PERCENT; Value: 10; Range: 10-50; Abnormal: ; Units:
 %; Status: F; Updated: 11/19 10:18
 Test: LYMPHOCYTES ABSOLUTE; Value: 1.10; Range: 1.0-4.0; Abnormal: ;
 Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: MONOCYTE PERCENT; Value: 6; Range: 0-12; Abnormal: ; Units: %;
 Status: F; Updated: 11/19 10:18
 Test: MONOCYTE ABSOLUTE COUNT; Value: 0.64; Range: 0.2-1.0; Abnormal:
 ; Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: EOSINOPHIL PERCENT; Value: 0; Range: 0-7; Abnormal: ; Units: %;
 Status: F; Updated: 11/19 10:18
 Test: EOSINOPHIL ABSOLUTE; Value: 0.05; Range: 0.0-0.5; Abnormal: ;
 Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: BASOPHIL PERCENT; Value: 0; Range: 0-2; Abnormal: ; Units: %;

Status: F; Updated: 11/19 10:18
 Test: BASOPHIL ABSOLUTE; Value: 0.04; Range: 0.0-0.2; Abnormal: ;
 Units: K/UL; Status: F; Updated: 11/19 10:18
 Test: IMMATURE GRANS PERCENT; Value: 0.3; Abnormal: ; Units: %;
 Status: F; Updated: 11/19 10:18
 Test: IMMATURE GRANS ABSOLUTE; Value: 0.0; Range: 0.0-0.1; Abnormal:
 ; Status: F; Updated: 11/19 10:18
 Lab Order: Thyroid Stimulating Hormone; SPEC'M 11/19/17 10:11
 Test: THYROID STIMULATING HORMONE; Value: 1.29; Range: 0.34-5.60;
 Abnormal: ; Units: uIU/ML; Status: F; Updated: 11/19 10:48
 Lab Order: POC GLU; SPEC'M 11/19/17 10:13
 Test: POC GLU; Value: 429; Range: 65-100; Abnormal: Above high
 normal; Units: MG/DL; Status: F; Updated: 11/19 10:13

Radiology Order: Chest 1 View - Portable

Test: Chest 1 View - Portable
 SOVAH HEALTH - MARTINSVILLE Name: HILL,BRIAN D ; RADIOLOGY DEPT Phys:
 EKUBAN-GORDON,EDNA MD ; 320 HOSPITAL DR DOB: 05/26/1990 Age: 27 Sex:
 M ; MARTINSVILLE, VA 24112 Acct: MM7805836274 Loc: MM.ER ; PHONE #:
 276-666-7223 Exam Date: 11/19/2017 Status: DEP ER ; FAX #:
 276-666-7591 Radiology No: ; Unit No: MM00370912 ; EXAMS: EXAM
 REASON: ; 000898111 CHEST 1 VIEW - PORTABLE Chest Tightness ;
 PORTABLE CHEST ; HISTORY: Seizure. ; COMPARISON: 11/10/2015 ;
 FINDINGS: The heart size and configuration are within normal limits ;
 for age and portable technique. The lungs are clear. There is no ;
 evidence of pleural effusions or pneumothorax. No acute bony ;
 abnormality. ; IMPRESSION: No evidence of acute cardiopulmonary
 disease. ; ** Electronically Signed by MAROON B KHOURY on 11/19/2017
 at 1424 ** ; Reported by: DR. MAROON B KHOURY ; Signed by:
 KHOURY,MAROON B ; ; CC: EDNA EKUBAN-GORDON MD ; ; Technologist: KYLEA
 ANN KEATTS ; Transcribed Date/Time: 11/19/2017 (1146) ;
 Transcriptionist: MMTRSPSE ; Orig Print D/T: S: 11/19/2017 (1424) ;
 Reprint D/T: 11/19/2017 (1424) BATCH NO: N/A ;
 Radiology Order: CT Head w/o Contrast

Test: CT Head w/o Contrast
 SOVAH HEALTH - MARTINSVILLE Name: HILL,BRIAN D ; RADIOLOGY DEPT Phys:
 EKUBAN-GORDON,EDNA MD ; 320 HOSPITAL DR DOB: 05/26/1990 Age: 27 Sex:
 M ; MARTINSVILLE, VA 24112 Acct: MM7805836274 Loc: MM.ER ; PHONE #:
 276-666-7223 Exam Date: 11/19/2017 Status: DEP ER ; FAX #:
 276-666-7591 Radiology No: ; Unit No: MM00370912 ; EXAMS: EXAM
 REASON: ; 000898114 CT HEAD W/O CONTRAST ; UNENHANCED HEAD CT ;
 HISTORY: Head injury. ; COMPARISON: 11/10/2015 ; TECHNIQUE: This CT
 examination was performed using one or more of the ; following dose
 reduction techniques: automated exposure control, ; adjustment of the
 MA and/or KV according to patient size, and/or use ; of iterative
 reconstruction techniques. ; Axial CT images were obtained through
 the brain without the use of ; intravenous contrast. ; FINDINGS:

