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Please call me crazy I do not care. I am using the CHECK-IN at the CLINIC for what happened in my visit today with the messaging being placed into the waiting room. Something odd and quite strange to have happened -- my mother was my witness to this.

Contained in [ Delivering a Quality Patient Experience ],

Creating a Better Patient Experience

Whether it's at a one-physician practice or a large multi-specialty health system, delivering a quality patient experience has become part of delivering quality patient care.

Dr. Martin Fogle believes that educating and informing patients at every stage in the patient journey is the key to improving the patient experience.

"What I've come to realize is that much of the patient experience is covered by the response of the patient to the unknown. A patient who knows what to expect will find the entire experience much more pleasant, much less frightening.

Informing a patient about what's coming next takes a lot of the fear away, it makes the patient much more engaged, much more cooperative, and the entire experience—and the visit—turn out to be more satisfying, actually, for everyone."

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THAT ASSUMPTION OF INENT -- Wholeheartedly #HugeFail

The initiation of imbalance was generated by the physician.

In my attempt to follow one of the quotes of expectation given on video media,

"Doctor Wants To Know The Whole You"

So that we see the light ---- my life in tow --- hold on to your shoes and walk a bit of my life in my shoes.

The doctor cannot assign what I needed to bring into her mind, as my source of primary care, onto a different doctor. I REFUSE THAT DIVIDED ATTENTION to my healthcare paradym. "

I have been in this condition for 16+ years. The documents that I placed into a reference in this discussion are posted at the NATIONAL INSTITUTES of HEALTH -- -for matters of affecting my overall medical healthcare experiences and needs holding for each and every doctor ring the

before a true trust understanding can begin.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7178134/

Int J Environ Res Public Health. 2020 Apr; 17(7): 2506. Published online 2020 Apr 6. doi: 10.3390/ijerph17072506 PMCID: PMC7178134 PMID: 32268595 The Phenomenology of Group Stalking ('Gang-Stalking'): A Content Analysis of Subjective Experiences Lorraine Sheridan,1,\* David V. James,2 and Jayden Roth1

Can you please intervene to contact their office in view of what I am relating - the wall barrier was initiated by her when I attempted to answer her question about when my inpatient hospital stay recently.

Already to link before I left the house here --- posted public to the Facebook page of the Texas provider. These actions of writing and documentation are real --- I am an open book because I have no privacy as a targeted individual of gangstalking. REAL!

At what stage will someone take the lead --- to incorporate the need to inclusive form --- and help me out of the void created by the detachment option of conflict avoidance contained to be one major problem to overhaul.

From Dr. Loraine Sheridan's paper:

3.1. Length of Stalking

None of the writers of the narratives described their experiences as having ended. All 50 authors stated or implied that they had been gang stalked for lengthy periods of time (e.g., one mentioned being seen by seven psychologists during the period of being targeted, another described having been targeted whilst living in three different countries). The shortest case was described as having begun "in the last few months" and the longest as continuing for "more than 22 years".

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My case of involvement as a targeted individual unstoppable is 16 years.

Continued from Dr. Sheridan:

## 5. Conclusions

The experience of being gang-stalked appears to be a widespread phenomenon that has been subject to little scientific examination. The current study provides a preliminary description of the phenomena involved that was produced by a methodology that did not incorporate preconceived assumptions. This provides a foundation upon which further research could be built. It also serves to confirm the harmful effects of the gang-stalking experience upon sufferers, first set out in the only other study available [5]. These findings constitute a potent reason why gang-stalking should be regarded as an important subject for study.

Stalking by individuals has been found to result in high rates both of psychological distress and lasting psychiatric morbidity in particular post-traumatic symptomatology and depression

higher on ratings of depressive symptoms, post-traumatic symptomatology and adverse impact on social and occupational functioning than those who were individually stalked [5]. The only other published study of gang-stalking samples that we could locate detailed four cases reported by the media of men who had engaged in extreme violence as a response to the perception that they were the target of gang stalkers [21]. Both Sheridan and James [5] and Sarteschi [21] concluded that the subjects of their studies were suffering or had suffered from severe psychological distress in the context of their subjective gang-stalking experiences.

Despite the experience of gang-stalking being so widely reported and the evidence of its harmful effects on individuals and on society at large, there is a dearth of research into its nature and into the components that constitute the experience. Sheridan and James' study [5] appears to be the only one to have investigated this central feature of this subject.

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Can we find united care to pass into all doctors that are entrusted to my care and treatments? That would be most appreciated.

I deserve to have an apology and a promise of new point of tone and deliverance focus of orderly conduct professionalism.

At the point of her detachment --- I knew such actions impossible -- she would not budge that she told me all this goes to her referral to mental health -- I immediately stormed out of the clinic in DISGUSTED REGARDS ---typically received - I cannot obtain trusted doctor care --- and how can doctors be so cruel to divide my life from the wholeness approach -- - I am at my endpoint.

I died.

Try Try Try Try Mighty Try --

Even PatientPoint Media In View Failed!

I died.

Humans no longer breathing dead died.

I have had no HIV DOCTOR and NO TRUST SUCH A NEW ASSIGNED DOCTOR will also collapse in this nature.

An Imbalanced Mind of Sick Priority to choose the interest of silence over the best interest of me.

#hivuntreatable since March 2019. — at California Medical Clinic.



## NCBI.NLM.NIH.GOV

## The Phenomenology of Group Stalking ('Gang-Stalking'): A Content Analysis of Subjective Experiences

Epidemiological data suggest that as many as 0.66% of adult women and 0.17% of adult men in the western world may suffer the subjective experience of being group-stalked ('gang stalked') at some point in their...

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