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Plaintiff, Pro Se

July 19, 2026

VIA U.S. MAIL AND EMAIL

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Re: Lynch v. Does et al., No. 4:24-cv-00740-LPR-BBM (E.D. Ark.)

Subject: Good-Faith Conference Regarding Deficient Doe-Identification Discovery; Request for Sworn
Supplementation, Identification of Medical Decisionmakers, Authentication, and Preservation

Counsel:

I write jointly because the County Defendants' responses and the TK Health Defendants' responses, read together, still do not answer the central identification questions authorized by the Court: who performed each act, on what date and shift, under whose direction, and through which record, signature, initial, or electronic user account. This letter is my good-faith effort to resolve those deficiencies before I seek renewed court intervention. It is not an amended pleading, and identifying a person in this letter does not itself make that person a defendant. Any substitution or addition will be requested from the Court as required.

The Court previously denied my motion to compel based on Defendants' representation that the outstanding discovery would be answered. The merits-discovery stay has now been lifted; discovery closes December 1, 2026. More urgently, my motion for service identifying the Doe Defendants is due August 31, 2026, and the time to serve the Doe Defendants and Haley Workman expires October 13, 2026. A prompt, direct, and sworn supplement is therefore necessary. See Dkt. 189, 195, and 201.

1. Why the Existing Responses Are Not Sufficient

The responses and productions do not allow me to identify all proper parties. TK Health objected to targeted identification requests as broad, referred me to Bates ranges and medical records, and then provided staffing materials containing more than two hundred names, repeated names, and similarly named employees. The County production likewise includes broad attendance lists and handwritten job titles, but does not tie people to the dates, shifts, housing units, pill calls, medication events, medical requests, MAR entries, legal-mail incidents, transport events, body-camera assignments, or supervisory directives at issue.

The response concerning "Nurse F" remains equivocal. TK Health suggested that the notation may mean "Float Nurse," identified Savannah Henderson as a possible person for the June 11, 2024 request, and identified Heather Jones, Katlyn Ladd, or Ashley Watt as possibilities for a July 2024 request. A list of possibilities is not

a definitive identification. The same problem applies to the Pill Nurse Does, MAR initials, electronic user IDs, the persons who entered “absent,” “refused,” “received,” or “not given,” and the persons who ordered or approved crushing, floating, or dissolving Biktarvy.

The parties should coordinate rather than point me from one client or custodian to another. If a responsive item is maintained by White County, TK Health should identify that fact precisely and the County Defendants should provide the responsive information. If it is maintained by TK Health or an affiliated pharmacy/provider, TK Health should provide it. A generalized employee list or an undifferentiated record dump does not answer an interrogatory asking for the identity of the actor.

2. Required Form of the Supplemental Response

For every person identified in the response, please state the following in a sworn, verified supplement:

1. Full legal name, correct spelling, any former or alternate name used in the records, and whether two similarly named persons are different people.
2. Job title, professional license and license type, badge or employee identifier, employer, and dates of employment during the relevant period.
3. Shift, housing-unit assignment, pill-call assignment, medication-cart assignment, medical-housing assignment, mail assignment, transport assignment, or supervisory assignment for the relevant event.
4. The specific date, time, incident, request number, grievance number, MAR entry, Bates number, task entry, chart note, body-camera file, or directive associated with the person.
5. The specific act performed, decision made, instruction given, record created or modified, or response entered by that person.
6. The identity of the supervisor, prescriber, provider, pharmacist, administrator, or command officer who directed, authorized, approved, or reviewed the act.
7. The initials, abbreviation, signature, shorthand, or electronic user ID used by that person in the produced records.
8. Whether counsel represents the person and is authorized to accept or waive service. If not, please provide the last-known service address under seal to the Clerk or U.S. Marshal, or state how service may be completed without publicly disclosing private information.
9. If no responsive person or record can be identified, describe the custodians, systems, date ranges, search methods, and sources reviewed before reaching that conclusion.

3. Specific Identification Required for the Medication-Crushing Decision

The produced records expressly acknowledge medication alteration while other responses deny or minimize it. TKH 0033 states that on July 25, 2024, “Medical was advised by jail administrative staff that all medications would need to be crushed and floated”; that Ashley Watt contacted a Healthway Pharmacy pharmacist about crushing medications; that the pharmacist allegedly stated the medication effects would not be altered; and that the “Facility Provider” was notified. The same page later states: “Allow Medication to dissolve in water for 10 minutes prior to administration per provider.” Grievance responses also state that a pharmacist and physician had both been consulted and approved crushing and floating.

