# FORMAL REQUEST FOR MEDICAL RECORDS & PTSD DOCUMENTATION

From: Stephen J. Boerner

# Legal Residence:

2649 Tifton Street S, Gulfport, FL 33711

## Current Mailing Address:

21090 Sharp St, Unit 132,

Rock Hall, MD 21661 **Phone:** (215) 530-0545

Email: stephen.boerner@gmail.com

**DOB:** June 25, 1985

Date: June 6, 2025

TO: Mark Sieg, LMHC, ART-Certified

Gulfport Counseling Center 2309 49th Street South Gulfport, FL 33707

## **Contact Information Verification:**

• Phone: (727) 251-2319

• Email: marksieg@gulfportcounselingcenter.com

• Address: 2309 49th Street South, Gulfport, FL 33707

RE: Formal Medical Documentation Request for Legal Proceedings

# Patient:

Stephen J. Boerner stephen.boerner@gmail.com 215-530-0545

**DOB:** June 25, 1985

# I. PURPOSE AND LEGAL CONTEXT

Dear Mr. Sieg,

I am formally requesting comprehensive medical documentation regarding my PTSD diagnosis and ongoing treatment under your care. This request is made pursuant to my rights under HIPAA (45 CFR § 164.524) and Florida medical records statutes for use in multiple legal proceedings, including:

- 1. **Delaware County, PA Divorce Proceedings** (Boerner v. Boerner) where mental health evidence impacts equitable distribution and preservation credits under 23 Pa.C.S. § 3502(a)
- 2. Social Security Disability Insurance Application where PTSD functional limitations are central to disability determination
- 3. Florida Landlord-Tenant Civil Litigation arising from March 26, 2024 home invasion and subsequent habitability claims

### II. UPCOMING APPOINTMENTS CONFIRMATION

Please confirm the exact dates and times of the three therapy appointments scheduled during our May 19, 2025 session for legal recordkeeping purposes.

## III. COMPREHENSIVE CLINICAL DOCUMENTATION REQUESTED

# A. Diagnostic Assessment & Professional Opinion

### 1. PTSD Diagnosis Confirmation

- Your professional diagnostic assessment consistent with your statement:
  "Really sounds like textbook post traumatic stress disorder. I mean, textbook."
- o Clinical criteria met for Post-Traumatic Stress Disorder diagnosis
- Causal relationship to March 26, 2024 violent home invasion at 2649 Tifton Street S, Gulfport, FL 33711
- Your professional confidence level in diagnosis

### 2. Treatment Timeline Verification

- o Commencement of therapeutic relationship (pre-March 26, 2024 baseline)
- Continuity of care through present date
- Treatment frequency and therapeutic modalities employed

• Scheduled future appointments confirming ongoing medical necessity

# B. Functional Capacity Assessment

# 1. Cognitive & Executive Function

- Limitations affecting financial decision-making and property management
- Heightened startle response ("tremendously large red flag of PTSD")
- Concentration difficulties impacting complex task completion
- Executive function challenges affecting daily living activities

# 2. Occupational & Social Functioning

- Work productivity limitations affecting client relationships
- Property management capacity during periods of stress
- Interpersonal relationship impacts and social functioning
- Stress response patterns in conflict or legal situations

### C. Treatment Necessity & Medical Recommendations

### 1. Ongoing Therapeutic Requirements

- Medical necessity of continued therapeutic intervention
- ART (Accelerated Resolution Therapy) treatment recommendations given your certification
- Consequences of treatment interruption or discontinuation
- Coordination requirements with psychiatric medication management

### 2. Professional Prognosis

- Expected duration of therapeutic intervention
- Functional improvement timeline and treatment goals
- Environmental factors affecting recovery and stability
- Long-term therapeutic maintenance requirements

# IV. SUPPORTING MEDICAL EVIDENCE INTEGRATION

This documentation request coordinates with established medical evidence from:

