



John Fouts <icreateupwardspirals@gmail.com>

2025-09-16 - Sworn Notice of Intent to Sue, Demand for Immediate Relief, and Preservation of Claims - Re: Norton Healthcare dismissal letter

5 messages

John Fouts <icreateupwardspirals@gmail.com>

Tue, Sep 16, 2025 at 11:32 PM

To: "McDonnell, Julie" <JULIE.MCDONNELL@nortonhealthcare.org>, "OCRMail@HHS.gov" <ocrmail@hhs.gov>, OCRComplaint@hhs.gov, ocr@usdoj.gov, ada.complaint@usdoj.gov, CRT@usdoj.gov, ask.CRT@usdoj.gov
Bcc: lori-haley007@gmail.com, Bob Fouts <bobfouts44@gmail.com>, gettingthriftywithit@gmail.com, John Fouts <fouts.john@gmail.com>

Sworn Notice of Intent to Sue, Demand for Immediate Relief, and Preservation of Claims

(Sworn Statement pursuant to 28 U.S.C. § 1746)

VIA EMAIL & CERTIFIED MAIL (RETURN RECEIPT REQUESTED)

Date:

September 16, 2025

From:

John R. Fouts
184 Cedarview Dr.
Shepherdsville / Louisville area, KY 40165
Email: icreateupwardspirals@gmail.com
Phone: (502) 956-0052 (Text Only - ADA Accommodations)

To:

Julie McDonnell, Esq.
System Vice President & Associate General Counsel
Norton Healthcare
4967 U.S. Highway 42, Fenley Building, Suite 100
Louisville, KY 40232-5070
Email: JULIE.MCDONNELL@nortonhealthcare.org

Cc:

U.S. Department of Health & Human Services — Office for Civil Rights (OCR)
Civil Rights Division, U.S. Department of Justice (CRT@usdoj.gov)

NOTICE OF INTENT TO SUE, DEMAND FOR IMMEDIATE RELIEF, AND PRESERVATION OF CLAIMS

(Sworn Statement pursuant to 28 U.S.C. § 1746)

Ms. McDonnell:

I, **John R. Fouts**, submit this sworn Notice of Intent to Sue, Demand for Immediate Corrective Action, and Preservation of Claims against Norton Healthcare for unlawful disability discrimination, retaliation for protected activity, violations of HIPAA rights, fraudulent misrepresentation and defamation, obstruction of life-preserving care, and interference with my child's medical care and records. I have filed a civil rights complaint with the U.S. Department of Health & Human Services, Office for Civil Rights (OCR), and I am sending this Notice to the Department of Justice Civil Rights Division as well.

I. Background and Timeline

- **May 25, 2025:** Formal complaint filed with the Kentucky Board of Medical Licensure (KBML) re: Dr. Joshua Allen & Norton Community Medical Associates.
- **June 4 & June 6, 2025:** Follow-up KBML communications and final notices regarding KBML non-response.
- **September 8, 2025:** Norton issued a "Global Ban" letter excluding me from all Norton facilities, providers, MyChart access, and direct communication.
 - The ban occurred **approximately 90 days** after the May 25 complaint and **within 20–30 days** of my most recent KBML correspondence (June 4–6). Both temporal connections are relevant to the retaliation analysis.

II. Summary of Wrongful Conduct (Representative)

1. **Fraudulent Harassment Claim & Retaliation:** Norton's written justification for the global ban — that I engaged in harassment or posed a direct threat — is false. The medical record and MyChart communications demonstrate that my messages were good-faith clinical reports and requests for urgent medical help. Norton used this false narrative as a pretext for retaliation following protected KBML activity.
2. **Failure/Refusal to Release Infusion Records:** Dr. Sean Glisson's infusion office refused to provide my copper infusion dosage logs to my current treating provider, Dr. Katie Brown's office, and assistant Ashley. Despite repeated requests and assurances, Norton withheld critical infusion records. This violated **HIPAA — right of access (45 C.F.R. § 164.524)** and directly obstructed continuity of life-preserving therapy.
3. **Denial of ADA / Section 504 / RFRA Accommodations:** Norton knew of my serious disabilities (neuroimmune dysfunction, vascular insufficiency, copper deficiency requiring infusions, TNFRSF13B deficiency, mast cell activation, etc.) and of my formal requests for reasonable accommodations (telehealth, written communication, mobility/scheduling flexibility, and RFRA/conscience accommodations). Norton refused these accommodations, even

acknowledgement, and instead issued a global ban - banning me system-wide, constituting actionable disability discrimination and retaliation under the ADA and Section 504 and violating RFRA obligations.