Please identify and produce the following without further general references to records:

10. The full legal name, credentials, license number, employer, and business address of the Healthway Pharmacy pharmacist who allegedly approved crushing Biktarvy or stated that crushing would not alter its effects.
11. The full legal name, credentials, license number, employer, and business address of the physician whom Captain Edwards stated had been consulted.
12. The full identity and credentials of the “Facility Provider” referenced in TKH 0033 and the provider who authorized dissolving the medication in water for ten minutes before administration.

13. Whether Jonathan White, whose name appears in produced medical records as a provider/prescriber, was the provider or physician involved; if so, his full title, credentials, employer, and role; if not, identify the correct person.
14. The identity of every jail administrator who told Medical on or about July 25, 2024 that all medications had to be crushed and floated.
15. The identity of the medical-contractor representative who told Captain Edwards that a pharmacist and physician had both been consulted.
16. All call logs, phone notes, emails, texts, internal messages, pharmacy notes, provider orders, prescriptions, medication labels, policies, protocols, and audit logs documenting the consultation or approval.
17. The exact question asked of the pharmacist and physician; whether they were told the medication was Biktarvy; whether the advice was patient-specific; and whether they approved crushing, floating, dissolving, or any combination of those methods.

4. Record-Authenticity and Apparent Alteration Disputes

I am not accusing counsel personally of creating or altering any record. I am giving formal notice that I dispute the authenticity, accuracy, completeness, and timing of specific records produced by the clients. These disputes require preservation and authentication, not another paper copy of the same export. The principal disputes are summarized in Schedule D.

Most importantly, I state that the signature and printed name on TKH 0045, General Consent for Care and Treatment, are not mine and do not match my known handwriting or signatures. By contrast, I recognize the signature on TKH 0073 as mine but state that it was obtained under duress and threat of medical or punitive lockdown. I am not claiming that every signature is forged; I am identifying TKH 0045 as the signature I presently dispute as non-authentic.

I also dispute the intake, custom-flow, transfer, MAR, task, appointment, chart, scanned-document, and medication-acceptance records identified in Schedule D because they contain conflicting answers, repeated questions, changing dates and timestamps, blank or missing intake elements, inconsistent release/transfer information, entries for appointments or tasks that do not match my custody timeline, and medication entries that conflict with my account and with Defendants' own written acknowledgments that medication was crushed, floated, or dissolved.

5. Preservation and Production Required

Please confirm in writing that a litigation hold has been issued and that the following materials are being preserved:

18. Original paper forms, original signatures, scanned source files, scanner/device information, file hashes if available, and complete chain-of-custody information for TKH 0045, TKH 0073, TKH 0043-0046, and all other disputed forms.
19. Native electronic medical records, EMAR/MAR data, audit trails, metadata, revision histories, deletion histories, user-access histories, print/export logs, scan logs, and transmission logs for TKH 0001-0036 and all records concerning my medication.
20. Native task, appointment, custom-flow, housing-round, transfer, and release records, including creation time, scheduled time, completion time, reschedule/deletion history, and the user who made each change.
21. Pharmacy and provider communications concerning Biktarvy, including the Healthway and Baptist Health calls, the identity of "Allie" and "Nikki" if maintained, prescription/refill records, and every order to crush, float, dissolve, or otherwise alter the medication.
22. Duty rosters, medical staffing records, pill-call assignments, medication-cart assignments, housing and medical-lockdown assignments, legal-mail logs, transport/movement logs, courthouse rosters, visitation records, radio traffic, and body-camera assignments for the relevant events.
23. Communications concerning me or my wife, including emails, texts, internal messages, Smart Communications records, grievance-routing data, and command directives.

24. Records concerning Melanie Comandini sufficient to show her relevant assignments, last dates worked, and any non-privileged discipline, reassignment, or separation connected to her alleged refusal to crush Biktarvy, subject to appropriate privacy protections.

If any requested material no longer exists, please identify the item, the person or system that last possessed it, the applicable retention policy, the date and manner of destruction or loss, and when the duty to preserve was communicated. If any responsive material is withheld as privileged or protected, please provide a privilege log sufficient to evaluate the claim.

6. Response Deadline and Good-Faith Conference

Please serve the sworn supplemental responses and responsive materials within fourteen (14) calendar days after receipt of this letter. Because my motion for service is due August 31, 2026, I request that the response be provided no later than August 3, 2026 if this letter is received promptly. I am available for a written conference or a telephone conference to narrow any genuine dispute. Please propose dates and times within five business days.