There is no evidence of acute infarct, intracranial ; hemorrhage, or
 mass effect. Ventricles and sulci are normal for the ; patient's age.
 Calvarium is intact. Visualized portions of the ; paranasal sinuses
 and orbits are normal. ; IMPRESSION: Negative for acute intracranial
 process. ; ** Electronically Signed by MAROON B KHOURY on 11/19/2017
 at 1424 ** ; Reported by: DR. MAROON B KHOURY ; Signed by:
 KHOURY,MAROON B ; ; CC: EDNA EKUBAN-GORDON MD ; ; Technologist:

EXHIBIT 24

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
JUSTICEFORUSWGO.WORDPRESS.COM





ROANOKE
ENDOCRINOLOGY CCR3
3 RIVERSIDE CIRCLE

Hill, Brian David
MRN: 7244793, DOB: 5/26/1990, Sex: M
Visit date: 12/22/2017

Reviewed by List

Balakrishnan, Shyam E, MD on 1/15/2018 18:06

Results

CBC WITH AUTO DIFF (CBCD) (Order 368602037)

CBC WITH AUTO DIFF (CBCD) [368602037] (Abnormal)

Resulted: 07/31/18 1210, Result status: Final result

Ordering provider: Balakrishnan, Shyam E, MD 07/31/18 1110

Resulting lab: GENESYS MARTINSVILLE

Specimen Information

Type	Source	Collected On
Blood, Venous	—	07/31/18 1122

Components

Component	Value	Reference Range	Flag	Lab
WBC	8.0	4.8 - 10.8 x10	—	gen martinsvi
RBC	5.53	4.50 - 5.30 x10	H	gen martinsvi
Hemoglobin	16.3	13.0 - 16.0 G/DL	H	gen martinsvi
Hematocrit	49.1	37.0 - 49.0 %	H	gen martinsvi
MCV	89	78 - 98 fL	—	gen martinsvi
MCH	29.5	27.0 - 34.6 pg	—	gen martinsvi
MCHC	33.2	33.0 - 37.0 g/dL	—	gen martinsvi
RDW	12.3	11.5 - 14.5 %	—	gen martinsvi
Platelet Count	235	130 - 400 x10	—	gen martinsvi
MPV	8.9	7.4 - 10.4 fL	—	gen martinsvi
Seg	65.5	42.0 - 75.0 %	—	gen martinsvi
Lymph	20.9	21.0 - 51.0 %	L	gen martinsvi
Monos	11.4	2.0 - 13.0 %	—	gen martinsvi
Eos	1.6	0.0 - 10.0 %	—	gen martinsvi
Baso	0.6	0.0 - 2.0 %	—	gen martinsvi
Absolute Neut	5.30	1.80 - 7.70 x10	—	gen martinsvi
Absolute Lymph	1.70	1.00 - 5.00 x10	—	gen martinsvi
Absolute Mono	0.90	0.00 - 0.80 x10	H	gen martinsvi
Absolute Eos	0.10	0.00 - 0.70 X 10	—	gen martinsvi
Absolute Basophils	0.00	0.00 - 0.20 X10	—	gen martinsvi

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
212 - gen martinsvi	GENESYS MARTINSVILLE	Unknown	1107 A Brookdale St Martinsville VA 24112	09/14/10 1517 - Present

Reviewed by List

Balakrishnan, Shyam E, MD on 8/1/2018 10:31

Results

COMPREHENSIVE METABOLIC PANEL(COMP) (Order 368602038)

COMPREHENSIVE METABOLIC PANEL(COMP) [368602038] (Abnormal)

Resulted: 07/31/18 1210, Result status: Final result

Ordering provider: Balakrishnan, Shyam E, MD 07/31/18 1110

Resulting lab: GENESYS MARTINSVILLE

Specimen Information



MARTINSVILLE FP IM
1107A BROOKDALE
STREET

Hill, Brian David
MRN: 7244793, DOB: 5/26/1990, Sex: M
Visit date: 7/31/2018

Type	Source	Collected On
Blood, Venous	—	07/31/18 1122

Components

Component	Value	Reference Range	Flag	Lab
Sodium	137	135 - 145 mmol/L	—	gen martinsvi
Potassium	4.4	3.5 - 5.3 mmol/L	—	gen martinsvi
Chloride	101	98 - 110 mmol/L	—	gen martinsvi
CO2	29	21 - 31 mmol/L	—	gen martinsvi
Urea Nitrogen	10	7.0 - 22.0 mg/dL	—	gen martinsvi
Creatinine	1.02	0.50 - 1.40 mg/dL	—	gen martinsvi
Glom Filtr Rate, Estimated	87	>60	—	gen martinsvi
Glucose, Bld	237	70 - 99 mg/dL	H	gen martinsvi
Total Protein	7.1	6.0 - 8.3 g/dL	—	gen martinsvi
Albumin	4.0	3.2 - 5.5 g/dl	—	gen martinsvi
Calcium	9.2	8.5 - 10.7 mg/dL	—	gen martinsvi
Total Bilirubin	0.5	0.0 - 1.3 mg/dL	—	gen martinsvi
Alkaline Phosphatase, Serum	77	42 - 121 IU/L	—	gen martinsvi
AST	18	15 - 45 IU/L	—	gen martinsvi
ALT	18	10 - 60 IU/L	—	gen martinsvi
Globulin	3.1	g/dl	—	gen martinsvi
A/G Ratio	1.3	—	—	gen martinsvi
Anion Gap	11.4	mmol/L	—	gen martinsvi
Osmolality	280.56	mmol/L	—	gen martinsvi
Bun/Creatinine	9.80	RATIO	—	gen martinsvi