# Bokhari Medical Consortium, Inc.

716 Seminole Blvd, Largo, FL 33770

Provider: Zainab Savard, NP (under Dr. Hassan Bokhari, MD supervision)

Phone: (727) 238-3241

#### Documented Medical Evidence:

- **Primary Diagnosis:** F43.10 (PTSD) Post-Traumatic Stress Disorder, formally diagnosed June 12, 2024
- **Secondary Diagnoses:** F41.1 (Generalized Anxiety), F32.A (Depression), F90.9 (ADHD)
- **Objective Testing:** QbTest neuropsychological assessment showing 99th percentile impairment scores
- Medication Regimen: Sertraline 100mg, Trileptal 150mg BID, Guanfacine 1mg, Hydroxyzine 25mg
- **Clinical Progression:** Documented symptom improvement with ongoing treatment necessity

# V. EXPERT TESTIMONY POSSIBLE PARTICIPATION AGREEMENT & COPIES OF PROFESSIONAL CREDENTIALS

Please provide authentic copies to the best of your ability to certify your professional certifications and authorization to provide mental health treatments specific to conditions suffered by your patient, Stephen J. Boerner as you observed and treated.

ART Certification & Professional Expertise Given your specialized training in Accelerated Resolution Therapy and trauma treatment, please include:

# ART Certification - Critical Legal Analysis

ART stands for Accelerated Resolution Therapy — this is a highly significant credential that transforms Mark Sieg from a "regular therapist" into a specialized trauma expert with exceptional courtroom credibility.

# What ART Certification Means

Please provide any more information that may support the below understanding of your certifications relevant in this matter:

### ART (Accelerated Resolution Therapy) is:

- Evidence-based trauma treatment developed specifically for PTSD and trauma disorders
- 3-5 session protocol that achieves rapid symptom resolution
- Scientifically validated with extensive research backing

- Specialized certification requiring advanced training beyond basic therapy licensure
- Military/Veterans Affairs recognized widely used for combat PTSD

### Training Requirements:

- Advanced post-graduate specialized training (40+ hours minimum)
- Supervised clinical practice with trauma cases
- Ongoing continuing education requirements
- Competency examinations and case review protocols

# Courtroom Credibility -

### Please confirm:

ART certification makes Mark Sieg an expert witness rather than just a treating therapist:

# 1. Expert Testimony Qualification

- **Specialized Knowledge:** ART training demonstrates advanced trauma expertise beyond general therapy
- **Scientific Foundation:** Evidence-based treatment protocols with research validation
- **Professional Recognition:** Courts recognize ART as legitimate specialized mental health intervention
- Objective Methodology: Structured treatment approach with measurable outcomes

Please confirm if any conflict of interest presents itself.

# VI. MEDICAL RECORDS AS LITIGATION ASSETS (to accompany Mark Sig Documentation)

BOKHARI MEDICAL CENTER DISABILITY & INCAPACITY DOCUMENTATION

## MEDICAL COMPLEXITY SUPPORTING APL CLAIMS

PRIMARY PRACTICE INFORMATION

BOKHARI MEDICAL CONSORTIUM INC d/b/a NEOTERIC AESTHETICS & ADVANCED PSYCHIATRIC INSTITUTE

**Address:** 716 Seminole Blvd, Largo, FL 33770-3627 **Phone:** (727) 238-3241 **Fax:** (727) 238-8402

# Formal Psychiatric Diagnoses (ICD-10 Coded):

- F41.1: Generalized Anxiety Disorder
- F32.A/F33.2: Major Depressive Disorder (progressed to recurrent severe)
- F43.10: Post-Traumatic Stress Disorder
- F90.9: ADHD, Unspecified Type

### **Objective Severity Measurements:**

- PHQ-9 Score: 22 (severe depression threshold)
- GAD-7 Score: Severe anxiety classification
- Functional decline documented across multiple domains

### TIMELINE ESTABLISHING CAUSATION

March 26, 2024: Home invasion trauma

April 29, 2024: First medical intervention for severe symptoms

May 15, 2024: Comprehensive psychiatric evaluation

June 12, 2024: Follow-up confirming ongoing treatment needs

**Critical Legal Point:** This timeline directly correlates with Melissa's property abandonment (October 2024) and demonstrates Stephen's deteriorating capacity during the critical period.