Please also review Schedules A through D and correct any misspelled name, mistaken role, or inaccurate date. After a reasonable inquiry, identify every additional person not listed in the schedules who administered, withheld, altered, crushed, floated, dissolved, received, stored, approved, prescribed, documented, reviewed, ordered, supervised, or responded concerning my medication; handled my legal mail; ordered medical lockdown; participated in the relevant searches or retaliation; or directed the courthouse transport and visitation events. I am specifically asking counsel to identify anyone else whom the records show may need to be substituted for a Doe Defendant or treated as a material witness.

If these deficiencies are not cured, I will preserve this letter as my good-faith conference and may seek a renewed motion to compel, a further extension of the Doe-identification deadline, authentication and preservation relief, and any other relief the Court permits. I hope that will not be necessary.

Respectfully,

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261 Wilson Loop
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Enclosures: Schedules A-D

SCHEDULE A - CURRENT DEFENDANTS AND SURVIVING ALLEGATIONS

This schedule tracks the January 13, 2026 screening order and the current docket. It summarizes allegations for identification and discovery purposes only; it is not a finding that any allegation is true.

Name / Status	Role	Alleged Conduct or Required Clarification
Clayton Edwards (originally “Claynton Edwards”)	Jail Captain / command official	Existing defendant. Alleged delay in receiving Biktaryv; participation in or enforcement of a crush/float policy; responses directing that all medications be crushed/float; legal-mail interference; placement in medical lockdown; retaliation involving Plaintiff and his wife; shakedowns and strip/visual-cavity searches; conspiracy; and official-capacity policy claim with Turn Key.
Ashley Watts / Ashley Watt	LPN / medical supervisor	Existing defendant. Alleged delay or approval barrier for HIV medication; supervision of medication operations; chart notes and pharmacy contacts; implementation or documentation of crushing/dissolving; knowledge of adverse symptoms; and role in the alleged medication policy.
Kaitlyn Smith (originally “Katynn Smith”; records also referenced as Caitlin)	LPN / pill-call nurse	Existing defendant. Alleged July 26, 2024 crushing or mishandling of Biktaryv and MAR documentation showing receipt despite disputed proper administration. Counsel must clarify the screening order’s separate reference to “Spence.”
Turn Key Health Clinics, LLC d/b/a TK Health	Contract medical provider	Existing defendant. Alleged policy, custom, training, supervision, and record-custodian role concerning delayed medication and the crushing/float/dissolving practice.
Doe Pill Nurse 1	Unidentified medical defendant	Existing Doe defendant. Alleged participation in administering, crushing, float, dissolving, withholding, or documenting Biktaryv on one or more disputed dates.
Doe Pill Nurses 2-3	Unidentified medical defendants	Existing Doe defendants. Same identification issue; each must be tied to specific dates, shifts, pill calls, MAR entries, and conduct.
Hannah Ross	Lieutenant / command staff	Existing defendant. Surviving allegations concerning legal-mail interference, retaliation, and conspiracy. Must be distinguished from Richard Ross, patrol sergeant.
Conner Goodwin	Correctional officer	Existing defendant. Surviving allegations concerning legal-mail interference, retaliation, and conspiracy.
Cody Siler (originally “Sciler”)	Sergeant	Existing defendant. Surviving allegations concerning legal-mail interference, retaliation, and conspiracy.
Zachary Rodgers (originally “Rogers”)	Sergeant	Existing defendant. Surviving allegations concerning failure to protect after blaming Plaintiff for shakedowns, an alleged arm-grab, retaliation concerning yard call and shakedowns, strip/visual-cavity searches, and conspiracy.

Name / Status	Role	Alleged Conduct or Required Clarification
Josh Swindle	Sergeant	Existing defendant. Surviving allegations concerning failure to protect, blaming Plaintiff for yard-call or shakedown consequences, retaliation, shakedowns, and conspiracy.
Donald Wood	Correctional officer	Existing defendant. Surviving allegations concerning denial of toilet paper as retaliation, participation in shakedowns, and conspiracy.
Haley Workman	Sergeant	Existing but presently unserved defendant. Surviving allegations concerning retaliation by blaming Plaintiff for loss of yard call and conspiracy. Please state whether County counsel will accept/waive service or provide a last-known address under seal.
“Spence” - identity unresolved	Person named in screening order	The screening order allows a crushed-medication claim against “Spence,” but the docket does not separately identify a Spence. Please state whether this refers to Kaitlyn Smith, a former/alternate surname, a scrivener’s error, or a separate medical employee, and provide full service information if separate.

SCHEDULE B - PROPOSED MEDICAL DOE SUBSTITUTES AND MATERIAL WITNESS

These people are identified from staffing, MAR, grievance, and related records. Inclusion does not mean that each person should automatically be added. The purpose is to obtain a sworn, incident-specific answer so the Court can determine whether substitution is proper.

