



Below are pics and an arrest record for domestic violence on May 22, 1992, whereas I called the Sheriff's Office first for the fact that she tried to kill me with a cast iron pot full of boiling water and cooked noodles.



This pic shows my back was to the stove. With the cast iron pot full of hot water and noodles that she hit me in the head with.



The marks you see on my arm is where the hot water and noodles burnt me!



The mark on my back shows where she stabbed me!



This is the sauce pan the 4 yo said mommy hit daddy with, it weighs over 5lbs with it's lid.



Sandra hid in the shadows of the hall at 11pm.

would keep my lip on the "yip" (lip) and that she was bleeding and he went away. Mommy and my sister got away and left in the van to Zouri (Missouri). Daddy said we have to come back because they're fighting because the food too. Mommy dumped macaroni on daddy's head one time, bang him on the head with a pan and it give him a headache". When I asked him how he got rid of headaches, he responded "he takes all the vitamins out of the bottle and swallowing them". When I asked him where his mom was, he stated "my mommy's in the hospital, and daddy's still home. She had to go to the doctor, she's pregnant and got in a car wreck and gotta go to the hospital". When I asked him who got into the car wreck he

DOMESTIC VIOLENCE

Hernando County Sheriff's Office

OFFENSE INCIDENT REPORT

Agency Name		Agency Report Number		Date		Time (min)		Time Dispatched (min)		Time Arrived (min)		Time Completed (min)	
70000		92006513		052292		1925		1931		1938		2240	
Incident Type		3. Misdemeanor		5. Ordinance		Incident: Day		Date		Time (min)		Date	
1. Felony		4. Traffic Misdemeanor		9. Other		From		To					
#1		Type		Description		A-Attempted		C-Committed		Status Violation Number		MCC/UCR Code	
#1		3		Domestic Violence		C		C		784103			
#2													
Incident Location (Street, Apt. Number)		City		Zip		Geographic Indicator							
6258 Kurt St.		BRkr.		34609		Z-6							
Business Name/Address Identifier		Forced Entry		Occupancy									
CROSS ST. FORZANO AL.		0. N/A 2. No		0. N/A 2. Occupied									
Location Type		01. Residence-Single		05. Convenience Store		09. Supermarket		13. Bank/Financial Inst.		17. Gov't/Public Bldg.		21. Airport	
02. Apartment/Condo		06. Gas Station		10. Dept/Discount Store		14. Commercial/Office Bldg.		18. School/University		22. Bus/Rail Terminal		25. Parking Lot/Garage	
03. Residence-Other		07. Liquor Sales		11. Specialty Store		15. Industrial/Mfg.		19. Jail/Prison		23. Construction Site		26. Highway/Roadway	
04. Motel/Hotel		08. Bar/Nightclub		12. Drug Store/Hospital		16. Storage		20. Religious Bldg.		24. Other Structure		28. Lake/Waterway	
# Offenses		# Victims		# Offenders		# Prem. Ent.		# Veh. Stolen		Type Weapon		02. Rifle	
01		01		01		00		00		01. Handgun		03. Shotgun	
V/W Code		P-Proprietor		Victim Type		4. Business		Race		N-N/A		Sex	
V-Victim		2-Other		0. N/A		5. Government		W-White		O-Oriental/Asian		M-Male	
C-Reporting Person				1. Juvenile		6. Church		B-Black		U-Unknown		F-Female	
				2. L.E. Officer		9. Other						U-Unknown	
Injury Type		03. Laceration		07. Loss of Teeth		Victim Relationship To Offender		05. Parent		10. Step-Child		14. Teacher	
04. Unconscious		08. Burns		09. Abrasions/Bruises		00. N/A		06. Brother/Sister		11. In-Law		15. Child of Boy/Girl	
05. Poss. Broken Bones		09. Other				01. Undetermined		07. Child		12. Other Family		16. Friend	
06. Poss. Internal Injury						02. Stranger		08. Co-Habitant		13. Student		17. Boy/Girl Friend	
07. Stabbed								09. Step-Parent		18. Employee		20. Other	
Offense Indicator		1. #1		V/W Code		V. Type		Name (Last, First, Middle or Business)		Residence Phone		Business Phone	
2. #2		1		1		3		JONES-HARRIS, SANDRA		904 754 1426			
Address (Street, Apt. Number)		City		State		Zip		Synopsis of Involvement					
6258 Kurt St.		BRkr.		FL		34609							
Other Contact Info. (Time Available, Interpreter, etc.)													
If Victim Type		Race		Sex		Date of Birth or Age		Res. Type		Res. Status		Extent of Injury	
1, 2, or 3		W		F		01/28/58		02		01		01	
Offense Indicator		V/W Code		V. Type		Name (Last, First, Middle or Business)		Residence Phone		Business Phone			
1. #1		1		1									
2. #2													
Address (Street, Apt. Number)		City		State		Zip		Synopsis of Involvement					
Other Contact Info. (Time Available, Interpreter, etc.)													
n Type		Race		Sex		Date of Birth or Age		Res. Type		Res. Status		Extent of Injury	
3													
Offense Indicator		Suspect Code		Code #		Juvenile		Name (Last, First, Middle)		Residence Phone		Business Phone	
1. #1		S-Suspect		E-Escapee		B		JONES, Dewey		904 754 1426			
2. #2		A-Arrestee		Z-Other									
Maiden Name		Nickname/Street Name		Place of Birth									
Last Known Address (Street, Apt. Number)		City		State		Zip		Synopsis of Involvement					
6258 Kurt St.		BRkr.		FL		34609							
Occupation		Employer/School		Address									
Physically Disabled													
Driver's License State/Number		Immigration and Naturalization Number		Other ID. Number		OBTS Number (Arrested)		FCC/MCC					
Clothing (Describe)		Scars/Marks/Tattoos (Location/Describe)											
jeans shorts wht sleeveless T-shirt													
Race		Sex		Date of Birth or Age		Height		Weight		Eye Color		Hair Color	
W		M		052055		5'8		185		BR		BR	
Complexion		Build		Facial Hair		Teeth		Speech/Voice		Special Identifiers			
Med													
ON 052292 at approx. 1900hrs. SANDRA AND Dewey JONES 6258 Kurt St. BRkr. were involved in a verbal argument that turned physical. D. Jones was yelling at the kids while S. Jones was cooking when he threw the fan out of the residence. D. Jones and S. Jones have been together for seven years in a common law relationship. There was food thrown all over kitchen floor. Victim													
Report Contains													
AIR, NARR.													
Offense(s) Reporting													
Jelly M													
ID. Number(s)													
30P													
Date													
052292													
Routed To													
CASA													
Referred To													
Assigned To													
By													
Date													
05-2392													
Case Status													
C/A													
Clearance Type													
1. Arrest													
2. Exceptional													
3. Unrecorded													
A-Adult													
J-Juvenile													
Date Cleared													
A 052292													
Arrest Number													
1													
Exception Type													
1. Entrapment													
2. Arrest on Primary													
Offense Secondary Offense													
Without Prosecution													
3. Death of Offender													
4. V/W Refused to													
Cooperate													
5. Prosecution Declined													
6. Juvenile / No Custody													
OBTS Number													
Page													
71 of 12													