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
212 - gen martinsvi	GENESYS MARTINSVILLE	Unknown	1107 A Brookdale St Martinsville VA 24112	09/14/10 1517 - Present

Reviewed by List

Balakrishnan, Shyam E, MD on 8/1/2018 10:31

Results

HEMOGLOBIN A1C(HA1C) (Order 368602039)

HEMOGLOBIN A1C(HA1C) [368602039] (Abnormal) Resulted: 07/31/18 1149, Result status: Final result

Ordering provider: Balakrishnan, Shyam E, MD 07/31/18 1110 Resulting lab: GENESYS MARTINSVILLE

Specimen Information

Type	Source	Collected On
Blood, Venous	—	07/31/18 1122

Components

Component	Value	Reference Range	Flag	Lab
Hemoglobin A1C	9.1	3.8 - 5.9 %	H	gen martinsvi

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
212 - gen martinsvi	GENESYS MARTINSVILLE	Unknown	1107 A Brookdale St Martinsville VA 24112	09/14/10 1517 - Present

Reviewed by List

Balakrishnan, Shyam E, MD on 8/1/2018 10:31
Balakrishnan, Shyam E, MD on 7/31/2018 11:50



MARTINSVILLE FP IM
1107A BROOKDALE
STREET

Hill, Brian David
MRN: 7244793, DOB: 5/26/1990, Sex: M
Visit date: 7/31/2018

END OF REPORT

EXHIBIT 25

**attached to: “MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D),
VIRGINIA CODE § 8.01-428(A) AND VIRGINIA
CODE § 8.01-428(B) ON THE BASIS OF FRAUD
UPON THE COURT, CLERICAL FACTUAL
ERRORS”**

by Brian David Hill

**Case no. CR19000009-00, Circuit Court, City of
Martinsville, Virginia**

Ally of Q, Former news reporter of USWGO Alternative News
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VIRGINIA: IN THE CIRCUIT COURT FOR THE CITY OF MARTINSVILLE

COMMONWEALTH OF VIRGINIA,)
CITY OF MARTINSVILLE,)
PLAINTIFF(s),)

CASE NO: CR19000009-00

v.)

BRIAN DAVID HILL,)
DEFENDANT.)

**DECLARATION OF BRIAN DAVID HILL IN
SUPPORT OF MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF
CONVICTION OF CRIMINAL CHARGE PURSUANT
TO VIRGINIA CODE § 8.01-428(D), VIRGINIA
CODE § 8.01-428(A) AND VIRGINIA CODE § 8.01-
428(B) ON THE BASIS OF FRAUD UPON THE
COURT, CLERICAL FACTUAL ERRORS**

**DECLARATION OF BRIAN DAVID HILL IN SUPPORT OF MOTION FOR SET ASIDE OR
RELIEVE DEFENDANT OF JUDGMENT OF CONVICTION OF CRIMINAL CHARGE
PURSUANT TO VIRGINIA CODE § 8.01-428(D), VIRGINIA CODE § 8.01-428(A) AND
VIRGINIA CODE § 8.01-428(B) ON THE BASIS OF FRAUD UPON THE COURT,
CLERICAL FACTUAL ERRORS**

Respectfully submitted with the Court,

This the 25th day of January, 2023.

Brian D. Hill
Signed

Brian D. Hill

Brian D. Hill
Defendant

Former news reporter of U.S.W.G.O. Alternative News
Ally of Q

310 Forest Street, Apartment 2
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Pursuant to the Virginia Code § 8.01-4.3. “Unsworn declarations under penalty of perjury; penalty.”, criminal defendant Brian David Hill hereby state as follows to the Circuit Court for the City of Martinsville under penalty of perjury,

1. I am Brian David Hill, criminal defendant in this case. I am a party to this litigation. CASE NO: CR19000009-00.

2. I had written a letter to the Martinsville Police Department for requesting the discovery material of the body-camera footage (See **EXHIBIT PAGE 235 OF 337**, in **EXHIBIT 15**) which is evidence subject to discovery as ordered by both the General District Court (See **EXHIBIT PAGE 273-274 OF 337**, in **EXHIBIT 22**) and as ordered two different times from the Circuit Court (See **EXHIBIT PAGE 275-280 OF 337**, in **EXHIBIT 22**) as shown in **EXHIBIT 22**. I had access to a photocopying machine in the Federal Correctional Institution 1 which is a federal prison at the time I had mailed that letter to Martinsville Police Department, because during my federal court ordered mental evaluation, I was detained at the Federal Correctional Institution 1 in Butner, North Carolina. That federal prison allowed me to have access to a photocopying machine for legal paper copying reasons as well as access to a law library which unfortunately did not have Virginia statutes and neither of Virginia case law. I said in a photocopy of that exact written letter (**EXHIBIT PAGE 235**): *“Brian David Hill hereby requests a copy of Police Body-Camera footage presumably recorded by Sgt. R.D. Jones of Martinsville*

Police Department between the times of 3:00AM and 4:00AM, September 21, 2018”.