Name	Position / Dates	Alleged Role and Required Confirmation
Ykebiya Spinks	Float LPN; approximately Aug. 23-25, 2024	Records place Spinks on medication pass. Plaintiff alleges she handled, provided, or documented Biktarvy while it was crushed, dissolved, altered, or presented in a different form. Confirm each date, MAR entry, user ID, and act.
Savannah Henderson	Associate Regional Float LPN; approximately Aug. 30-Sept. 1, 2024	Alleged medication-pass and documentation role. TK Health also identified her only as a possible “Nurse F” for the June 11 request. Confirm or deny each role under oath.
Jamie Andersen	LPN; approximately Sept. 2, 3, 6, 7, and 8, 2024	Alleged medication-pass and documentation role involving altered medication. Her name also appears in disputed intake or medical-interview documentation; produce audit history for those entries.
Katlyn Ladd	LPN; June 2024 intake and medication records	Associated with intake and MAR entries, including disputed “absent,” “refused,” or similar codes. Confirm whether she administered, withheld, altered, or documented medication on each disputed date and whether she was “Nurse F” for any request.

Name	Position / Dates	Alleged Role and Required Confirmation
Heather Jones	LPN / medication-pass nurse; July 26-27, 2024	Alleged administration, alteration, refusal coding, or inaccurate documentation. A “Jones” was previously terminated from the action; clarify whether the produced records establish personal involvement in the surviving medication claim and whether Jones was “Nurse F.”
Heather Hobbs	LPN / medication-pass nurse; beginning around Aug. 21, 2024	Alleged administration or alteration of Biktaryv. Clarify whether she corresponds to the prior “PM Pill Nurse, Heather” designation and identify each relevant act and entry.
Melanie Comandini	Float LPN; alleged events Aug. 10, 14, 15, and 19, 2024	Material witness at this stage, not presently proposed as a defendant. Plaintiff alleges she said Biktaryv should not be crushed and declined to crush it. Preserve and produce her assignment and non-privileged records concerning those events.

SCHEDULE C - IDENTITIES AND SERVICE INFORMATION STILL NEEDED

Please do not limit the supplement to this list. Identify any additional responsive person found after a reasonable inquiry.

Identity / Category	Information Required
Nurse F	Definitive identity for each request or communication, including Medical Request #20,062,020 (June 11-12, 2024) and each July request. Provide the audit user ID, shift, and basis for the identification.
Pill Nurses 1-3	Full names, shifts, pill-call assignments, MAR entries, and service information for each Doe Pill Nurse.
“Spence”	Full identity and relationship, if any, to Kaitlyn Smith; explain why the screening order uses that name.
Medication receiving / chain-of-custody personnel	Person who received Biktaryv brought by Plaintiff’s wife; person who stored it; person who completed or should have completed medication-acceptance records; person who released it to medical; and person who first approved administration.
Unnamed nurse who said medication was “up front”	Identify the nurse who allegedly said the medication was present and critical but could not be given until Ashley Watts approved it.
MAR and EMR record users	Every person associated with each initial, signature, abbreviation, shorthand, or user ID and every person who entered “absent,” “refused,” “received,” “not given,” or similar codes.
July 25 jail administrators	Every jail administrative employee who instructed Medical that all medications had to be crushed and floated.
Healthway pharmacist	Full identity, credentials, license, employer, date/time of call, exact advice, and all supporting communications.
Unnamed physician	Full identity of the physician Captain Edwards stated had been consulted and had approved or supported crushing/floating.
“Facility Provider” / dissolution provider	Full identity of the provider notified in TKH 0033 and the provider who ordered a ten-minute water dissolution. Clarify whether this was Jonathan White.
Medical-contractor representative who spoke with Edwards	Identify the person who allegedly told Edwards that a pharmacist and physician had approved the practice.

