

JOHNNY DEPP INITIAL CONSULTATION
5/22/14

I was asked by Mr. Depp to come to Boston to consult on his general medical situation. Mr. Depp is a 50y/o male (D.O.B. 6/9/63) who has had a life-long history of self-medicating behaviors involving multiple substances of abuse. These include alcohol, opiates, benzodiazepines, and stimulants (cocaine). He has had insomnia since childhood. For this problem he takes Roxycodone, and has been on this medication for over two years. He suffered from ADHD as a child and has been given Adderall recently that dramatically improved his focus and sense of calm. He admits to an anxiety syndrome and takes Klonopin 2mg daily in the morning, and has done so for several years. He also takes Crestor for hyperlipidemia but has no understanding of his cardiac status (no history of a calcium heart scan, no family history of coronary artery disease). He has smoked cigarettes for most of his life and also takes Red Bull, coffee, and sugar to increase his focus and sense of calm. He also has a history of THC intake that calms him. His significant medical problem at this time is his chronic reflux. He has been taking Nexium 40mg bid for over two years, but continues to experience esophageal burning despite this medication. He has limited dairy, citrus, or spicy food in his diet. He has never had an endoscopy, upper or lower. There is no family history of ulcer disease, colon cancer, colitis, or reflux. He has not been tested for H. Pylori.

Mr. Depp would like to undergo a complete medical evaluation (last thorough lab evaluation was one year ago and reported as normal). He is living in Boston for the next three months acting in a film. He is the principal

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Date: 04/11/2022
Judge: PSA
Case: CL-2019-0002911

actor and has no extended time to participate in these exams. He would like to schedule these diagnostics in the mid-summer when he returns to his home in Los Angeles.

Mr. Depp has two children, ages 12 and 15. Both attend Oakwood High School in the San Fernando Valley. Mr. Depp's childhood was complicated by a mother who was "crazy" and volatile. His parents separated early in his life. He has one full sister and a half-brother and sister. There are no other family members with psychiatric diseases or chronic medical conditions. His children are well. His full sister (Christine) is hypothyroid and on replacement medication. He is close to his full sister, but not to his half-siblings. Mr. Depp's mother had a diagnosis of lung cancer spread to her brain two years ago. She was given 3 months to live at the time of her diagnosis, underwent a resection of her brain lesion and treated with chemo for her lung lesion. She is now reported as "cancer-free", has become more involved with her life, and re-established good relationships with the patient and his sister Christine.

PHYSICAL EXAMINATION:

General: WD/WN C MALE, NAD, WELL-ORIENTED

H&N: AT/NC; PERRLA; EOM'S FULL, SCLEARA AND CONJUNCTIVA CLEAR; FUNDI BENIGN; NECK SUPPLE, NO THYROMEGALY, ADENOPATHY; CAROTID UPSTROKE AND VOL 2+ BILATERALLY WITHOUT MURMURS

LUNGS: CLEAR

COR: RR, NO MURMURS, RUBS, GALLOPS

ABDOMEN: TENDER AT MID-EPIGASTRIUM, NO MASSES, BS ACTIVE, NO ORGANOMEGALY

EXTREMITIES: NO EDEMA

NEUROLOGIC: NO FOCAL FINDINGS

Kip,jd 175

IMPRESSION:

Primary Dopamine Imbalance;

ADHD

BIPOLAR 1

Depression, secondary to above

Insomnia

Chronic substance abuse disorder

Chronic reflux, R/O H. Pylori, R/O Barrett's, R/O PUD

Hyperlipdemia by history

Chronic nicotine use

PLAN:

Secure old records

Advise full GI work up to include pan endoscopies

Repeat comprehensive lab evaluation

Consider Prevpak empirically

Re-establish dopamine balance:

**Adderall 5 mg bid and adjust dosage if tolerated
as needed**

**Trial Lithium 300mg bid for one week then
increase to 300mg tid and follow serum
levels**

Maintain Crestor until calcium heart scan

Discussed ultimate withdrawal of nicotine

**Maintain current dosing of Roxycodone and
Klonopin. Discussed the withdrawal of
these two drugs once patient is back in
Los Angeles. I would not recommend
withdrawal until he completes his current
work. I have agreed to provide these
medications, under 24/7 nursing
supervision, until he can detoxify in
mid July. Mr. Depp understands that I will
not continue to provide these medications**

after July. I discussed the withdrawal from these medications

Will schedule Heart and Lung CT when patient is back in Los Agneles. His sister agrees to undergo these screening exams with him

Trial of Ambien 10mg at hs with compounded Melatonin 20mg at hs

Psychological counseling after he returns home from Boston and his medications have been properly adjusted

Maintain current Lexipro but wean off gradually as I adjust his dopaminergics and restore his sleep cycle

The patient is given my complete contact information and we will stay in close communication as we adjust and trial these medications. I will arrange for an MD in Boston to assume primary care in the event of an emergency.

Kip jd 177

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