3. In 2019, when I was detained at the Federal Correctional Institution 1 in Butner, North Carolina pursuant to a court ordered mental evaluation, I had also written and kept at the time a “Mailing Log 2019 U.S.W.G.O. Brian David Hill #29947-057”. That was to keep a written record of every legal mailing I had mailed from the FCI-1 Butner prison facility. The record in pages **EXHIBIT PAGE 232-233 OF 337**, in **EXHIBIT 22**, is only two pages of more pages of mailing logs I had when I was in federal detention at the time I was in the mental evaluation process, but only those two pages are needed by me to prove to the Circuit Court for the City of Martinsville that I had mailed a letter which asked for the body-camera footage multiple times.

4. In the Mailing Log, Entry “#4” said “2pg”, “Chief of Police, Police of Martinsville, Martinsville VA Police, 55 West Church St, Municipal Building, Martinsville, VA 24112 US 01/30/2019”, in **EXHIBIT PAGE 232**. The other page said: “#4. copy of 1-page letter to Chief of Police dated January 20, 2019; and a copy of 1-page letter to Chief of Police dated January 19, 2019”, in **EXHIBIT PAGE 233**. Referring to the same entry #4 from both pages of the mailing log. A photocopy of the mailing envelope is in **EXHIBIT PAGE 236 OF 337**. That entry was the mailing of a photocopy on January 30, 2019, of what was originally mailed

on January 22, 2019 (**EXHIBIT PAGE 238 OF 337**). I believe I had mailed this mailing at the Mail Room at the Prison and I believe that envelope was classified as LEGAL MAIL. The photocopy of the mailed envelope is only of one mailing of the letter to the Chief of Police. Both were mailed as LEGAL MAIL.

5. In another Mailing Log, **EXHIBIT PAGE 238 OF 337**, Entry “#8” said “4pg”, “Chief of Police, Police of Martinsville, 55 W Church ST, Municipal Building, Martinsville, VA 24112 US 01/22/2019”. I do recall mailing the original on that mailing log, the 1-page letter to Chief of Police dated January 19, 2019. That letter was asking for the police-body-camera footage which is discovery evidence which I later found out was ordered by both the General District Court one time and the Circuit Court two different times, see past Court Orders for Discovery for what I am referring to. I was not aware of what was said in those court orders until a later time. I believe I had mailed this mailing at the Mail Room at the Prison and I believe the envelope was classified as LEGAL MAIL.

6. My grandparents had created and mailed a typed-up version of my written letter mailed originally and then mailed a photocopy of that same letter at a later time to the Chief of Police which that original letter was dated January 19, 2019. The same letter asking for the body-camera footage. See **EXHIBIT PAGES 240-242 OF 337**. I was aware that they had mailed that to Martinsville Police Department with Certified Mail. The typed-up letter was dated March 13, 2019.

6. Prior to me writing a letter to the Chief of Police then mailing that letter, and then at a later day mailing a photocopy of that same letter requesting the body-camera footage recorded by Officer Robert Jones of Martinsville Police Department, I was also detained as an inmate at the Western Virginia Regional Jail in Salem, Virginia, after I was picked up at Martinsville City Jail to be transferred to the Western Virginia Regional Jail due to the “Federal Detainer” on me at the time. When I was placed in what I would call, special housing in that jail, I was able to request from the jail guard a tablet which allowed me to send electronic messages to my family which is essentially an inmate email system provided by the Jail tablet. That system would be called SmartJailMail.com which I had sent messages to from the tablet. I didn’t just sent emails through SmartJailMail to my mother. I had also sent messages to a man named Eric S. Clark who was my pro se legal adviser at the time who had helped me with pro se filings dealing with my federal case. He is the reason why I had learned how to produce my own legal paperwork and filings on my own which can look as professional as the same ones’ attorneys usually file without a lawyer. His email which was used by the SmartJailMail system of correspondences between me and Eric Clark was when he had used the email address eric@whitestonepublishing.org. I had sent messages to him while I was incarcerated at the Western Virginia Regional Jail. I also had sent

messages to Ken & Stella (kenstella2007@yahoo.com) using the SmartJailMail system. As well as my mother Roberta Hill.