### **MEDICAL PROVIDERS**

### 1. DR. HASSAN BOKHARI, MD

• Role: Psychiatrist / Medical Director

Provider ID: 1811158082Specialty: Psychiatry

• Contact: (727) 238-3241 (main practice number)

### 2. ZAINAB SAVARD, NP

• Role: Nurse Practitioner (Psychiatric)

• Provider ID: 1003565003

Specialty: Psychiatric Nurse Practitioner
 Contact: (727) 238-8402 (fax for records)

• **Direct:** (727) 238-3241

### LABORATORY AFFILIATIONS

Quest Diagnostics - Largo Location Address: 716 Seminole Blvd, Largo, FL 33770

Phone: (727) 238-3241 Fax: (727) 238-8402

# STRATEGIC CONTACT PROTOCOLS

# For Medical Records Requests:

• Primary Contact: Zainab Savard, NP

Fax: (727) 238-8402Phone: (727) 238-3241

Patient ID: 226Account #: 226

# For Expert Witness Testimony:

- Dr. Hassan Bokhari Medical Director/Psychiatrist
- Zainab Savard, NP Primary treating provider
- Both conducted comprehensive evaluations and ongoing treatment

### Documentation Available:

- Complete psychiatric evaluations (5/15/24, 6/12/24)
- Mental status examinations
- ICD-10 diagnostic coding
- PHQ-9 and GAD-7 standardized assessments
- Medication management records
- Treatment response documentation

# Subpoena Information:

Legal Name: BOKHARI MEDICAL CONSORTIUM INC Service Address: 716 Seminole Blvd, Largo, FL 33770-3627 Registered Agent: Hassan Bokhari, MD

# **Key Record Dates:**

• Initial Evaluation: May 15, 2024

• Follow-up Visit: June 12, 2024

• Lab Results: May 29, 2024

• Treatment Period: May 2024 - ongoing

This practice provides **comprehensive psychiatric care** with both MD and NP-level providers, making them excellent witnesses for establishing Stephen's legitimate disability and treatment needs in Delaware County proceedings.

### Pre-existing Conditions:

- Cardiac pacemaker (age 17) ongoing cardiology needs
- Secondary hypertension multiple daily medications
- Low-Impact ADHD with medication intolerance history

### **Current Treatment Requirements:**

- 4+ psychiatric medications requiring monitoring
- Specialist care coordination (psychiatry, cardiology)
- Ongoing psychotherapy needs
- Laboratory monitoring requirements

### FUNCTIONAL IMPAIRMENT EVIDENCE

Employment Impact: Documented unemployment due to psychiatric disability Daily Living: Sleep disturbances, hypervigilance, social isolation Cognitive Function: Concentration and memory problems affecting decision—making capacity Safety Concerns: Home security obsessions, avoidance behaviors

### VII. JURISDICTIONAL RESIDENCY CLARIFICATION

### **Current Contact Information:**

Mailing Address: 21090 Sharp St, Unit 132, Rock Hall, MD 21661

• Phone: (215) 530-0545

• Email: stephen.boerner@gmail.com

Legal Domicile (DMV/Jurisdiction): 2649 Tifton Street S, Gulfport, FL 33711

Jurisdictional Explanation

Though I am physically located in Maryland and receive correspondence at the Rock Hall address, my **legal domicile remains Florida** for the following statutory reasons:

# Florida Residency Establishment:

- Primary legal residence established at Gulfport, FL property throughout marriage
- All financial, medical, legal, and tax records anchored in Florida jurisdiction
- Healthcare providers and treatment relationships based in Florida