7 0 0 0 0

Agency Name

HERNANDO

COUNTY SHERIFF'S OFFICE

NARRATIVE CONTINUATION

Agency Report Number

921 0 06513

1 Offense
2 Arrest

Juvenile

1 Original
2 Supplement

Original Date Reported

052292

Case Reference

Battery / Jones

Victim she handed the saucepan w/ noodles to Dewey. At this point he threw the food around burning himself. Dewey also struck the picture frames hanging in the hallway with his fist cutting them up. Victim touched Dewey on the shoulder asking him to calm down due to the children being present. Dewey became enraged pushing victim down falling between the sofa and coffee table. He held victim with one arm on the shoulder then punched her with his fist on the mouth. Victim sustained a bloody lip w/ a cut to inner mouth w/ heavy swelling. Victim also had finger marks on the neck and arms. Victim was visibly frightened that if she had not left the residence he would have continued to beat on her. Victim was located at a friend's home 6072 Kurt St.

D. Jones was placed into custody and transported to C.J. w/o incident.

Victim was given a Domestic Violence pamphlet. Also arrangements were made for an injunction.

Report Contains

OIR, NARR.

Related Report Number(s)

Officer(s) Reporting

Det. M. Kelly

ID Number(s)

370

Patrol

052292

1 Reviewing (if applicable)

ID Number

Routed To

Referred To

Assigned To

By

Date

Case Status

Clearance Type

1 Arrest

2 Exceptional

3 Unlabeled

A. Adult

J. Juvenile

Date Cleared

Arrest Number

Number Arrested

Exception Type

1 Exclusion Declined

2 Arrest on Primary
Offense Secondary Offense
Without Prosecution3 Death of Offender
V/W Refused to
Cooperate5 Prosecution Declined
6 Juvenile / No Custody

OBTS Number

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Dewey Jones Medicals
D/A: 5/31/88