7. Kenneth and Stella Forinash had sent an email which is in **EXHIBIT 19**. See **EXHIBIT PAGE 261-263 OF 337**. That email was sent to my court appointed Public Defender named Scott Albrecht who had represented me after I was charged on September 21, 2018, after his appointment as my counsel. I was adamant on asking my Public Defender to obtain the body-camera footage. His email at the time was, I believe it was salbrecht@mar.IDC.Virginia.gov. I sent a message through SmartJailMail to Kenneth and Stella Forinash. They received it and mirrored my message to Public Defender Scott Albrecht, my court appointed counsel for my criminal case at the time. It said partially: "...I will file a motion for Writ of Actual Innocence and motion for new trial pursuant to Virginia Code Sec. 19.2-265.4 a failure to provide discovery in Misdemeanor and felony cases. The bodycam footage and 911 recording is another one..." So, Scott Albrecht my attorney was made aware of the police-body-camera footage on record, and me wanting this footage even before I was transferred from Western Virginia Regional Jail to the Federal Correctional Institution 1 in Butner. That email to Scott Albrecht was sent on "Date: Thursday, December 27, 2018 at 10:50 PM EST", "Cc: eric@whitestonepublishing.org; rbhill67@yahoo.com". This email proves that my court appointed Public Defender Scott Albrecht, an officer of the Court at the time,

was made aware in email or in typed up communications about the issues of me wanting the body-camera footage.

8. Kenneth and Stella Forinash had sent an email which is in **EXHIBIT 20**. See **EXHIBIT PAGE 264-269 OF 337**. That email message from the first page of that email was not sent to Public Defender named Scott Albrecht, but it does show a pattern of email correspondence which does show an email which was emailed to my Public Defender named Scott Albrecht. I was adamant on asking my Public Defender to obtain the body-camera footage. That email to Scott Albrecht from my contact Eric S. Clark was sent on “Tuesday, December 25, 2018 4:46 PM”, “Subject: Brian D. Hill request”. In my “MESSAGE 1” of one of my SmartJailMail messages to Eric Clark as he dubbed it as “MESSAGE 1”, I said to Eric in my SmartJailMail message (excerpted in part of the entire message): “...Evidence of coercion exists but was not disclosed under Discovery violating Brady rights. Police bodycam footage during interview of Brian after arrest...I showed signs of coercion when Iqpwas interviewed by the officer who turned on his body camera and the red recording light was on...”. This email proves that my court appointed Public Defender Scott Albrecht, an officer of the Court at the time, was made aware in email or in typed up communications about the issue of me talking about the existence of the body-camera footage.

9. Prior to me reviewing over the Clerk's transmitted record of the Trial Court in 2021 pursuant to one of my past appeals, I am not sure if I ever had access to the three Court Orders for discovery. I cannot recall. I am referring to the order of the General District Court (See **EXHIBIT PAGE 273-274 OF 337**, in **EXHIBIT 22**) and the two different court orders for discovery from the Circuit Court (See **EXHIBIT PAGE 275-280 OF 337**, in **EXHIBIT 22**). At some point I had reviewed over those court orders and then I had realized at that time that those three court orders were not complied with by the Commonwealth Attorney because of the ineffectiveness of attorney Scott Albrecht. In fact, none of my court appointed lawyers assigned to my criminal case in the General District Court and in the Circuit Court had ever filed anything to enforce those three court orders. Never pushed for sanctions, never asked for compelling compliance with those three court orders for discovery materials. None of my court appointed lawyers ever spoke with me about ever initiating a filing for asking the Court to conduct enforcement of its previous discovery orders or motion to compel compliance with the Circuit Court and General District Court. My court appointed lawyers never filed any motions about compelling the Commonwealth Attorney to comply with the court orders by turning over the body-camera footage or a copy of the same.

10. I don't know the reason why Scott Albrecht never tried to enforce the court order from the General District Court (See **EXHIBIT PAGE 273-274 OF**

337, in **EXHIBIT 22**) and why Scott Albrecht never tried to enforce the two different court orders for discovery from the Circuit Court (See **EXHIBIT PAGE 275-280 OF 337**, in **EXHIBIT 22**). Albrecht never pushed for sanctions against Glen Andrew Hall, he never pushed for sanctions against Martinsville Police Department for not turning over the police body-camera footage. From what I understand about basic law, refusal to following a court order in a criminal or civil case is usually a contempt of court from my basic legal understanding of my requirement to comply with court orders after I am served with an arrest warrant or summons or whatever is filed against me in a Court of Law. Why didn't Scott Albrecht push for any contempt charge against Martinsville Police Department? Why didn't Scott Albrecht push for any contempt charge against the Commonwealth Attorney?

11. I am aware that on August 1, 2019, I was appointed Matthew Scott Thomas Clark ("Matthew Clark"), who was appointed by the court to represent me in my criminal case due to me being indigent. At some point I met with this attorney in person and at another point I had spoken with this attorney over the telephone, from what I remember. I had also asked Matthew Clark to ask for the body-camera footage from the Commonwealth Attorney. I think I remember him appearing with me at a court hearing, I think it was a continuance hearing. It is harder to remember but I think before my hearing he was in the courtroom speaking

with somebody working for the Commonwealth Attorney, it may have been Glen Andrew Hall or somebody working with or for Glen Andrew Hall. It was a long time ago, but I do remember seeing Matthew Clark talking with the Commonwealth Attorney or somebody working for the Commonwealth Attorney in the courtroom at a hearing. Probably asking about the body-cam footage. I don't know.

