

From: Erika Meyer
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Subject: General issue: misleading, unfair, fictionalized and/or “colorized” medical records
Specific example: ER visit on Nov 8, 2017 for sore throat

Immediate Context: On the evening of Nov 8, 2017 I went to ER with severe throat pain, and laryngitis. The circumstances around this illness were extremely unusual. I could barely speak, so I wrote down my concerns for the doctor to see. I also brought with me the Aceco FC-6002 MKII frequency tracer, and while I was in the visit with the doctor, I did a frequency scan of my neck/throat area so that he could see that it was picking up clear and consistent wireless signals associated with my throat. The doctor made no comment about this whatsoever – he did not ask questions about the device I was using, what it was or was not showing, and/or what I believed it was/was not showing.

The sore throat, contrary to how it was presented in the documentation (with words like “benign” and “normal”), was as severe as any sore throat I'd experienced. However, this sore throat was not associated with fever and/or white patches commonly seen in strep throat. Instead it was bright red, bumpy, irritated rashiness. Aside from the signs of activated biomedical implants, what was most unique about it – and what I think is in fact significant – is it was ITCHY. I was craving carbonated drinks like coca cola which felt soothing because they “scratched” the itchiness going down. Years later, in 2021 as Chris was dying from cancer, and experiencing what I have identified as directed energy attacks and medical torture while he was dying, he was craving coca cola for the same reasons – the “scratching” of the carbonated drink felt soothing to his digestive system. There were similar itchy rashes on my hands throughout much of 2017 and are also currently on my cat's skin and ears.

For days prior to this 11/8/17 ER visit, and on the day of this visit, I felt repeated sensations in my throat of tugging and poking – like I was being poked by a pair of wires arched over my uvula. This would then be followed with the production of a large amount of mucus. I thought that, opening my mouth, I could see where these were, and tried to take a photo (Nov 9, 2017 around 2pm). Because my camera wasn't very good and doesn't pick up red colors you cannot really see much in the photo itself. You can see some red patchiness over where I believe the implants are located, and a bit of the rashiness on the back of the throat.

At the time of the 11/8/17 ER visit I was not generally being diagnosed with “delusions,” at least not openly (although it had happened before, secretly, going back to Feb 3, 2014). However, these notes state (rather confusingly) that “The patient however did have rectal was a delusion about ready ways in her throat.” (sic) I don't know what to make of that sentence – assuming it was an autocorrect issue, why was it left that way? The notes go on to say “I did diagnose patient with sore throat and delusion. She states it's not a delusion. She became quite agitated and started cussing.” And then “He does not want a psychiatric assessment.”

With regards to the diagnoses and me becoming agitated and cussing – what happened was the doctor left the office – again, with no comment whatsoever made about the frequency scan and what it was showing – and then an assistant came into the office and handed me the after visit notes. After the assistant left the room, while I was alone in the room and reading the notes, I saw that the doctor had diagnosed my claim of wireless frequencies coming from my throat (and/or whatever other evidence I

presented him – the poking sensations, etc) – as delusions – and not only that, he did not make any mention whatsoever of my doing the frequency scan in his presence. So, it is true that I did cuss out loud – in a barely audible lost-voice kind of way - when I saw that very unhelpful and unsupported “diagnosis” - alone in the room. Likely the door was open and an assistant was outside, within earshot. I still think it's bordering on criminal that the fact that I presented evidence to support the claims I made with regards to wireless frequencies – and that no questions were presented by the doctor about the nature of the evidence or veracity of my claims – was not put into my records.

Finally – I don't know what to make of the sentence “He does not want a psychiatric assessment.” Allegedly these notes are written by the doctor – and everything else is in first person, as if the doctor is the author. And just after “He does not want a psychiatric assessment” I am referred to as “she” - so it seems unlikely to be an accidental misgendering. Is it a typo, or am I supposed to think it's a typo? And could that be the reason for the bizarre sentence earlier about the “did have a rectal was a delusion about ready ways in her throat”? (Introducing the idea that there are typos – that may not actually be typos - in the notes.)

The reason why I'm looking hard at that sentence “He does not want a psychiatric assessment” - is because over the years, especially at certain key moments, it appears that my medical notes are being written with a specific third-party audience in mind. By “key moments” I mean those moments when I start to point specifically at what appears to be biomedical malfeasance. Covertly placed implants in my throat would of course be biomedical malfeasance. This kind of thing – the apparent tailoring of medical notes towards what seems to be a specific individual or group – is not unique to Providence Medical systems. I first noticed it at OHSU in notes from 2014.