Date	Provider	Comments
05/15/89	St. Joseph's Hosp. (Diagnostic Center)	MRI lumbar spine suggests disc herniation at L4-5 and L5-S1
05/18/89	Donald Mellman, M.D.	Hospital consult. Discharged with the belief that he was malingering.
07/22/89	David G. Dillenbeck, M.D.	Office conference with physical capacity evaluation sheet, assigning 4% PPI; limited physical activities.
12/07/89	David G. Dillenbeck, M.D.	Letter/report "To Whom It May Concern" stating he does not have a HNP & could work with certain, specified restrictions
03/05/90	St. Joseph's Hospital	Myelogram (total) shows a small spur at C3-4, decreased nerve root filling on left at L4-5 (cannot exclude left L4-5 disc herniation), and an increased distance at L5-S1 b/w disc & sac.
03/18/90	Unknown	MRI scan showed bulging L4-5 disc plus a disc fragment that was herniated on the right at L5-S1
07/19/90	Thomas M. Newman, M.D.	Initial office evaluation. Gave him an 8% PPI rating based on his lumbar disc disease; limited to 20-30 lbs. lifting regularly (50# occasionally); no prolonged squatting or stooping.
08/14/91	Anil Bhatta, M.D. (Internist)	Office evaluation. Diag: chronic neck & back pain.
10/17/91	R.W. Springstead, M.D.	Office evaluation (IME). Diagnosis is LS strain with radiculitis into both legs; also cervical strain
1/6/92	OAK HILL Hospital Scott Hensley, D.C.	Signs certification of PTSD
3/15/92	Thomas M. Newman, M.D. Thomas M. Newman, M.D. Thomas M. Newman, M.D.	Office visit for re-evaluation. He is in extreme pain and has not worked since RTW in 1990. Office visit. Thermogram of low back & legs essentially normal. Office visit. MRI scan shows a free fragment, herniated, at L5-S1 to the right; suggests a lumbar myelogram with CT scan
03/31/92 to 04/04/92 - 4-5-92	St. Joseph's Hospital	Admission for lumbar myelogram with CT scan due to increasing severe LBP with right leg pain & burning sensations. Dr. Maniscalco concludes that he definitely has a large HNP @ L5-S1, but he says it is unrelated to the 5/31/88 accident. Myelogram shows large disc fragment at L5-S1 on the right and central disc with bilateral nerve root impingement at L4-5.
4/6/92	OAK HILL H.	
4/27/92	OAK HILL H.	
4/28/92	SHANDS H.	
5/16/92	Tampa Gen. H.	

(477)

APR 16 1992

HISTORY AND PHYSICAL

JONES, DEWEY HP
#

PHYSICAL EXAMINATION:

ENT: Normal.

CK: Supple with no bruits.

NGS: Clear to auscultation.

HEART: There are no murmurs.

ABDOMEN: No organomegaly.

EXTREMITIES: The lumbar exam reveals no paravertebral spasm. He has ~~most, no movement because of excruciating pain.~~

NEUROLOGICAL: Mental status exam is normal. Cranial nerves and visual fields are normal. Motor exam reveals an unreliable, inconsistent motor exam with give and go weakness in all muscles tested in the lower extremities. Sensory exam showed some decreased sensation in the plantar aspect of his right foot but no definite anatomical loss could be appreciated. His reflexes, however, showed an absent right Achilles reflex. The cerebellar testing is normal.

IMPRESSION:

1. ~~Lumbar disc disease, most prominent L5, S1, with suspected herniated disc, L5, S1 to the right.~~
2. Exaggerated pain response.

PLAN: The patient is admitted for lumbar myelography with CT for further evaluation of the apparent herniated disc at L5-S1.

THOMAS, M. M.D. 6513
4/1/92 @ 9 a.m.
4/1/92 @ 10 a.m. cm/1/8718

JONES, DEWEY HP
#

St. Joseph's Hospital
TAMPA, FLORIDA
HISTORY AND PHYSICAL

P
A
T
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2 (478)

CHIEF COMPLAINT

BACK INJURY

AL	DATE	1333 012092	131721
PATIENT'S LAST NAME	FIRST	MI	BIRTHDATE
JONES, DEWEY	HENRY		05011938
AGE	SEX	MA	ACCON
40	M		10/1
PREVIOUS CONTACT	DATE OF PREV. VISIT	REG. INIT	M.D. #
	042892	LAM	

PATIENT AFTERCARE INSTRUCTIONS (Continued On Back)

#1 ☐ CHILDREN WITH FEVER

Your child's illness should be followed until it is completely cured. It is obviously impossible to provide this follow-up care in our Emergency Department. You must obtain this portion of the care from your family doctor or the clinic whose name was given you when you left the Emergency Department.