12. It was either in August, 2019 or September, 2019, I met with Matthew Clark at his law office at the address of 711-B Starling Avenue, Martinsville, VA 24112. I know this meeting occurred before I filed the pro se motion to withdraw appeal. I had spoken with him in his law office in the presence of my family members (witnesses) Roberta Hill, Stella Forinash, and Kenneth Forinash to all discuss my criminal case in the Circuit Court. One of things I spoke with this attorney Matthew Clark about was regarding my request for the body-camera footage from Martinsville Police. He told me in the presence of my family members that the "bodycam footage had been destroyed". I was shocked to hear that, since it was a pending litigation. He explained that there is an evidence retention period for police body-camera storage, and said it was a certain number of months. So, he argued that the body-camera footage had been destroyed because of this "retention period" of a certain number of months as he told me. None of that made any sense to me as that body-camera footage was subject to discovery as part of a pending criminal litigation prosecuted by the Commonwealth Attorney. Attorney Scott

Albrecht was made aware by emails as to the issues surrounding the police body-camera footage. Attorney Scott Albrecht knew that I wanted this body-camera footage as well. I had mailed multiple letters to the Police Chief of Martinsville Police Department (see this Declaration's paragraphs 2 through 6, pages 2-4 for what I am referring to) asking for the body-camera footage. My grandparents gave me the original certified mail receipt and original return receipt which proved that the typed letter of my original letter to the Chief of Police (**EXHIBIT PAGE 240-242 OF 337**). If the Court wants me to show this proof, I will provide this proof to the Circuit Court, if I can still find it in boxes and boxes full of papers and evidence.

13. I had mailed my letter to the Police Chief originally written and dated as January 19, 2019, as well as a photocopy after no response, and then my grandparents mailed a typed copy of my original letter dated as January 19, 2019. Refer back to paragraph 6 of my Declaration. Refer back to paragraphs 2 through 4 of my Declaration as to my original letter and mailing a photocopy of my original letter thanks to the photocopy scanning machine at the federal prison I was detained at during my court ordered mental evaluation by the U.S. District Court. I had asked the Police Chief two different times and my family sent a typed copy of my written request one time for the body-camera footage in writing. Three different times this Police Chief was asked for this discovery material, and I have proof of it. I had

preserved records for the purposes of keeping documentation for my criminal case and for my U.S. District Court case or cases. My legal paperwork, my photocopies of what I had mailed. I had mailed this Chief of Police of Martinsville Police two different times asking for the body-cam footage, and my grandparents mailed a typed copy of my request for the body-cam footage. All of it was IGNORED. I never received a single written response from Martinsville Police Department regarding my request for the police-body-camera footage. Not a formal typed response, nothing about the body-cam footage. Yet they destroyed it before my scheduled jury trial set for December 2, 2019 at 9:00 A.M. This is deceptive and is a fraud in my view for the Police to destroy evidence while the Commonwealth Attorney demands that I face a jury trial with destroyed evidence to help rig the jury trial against me. With dishonest prosecutors, usually evidence is destroyed when the very destroyed evidence may hurt the prosecutor's case. I was going to face a jury with evidence destroyed by Martinsville Police Department. They jury wouldn't even know about certain evidence being destroyed after multiple lawful court orders for discovery, I would have faced this rigged jury trial against me if I had not withdrawn my appeal, because none of my court appointed lawyers would even tell the future jury. Gave no indication to me that they would.

14. Attorney Matthew Clark admitted verbally to me and my family members sometime in either August, 2019 or September, 2019, that the bodycam footage had

been destroyed during pending litigation, forced jury trial against my will, and the Police got completely away with the bodycam footage being destroyed after three court orders for discovery. Martinsville Police Department never made sure to produce the bodycam footage (body-camera footage on their uniforms) to either me or my defense attorney. At least I can admit under penalty of perjury that I never was able to even see it even before my Bench Trial in the General District Court, and I was shown no proof from all of my court appointed lawyers that the body-camera footage was ever obtained in the first place. Makes me suspect collusion between the Commonwealth Attorney and the supposed Public Defenders, they are Public Pretenders in my personal view. They didn't do anything to ensure they even had a copy of the bodycam footage recorded by Officer Robert Jones. None of my court appointed lawyers who was supposed to be my defense lawyers, none of them ever sent a litigation hold letter demanding that the body-cam footage be retained as evidence for the pending litigation, and demand that the evidence not be destroyed until after the case is dispositioned and after any direct appeals exhausted. Then Matthew Clark tells me around sometime in either August, 2019 or September, 2019 that Martinsville Police Department had destroyed the bodycam evidence, they destroyed it from what Matthew Clark told me, Martinsville Police Department had destroyed it. **I swear this is true on a stack of bibles**, I swear under penalty of perjury in this Declaration that what I am saying is the truth. I

asked for the bodycam footage, I made written requests for it, Public Defender Scott Albrecht was emailed by Eric Clark and Stella/Kenneth Forinash about me mentioning about the bodycam footage, and none of them were answered as to my concerns about the bodycam footage. Then it appears to me to the best of my knowledge and to the best of my memory that the Police didn't comply with the Court Orders for discovery by destroying the bodycam footage. They destroyed it after the court orders for the discovery materials, they didn't even wait until after the jury trial and after any direct appeals. They destroyed it before I was going to have to appear before a jury trial on December 2, 2019 at 9:00 A.M. I know they didn't comply with those Court Orders because my own attorney Matthew Clark told me in the presence of my family members inside his law office, my family members Roberta Hill, Kenneth Forinash, and Stella Forinash. Matthew Clark told me that the bodycam footage had been destroyed, I cannot forget this and I will never forget this, I am still upset about this. Scott Albrecht did nothing to try to preserve the evidence subject to issues during a pending criminal case litigation. Scott Albrecht is a failure as an officer of the court, he failed me and allowed Martinsville Police to destroy the bodycam footage. What a moron of a lousy attorney, I am angry at him as well. They all let me down.