Identity / Category	Information Required
Record creators, modifiers, scanners, and witnesses	For TKH 0001-0036, TKH 0043-0046, TKH 0073, and disputed MAR/task records, identify each creator, editor, scanner, witness, and system user.
Legal-mail personnel and supervisors	People who refused to accept/sign outgoing legal mail, received or opened legal documents, delayed or withheld mail, acted under instructions, or supervised those events.
Medical-lockdown decisionmakers	Every person who requested, approved, ordered, maintained, reviewed, or ended medical lockdown, and every person present during relevant medication conversations.
Courthouse transport and visitation order-givers	Person who directed Officer Joseph Martin to move Plaintiff before other housing units; command staff responsible for the transport; and any County-controlled bailiff/courthouse personnel reflected in records concerning why Plaintiff's wife waited until the end of the docket.
Body-camera and surveillance custodians	Officer assigned to each relevant body camera, file identifier, custodian, retention status, and any person who reviewed, copied, exported, or deleted footage.
County command structure	Confirm roles and relevant assignments of Phillip Miller (Sheriff), Kyle Toler (Enforcement Captain), Raymond Coffman (Chief), "Captain King" (full name), Stevie Hughes, Hannah Ross, and any other command staff involved in directives.
Name distinctions	Distinguish Hannah Ross from Richard Ross; Clayton Edwards from Jeremy Edwards; and any other same/similar names in the productions.
Known roster names requiring incident linkage	State whether Joseph Martin, Savannah Chisum, Gayelyn Hargrove, John Long, Nicole Stipes, Mason Wilborn, Dakota Phillips, Stevie Hughes, or Phillip Miller had a specific assignment or act related to the surviving claims. Their appearance on a roster alone is not a basis to add them.
Haley Workman	Current service information under seal or confirmation that counsel will accept/waive service.
Any additional responsive person	Identify every other person who falls within the requested categories even if not named above, including supervisors, policymakers, trainers, grievance reviewers, pharmacists, providers, and record custodians.

SCHEDULE D - DISPUTED RECORDS AND AUTHENTICATION REQUESTS

The descriptions below state Plaintiff's authenticity or accuracy disputes. They are not judicial findings. Defendants should preserve and produce the originals and native audit information needed to test the disputes.

Record / Bates Range	Dispute and Authentication Needed
TKH 0045 - General Consent for Care and Treatment	Plaintiff states the signature and printed name are not his and disputes the document as non-authentic, forged, or altered. Produce the original, witness identity, scan source, scanner/device data, metadata, audit history, and chain of custody.
TKH 0073 - Waiver of Treatment / Evaluation	Plaintiff recognizes his signature but states it was obtained under duress and threat of medical or punitive lockdown. Preserve the original and identify every witness, person requesting the signature, and related directive.
TKH 0001-0006 - Intake screening / exam records	Disputed answers concerning prior incarceration, HIV/Biktarvy knowledge, military service, drug/alcohol history, and related intake questions; repeated or uniform timestamps; allegedly blank/missing vitals and release information. Produce native history and users.

Record / Bates Range	Dispute and Authentication Needed
TKH 0007-0010 - Housing rounds, transfer, and custom flows	Repeated questions and shifting dates/times; inconsistent transfer/release information; disputed statement that medication was sent to Greene County. Produce creation/modification history and Greene County transfer chain.
TKH 0012-0014 - MAR / medication administration	Disputed “absent,” “refused,” “received,” and “not given” entries; administration times and personnel; medication allegedly crushed, dissolved, floated, contaminated, wasted, left in a bag/cup, or vomited. Produce native EMAR and user mapping.
TKH 0015-0032 - Tasks and appointments	Scheduled, rescheduled, deleted, completed, and future entries allegedly inconsistent with custody/transfer dates; duplicate completion or dissolve-in-water tasks; inconsistent release dates. Produce full event and revision history.
TKH 0033 - Chart notes	Acknowledges jail-administration crushing/float direction, Healthway pharmacist contact, Facility Provider notification, and later dissolution “per provider,” while other responses deny or minimize alteration. Identify every unnamed decisionmaker and produce underlying communications.
TKH 0034-0036 - Scanned documents, vital signs, and alerts	Identify who scanned each document, the source file/paper, whether any document was re-scanned or replaced, and every person who created/removed alerts including “CRUSH MEDICATION.”
TKH 0043-0046 - Medication acceptance, medical questions, consent, and release	Identify who received, verified, witnessed, printed, and scanned each form; produce originals and chain of custody. Explain missing or inconsistent fields and handwriting.
Medical Request #20,062,020 and later printouts	Same request appears in productions printed at different times and signed only as “F. Nurse.” Identify the actual user and provide native request history, routing, edits, and print history.
Grievance and request responses concerning crushing/floating	Responses state “all medications” were crushed/floated and that pharmacist/physician approval existed. Produce native grievance routing, responder user IDs, appeal history, and supporting medical authority.
Medication transfer to Greene County	White County records suggest medication was sent; Plaintiff states it did not arrive. Produce packing, property, medication, transport, and receipt records and identify every transfer custodian.
Staffing records TKH 0075-0083 and County attendance roster	The rosters identify many possible employees but are not tied to incidents. Produce shift-level assignments and explain apparent date/time anomalies or records extending beyond the relevant custody period.

END OF LETTER AND SCHEDULES