**DMV Administrative Situation:** Following marital separation, my spouse removed our jointly registered vehicle from Florida without consent, triggering administrative holds under:

- Florida Statutes § 320.02, § 322.01, § 322.251 creating DMV administrative freeze
- Maryland Transportation Code §§ 16-110, 16-115 preventing Maryland license issuance due to Florida hold

**Legal Conclusion:** I remain legally domiciled in Florida under both Florida and Maryland law, anchoring my medical treatment and legal proceedings to Florida jurisdiction.

VII. DELAWARE COUNTY FAMILY LAW RELEVANCE

Pennsylvania Statutory Context (23 Pa.C.S. § 3502(a)): Your clinical documentation directly supports legal arguments regarding:

- Factor (4) Health & Income Sources: Professional validation of disability affecting earning capacity and property management
- Factor (7) Contribution/Dissipation: Clinical justification for traumarelated preservation actions and exclusive property maintenance
- Factor (11) Medical/Economic Necessity: Professional assessment of treatment costs and medical decision-making priorities

VIII. PRIVACY PROTECTION & HIPAA AUTHORIZATION

**Limited Disclosure Authorization:** I authorize release of the above-specified medical information for legal proceedings, limited to:

- Diagnostic confidence and clinical assessment
- Functional capacity limitations
- Treatment necessity and prognosis
- Expert testimony scope and availability

Therapeutic Privilege Preservation: This authorization does not extend to specific therapeutic communications or session content beyond the clinical assessments requested above.

**Authorization Scope & Expiration:** This authorization is specific to the legal proceedings identified and expires one year from the signature date below unless revoked in writing.

IX. DELIVERY INSTRUCTIONS & TIMELINE

### Preferred Delivery Method:

- Professional clinical summary on letterhead (2-3 pages)
- Signed and dated original for legal authentication
- Multiple copies for various legal proceedings if possible

Timeline Request: Given pending legal deadlines, please provide this documentation within 30 days of this request if possible.

**Contact for Questions:** Please contact me at <a href="mailto:stephen.boerner@gmail.com">stephen.boerner@gmail.com</a> or (215) 530-0545 if you need any clarification or have questions regarding this request.

### X. PROFESSIONAL APPRECIATION

Mr. Sieg, I deeply appreciate your therapeutic expertise and the professional relationship we've developed. Your clinical assessment and professional opinion carry significant weight given your ART certification and specialized trauma expertise. This documentation will provide crucial support for my legal proceedings while maintaining appropriate therapeutic boundaries.

Thank you for your cooperation and professional assistance.

Respectfully,

Stephen J.	Boerner			
Date:				

FLORIDA NOTARIAL ACKNOWLEDGMENT

State of Florida

County of Pinellas

Sworn to (or affirmed) and subscribed before me this day of,
2025, by Stephen J. Boerner, who is personally known to me or who has produced as identification.
Notary Signature
Notary Public - State of Florida
Print Name:
Commission No.:
My Commission Expires:
[Notary Seal]
This notarization pertains to trauma events, psychiatric treatment, and legal
actions originating in the State of Florida.

# LEGAL EXHIBIT DESIGNATION

**EXHIBIT A** - PTSD Medical Documentation Request

CASE REFERENCE: Boerner v. [Multiple Proceedings] - Medical Evidence

JURISDICTION: State of Florida, Pinellas County

LEGAL AUTHORITY: Florida Statutes § 320.02, § 322.01, § 322.251; 23 Pa.C.S. §

3502(a); 45 CFR § 164.524

**ATTORNEY WORK PRODUCT PRIVILEGE:** This document prepared for legal proceedings and protected by attorney-client privilege and work product doctrine.

Document prepared for notarization and legal submission across multiple jurisdictions including Florida civil court, Pennsylvania family court, and federal SSDI administration.