15. As to **EXHIBIT 2, EXHIBIT PAGES 5-86 OF 337**, is a true and correct copy of TRANSCRIPT OF THE SUPERVISED RELEASE

REVOCAION HEARING, BEFORE THE HONORABLE THOMAS D. SCHROEDER, UNITED STATES DISTRICT JUDGE, IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA, dated September 12, 2019. Officer Robert Jones of Martinsville Police Department (aka SERGEANT ROBERT JONES) had testified at this hearing and is relevant/material to my Motion that this Declaration is in support of. CASE NO. 1:13CR435-1.

16. As to **EXHIBIT 3, EXHIBIT PAGES 87-91 OF 337**, is a true and correct photocopy of billing records regarding me being a patient at Sovah Health Martinsville, on September 21, 2018, billing records I had received from Sovah Health Martinsville, the local hospital once known as Martinsville Memorial Hospital.

17. As to **EXHIBIT 7, EXHIBIT PAGES 170-181 OF 337**, is a true and correct copy of a federal court filing entitled as “STATUS REPORT OF PETITIONER SEPTEMBER 27, 2018”, Document 153, Filed 10/17/18, case no. 1:13-cr-00435-TDS, IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA.

17. As to **EXHIBIT 8, EXHIBIT PAGES 182-184 OF 337**, is a true and correct copy of a federal court filing entitled as “EXHIBIT 1 For Federal civil complaint -- MOTION ASKING THE COURT TO REQUEST LEGAL

COUNSEL TO REPRESENT THE PLAINTIFF -- MOTION AND BRIEF IN SUPPORT OF THIS MOTION -- Brian David Hill v. Executive Office for United States Attorneys (EOUSA), United States Department of Justice (U.S. DOJ) Civil Case Number 4:17-cv-00027”, Document 23-1, Filed 07/03/17, case no. 4:17-cv-00027-JLK-RSB, and was filed IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF VIRGINIA.

18. As to **EXHIBIT 9, EXHIBIT PAGES 185-187 OF 337**, is a true and correct copy of a federal court filing entitled as “EXHIBIT 2 For Federal civil complaint -- DECLARATION OF BRIAN DAVID HILL IN SUPPORT OF DOCUMENT 2 COMPLAINT AND IN SUPPORT OF MOTION, UNDER RULE 45 ASKING THE CLERK TO SUBPOENA ATTORNEY JOHN SCOTT COALTER FOR DISCOVERY AND TO PROVE THE FACTUAL MATTER UNDER COMPLAINT -- Brian David Hill v. Executive Office for United States Attorneys (EOUSA), United States Department of Justice (U.S. DOJ) Civil Case Number 4:17-cv-00027”, Document 12-2, Filed 06/12/17, case no. 4:17-cv-00027-JLK-RSB, and was filed IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF VIRGINIA.

18. As to **EXHIBIT 10, EXHIBIT PAGES 188-193 OF 337**, is a true and correct copy of a federal court filing entitled as “EXHIBIT 1 For Federal civil complaint Brian David Hill v. Executive Office for United States Attorneys

(EOUSA), United States Department of Justice (U.S. DOJ)”, Document 2-1, Filed 04/25/17, case no. 4:17-cv-00027-JLK, and was filed IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF VIRGINIA.

18. As to **EXHIBIT 11, EXHIBIT PAGES 194-201 OF 337**, is a true and correct copy of a federal court filing entitled as “EXHIBIT 2 For Federal civil complaint -- MOTION ASKING THE COURT TO REQUEST LEGAL COUNSEL TO REPRESENT THE PLAINTIFF -- MOTION AND BRIEF IN SUPPORT OF THIS MOTION -- Brian David Hill v. Executive Office for United States Attorneys (EOUSA), United States Department of Justice (U.S. DOJ) Civil Case Number 4:17-cv-00027”, Document 23-2, Filed 07/03/17, case no. 4 :17-cv-00027-JLK-RSB, and was filed IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF VIRGINIA.