A fever does not necessarily indicate a dangerous infection. A child's temperature regulating mechanism is not well developed and thus, the fever is often higher than one would expect with relatively minor infection. The following instructions will help lower the temperature and avoid complications:

1. If feverish take the temperature (Normal temperature: Oral-98.6 degrees F; Rectal 99.6 degrees F).
2. Only if the temperature is 101 degrees F or above rectally, give Tylenol or liquid preparation every 4 hours as needed.
3. If the temperature is 104 degrees F or more, do the following: Bathe the child for 15 minutes in lukewarm water in bath tub after giving Tylenol.
4. Follow the doctor's orders with regard to antibiotics and other medications.
5. Give plenty of fluids (Coke, 7-up, Sprite, Popsicles, Jello, Iced tea, ice chips, etc.)
6. Call your doctor if: The child convulses or jerks
Spots or a rash appears

Note: These are only temporary instructions. If you do not understand them, please call your family doctor for explanation.

#2 ☐ MEDICATIONS

— You have been given _____ for pain.
Take every _____ hours as necessary. Do not drive or drink while using this.

— You have been given _____ for muscle spasm. Take every _____ hours as necessary. Do not drive or drink while using this.

— You have been given _____ for infection.
Take every _____ hours for _____ days. Be sure to take it ALL!

— Additional Medications: _____

DIET FOR NAUSEA AND VOMITING

First 24 Hours

Koolade
Gatorade
Tea with sugar
Coke, Pepsi, Seven-Up,
Gingerale with bubbles
shaken out
Jello

NO MILK

NO OTHER FOODS OR DRINKS

The patient may have as much of these drinks as they want, but feed them slowly.

Second 24 Hours

Any foods on the "First 24 Hours" list and the following:

Mashed potatoes Rice Cereal
Mashed bananas Plain grits
Rice Dry toast

Applesauce

Babies: if on formula, give half strength

Third 24 Hours

Progress to a regular diet as tolerated

#3 ☐ COLDS AND COUGH

Colds are a frequent source of complaint in children. A low grade fever (101-102 degrees) with a runny nose and slight cough can usually be managed at home. Frequent liquids are helpful. These can be given in the form of apple juice, tea, coca cola, and water. Aspirin or Tempra or Tylenol will help comfort the child.

— In the small child salt water nose drops will help relieve the stuffy nose. Mix 1/2 teaspoon of table salt to 1 pint water. With an eye dropper place 1-2 drops of this mixture in one side of the nose and allow them to set. Then suck it out with a bulb syringe (a 20z syringe is best). Then repeat the procedure in the other nostril. It is usually done before meals and naps.

— Cold medicines can be helpful and can be bought over the counter at the drug store. Triaminic, Sudafed, Robitussin, and Corcidin are only some of those available for children.

SUGGESTED MEDICINES AND DOSES

Age	Sudafed or Novahistine
6-12 months	1/2 teaspoon 4 times a day
12 months to 6 years	1 teaspoon 4 times a day

— Over 6 years: Directions on the box. Cold symptoms will frequently last two weeks. Antibiotics do not make a cold or flu go away any quicker. They are of no benefit in a cold.

#4 ☐ WOUND CARE (Cuts, Scrapes, Burns, etc.)

— 1. Keep dressing clean and dry

— 2. Using Q-Tip and hydrogen peroxide, clean the suture line, then apply Neosporin Ointment sparingly.

— 3. Elevate the wound to help relieve soreness and speed healing.

— 4. If the wound becomes reddened, swollen, has red streaks or pus, contact your doctor or return to the Emergency Department.

— 5. Return to the Emergency Department for wound check
_____ suture removal _____

— 6. A booster injection of tetanus toxoid was given.
Possible reactions:

- a. May be mild to moderate local inflammation or tenderness for a day
- b. Rare occasions, fever and general discomfort occurs. Aspirin or Tylenol may be taken for this (if no allergies)
- c. If small bump forms at the site of the injection, it should disappear in a few days.

— 7. Avoid direct sunlight to especially facial lacerations or abrasions for a minimum of 6 weeks. Protect area with either sun screen ointment or bandaid.

CALL BACK IN _____ DAYS BETWEEN 7 a.m. - 10 a.m. (ONLY) FOR CULTURE RESULTS. 395-0050

PATIENT INSTRUCTIONS

SEE INSTRUCTIONS #1 ☐ CHILDREN/FEVER #2 ☐ MEDS #3 ☐ COLDS #4 ☐ WOUND
#5 ☐ MISCARRIAGE #6 ☐ SPRAIN/FX #7 ☐ BACK/NECK #8 ☐ UTI #9 ☐ HEAD #10 ☐ AGE APPROPRIATE

Take over-topical Bactest and
Heating pad yellow up at St. Johns in Tampa

REFERRED TO DOCTOR / CLINIC TELEPHONE I HAVE READ AND UNDERSTAND THE INSTRUCTIONS

X

PATIENT'S COPY

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