19. As to **EXHIBIT 12, EXHIBIT PAGES 202-209 OF 337**, is a true and correct copy of (1) a 4-page “URGENT LETTER TO MARTINSVILLE POLICE DEPARTMENT AND CITY OF MARTINSVILLE – FOIA REQUEST FRIDAY”, “JANUARY 20, 2022”; a true and correct copy of (2) Venta Fax & Voice Transmission ticket for FAX ID: 276-790-3505 of a fax sent to City of Martinsville, Attn.: FOIA Officer at the recipient phone number of 1-276--403-5280 (1-page); (3) a true and correct copy of a Venta Fax & Voice Transmission ticket for FAX ID: 276-790-3505 of a fax sent to Martinsville Police Department,

Attn.: FOIA Officer at the recipient phone number of 1-276-403-5306 (1-page); and (4) a true and correct copy of another Venta Fax & Voice Transmission ticket for FAX ID: 276-790-3505 of a fax sent to City of Martinsville, Attn.: FOIA Officer at the recipient phone number of 1-276--403-5280 (1-page). The fax transmission tickets were concerning the successful transmissions to the intended destination fax numbers of the 4-page “URGENT LETTER TO MARTINSVILLE POLICE DEPARTMENT AND CITY OF MARTINSVILLE – FOIA REQUEST FRIDAY”, “JANUARY 20, 2022”.

19. As to **EXHIBIT 13, EXHIBIT PAGES 210-215 OF 337**, is a true and correct copy of document record pages from the record of the Circuit Court of what was filed in my case of “Motion for writ of error coram vobis” which was construed by the Clerk as a case for a Petition for a Writ of error coram nobis (WCN) (an “initial filing” and was filed in a separate case, Case No.:CL20000089-00.

20. As to **EXHIBIT 16, EXHIBIT PAGES 247-249 OF 337**, is a true and correct copy of “Virginia Medicaid Claims History For Member ID: 690024628015, Member Name: Brian Hill”, Claims For 11/19/2017 And 9/21/2018.

21. As to **EXHIBIT 17, EXHIBIT PAGES 250-252 OF 337**, is a true and correct copy of printed email from the email record of Roberta Hill at her email address rbhill67@yahoo.com. Subject: Re: Brian D. Hill asked me to send this

email to you about his appealed case. From: Eric S Clark

(eric@whitestonepublishing.org). To: kenstella2007@yahoo.com;

salbrecht@mar.IDC.Virginia.gov. Cc: rbhill67@yahoo.com. Date: Thursday,

December 27, 2018 at 11:21 PM EST.

22. As to **EXHIBIT 18, EXHIBIT PAGES 253-260 OF 337**, is a true and correct complete copy of medical records I obtained from Sovah Health Martinsville which is a hospital. Medical records of the hospital visited dated Friday, September 21, 2018. On the day I received the records or around the time I received the records, I did speak with the hospital records staff or somebody at the hospital records area about any laboratory tests on September 21, 2018. The staff said to me and Roberta Hill that they cannot find any laboratory testing records and said since I was in the custody of the police that it would be the Martinsville Police who would do the lab work. That was what I was told by the staff person at Sovah Health Martinsville on the day which I obtained those records or around the time I received the records, and I had obtained them on "5/17/2019".

23. As to **EXHIBIT 19, EXHIBIT PAGES 261-263 OF 337**, is a true and correct copy of printed email from the email record of Roberta Hill at her email address rbhill67@yahoo.com. Subject: Brian D. Hill asked me to send this email to you about his appealed case. From: Ken & Stella (kenstella2007@yahoo.com). To:

salbrecht@mar.IDC.Virginia.gov. Cc: eric@whitestonepublishing.org;

rbhill67@yahoo.com. Date: Thursday, December 27, 2018 at 10:50 PM EST.

24. As to **EXHIBIT 20, EXHIBIT PAGES 264-269 OF 337**, is a true and correct copy of printed email from the email record of Roberta Hill at her email address rbhill67@yahoo.com. Subject: Fw: Brian D. Hill request. From: Ken & Stella (kenstella2007@yahoo.com). To: rbhill67@yahoo.com. Date: Wednesday, December 26, 2018 at 04:30 PM EST.

25. As to **EXHIBIT 23, EXHIBIT PAGES 281-311 OF 337**, is a true and correct incomplete (not all pages of the entire record) copy of medical records I obtained from Sovah Health Martinsville which is a hospital. Medical records of the hospital visited dated Sunday, November 19, 2017. The record pages in this exhibit are one copy which was scanned with color scanning setting and the other copy of the same thing (scanned in color previously) was scanned in black and white. So two copies of the same pages, one in color and the other one in black and white. Was scanned with both color and black and white, in case the black and white scan caused any loss of details from the medical record pages.

26. As to **EXHIBIT 24, EXHIBIT PAGES 312-315 OF 337**, is a true and correct copy of pages of medical records I obtained from Carilion Clinic which I am a patient of. Medical records of the laboratory work done on specimen collected on July 31, 2018, time of 1122 (assuming it is military time), from the Resulting

lab: GENESYS MARTINSVILLE. The record pages in this exhibit are in color. The highlighting of certain record areas was done by Roberta Hill to show the abnormal readings. The address reported of the testing was done at 1107 A Brookdale St, Martinsville VA 24112. COMPREHENSIVE METABOLIC PANEL(COMP) [368602038] (Abnormal).

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 25, 2023.



Brian D. Hill
Signed

Brian D. Hill

Brian D. Hill
Defendant

Former news reporter of U.S.W.G.O. Alternative News
Ally of Q

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