4. **Mischaracterization of Provider Contact Attempts:** Norton falsely claimed Dr. Allen “repeatedly” requested in-person visits. In truth, he requested two in-person visits. On both occasions I explained I could not attend due to debilitating illness; he also indicated he would not prescribe the stimulant medication in question, rendering in-person attendance futile. Norton’s misstatement was offered to justify punitive measures instead of accommodation.
5. **Obstruction of Life-Preserving Care:** By withholding infusion records and banning contact with Norton providers, Norton obstructed testing and treatment for spinal lesions/tumors and brain hypometabolism, and blocked transfer coordination for copper infusions. These actions placed me at risk of permanent neurologic injury and death. Injuries already sustained include persistent right-eye smearing, worsening expressive language and word-finding deficits, and episodes of producing opposite words/letters - these issues have not resolved. I have also become much more forgetful.
6. **Interference with Child’s Care & Records:** Norton has no lawful authority to block my ability as a parent to access my child’s medical records or to communicate regarding her care, or take her to her medical appointments. My child, **Jaquelyn A. Fouts (goes by Jackie A. Fouts)**, is currently seen by Norton-affiliated providers. Norton’s global ban interferes with parental decision-making and continuity of care and has resulted in denial of educational 504 protections and other harms to Jackie. Jackie is presently homeschooled because of ongoing issues.
7. **Pattern of Fraudulent Misconduct & Defamation:** Norton Pediatric Protective Services authored a CPS report containing objectively false and extreme defamatory statements about me such as fraudulently claiming Munchausens by Proxy, and about my child. Norton has refused correction despite presentation of objective evidence multiple times. That falsified record has been disseminated to third parties and continues to impede access to care and services, and is highly likely presently being used as a fraudulent predicate for warrantless surveillance to prevent equitable access to court in federal litigation in which I am a plaintiff and/or have been a plaintiff.
8. **Unlawful Global Ban — Lack of Legal Authority:** Norton lacks legal authority to revoke my federally protected rights under HIPAA (right of access), ADA, Section 504, RFRA, or any 1915(c) waiver protections. A unilateral “global ban” imposed by counsel that prevents patient access to records, to providers, or to coordination necessary for life-preserving care is not a lawful means of nullifying federal rights. I would also like to point out that there was no appeal process, no hearing process, and no due process. Norton imposed the ban knowing it would prevent coordination necessary for any transfer of infusion therapy — a fact relied upon to

ensure my care could not continue - this was done intentionally and maliciously by Norton Healthcare.

9. **Intentional, Knowing Conduct:** Norton personnel and counsel acted intentionally and with knowledge of the consequences of the ban — i.e., blocking records and provider communication that were necessary for continued, life-preserving care. This was deliberate, not inadvertent, conduct. They acted, fully knowing that severe irreparable neurological irreversible harm would likely occur and that even death would be much more likely - especially since they knew that my child and I had already been evicted without cause despite my medical fragility and in violation of ADA, VAWA, 1915c, Olmstead Act, Section 504, and Mainstream Voucher protections. Letter that was provided regarding medical fragility is attached.

III. New / Additional Demands (Non-Negotiable)

Norton must take the following actions **immediately**, and no later than **seven (7) calendar days** from receipt of this Notice:

A. Personnel Discipline & Removal

- Immediately investigate and **discipline** all Norton physicians, staff, and contractors who participated in or materially contributed to the falsified CPS report, the global ban, or related retaliatory or fraudulent acts — up to and including **termination without severance** where the record shows intentional misconduct. This includes, but is not limited to, **Dr. Sheridan Langford, Dr. Mahajan, Nina at Dr. Mahajan's Office, Carol at Dr. Sheridan Langford's Office** and any social workers or other Norton employees who participated in the falsified CPS report or related misconduct - including Julie McDonnell.
- Provide written confirmation of investigations and any disciplinary actions taken, in writing, to me directly.

B. Records Production & Disclosure

- Provide certified copies to me and to my designated providers (including Dr. Brown) of **all medical records and related communications concerning me or my child (Jacqueline A. Fouts) from January 1, 2023 through the present**, including but not limited to:
 - Electronic medical records and MyChart message logs and content of the MyChart messages themselves (including time/date stamps and sender/recipient metadata).
 - Infusion clinic logs and copper infusion dosage records. Iron infusion dosage records.
 - All drafts, final versions, and dissemination lists of the CPS report(s).

- Handwritten notes, memos, internal emails, legal/ risk management files, and any IM/chat logs referencing me or my child.
- Any logs or records reflecting contact with or referrals to external entities.
- Provide a complete **custodial list** and written certification of all record sources searched.

C. Disclosure of Contacts with Judicial or Federal Agencies

- Disclose in writing whether Norton or any Norton personnel or contractors have communicated, coordinated, or provided information to any judicial body, law enforcement agency, federal prosecutor's office (including EOUSA/NSD/USDOJ), the FBI, CMS, state or local child protective services, or any other governmental agency regarding me or my child. If such contacts occurred, produce the following metadata and non-privileged content:
 - Date(s) of contact, recipient agency/office, and copies of information exchanged. Name, fax, phone, email, and other contact information must be provided immediately.
 - Copies of any non-privileged communications, including letters, memos, emails, or reports provided.
 - If any communications included or resulted from court orders, directives, sealed docket entries, or legal processes (including but not limited to references to sealed items such as Docket items 43 or 56-2 in case 25-CV-00033 in W.D. Ky.), identify those matters and provide non-privileged descriptive summaries of Norton's role/knowledge. (Do not disclose sealed materials that Norton does not have authority to disclose; instead identify the existence of such contacts and provide applicable metadata and the lawful basis for any nondisclosure.)

D. Corrective Records Action

- Correct, reissue, and disseminate corrected versions of the **already found unsubstantiated** CPS report and any other falsified or materially inaccurate records. Send correction notices and retractions to all recipients of the original report (medical providers, hospitals, schools, state/local agencies, and any private third parties). Provide proof of transmission and copies of the corrected records.

E. Immediate Medical Testing & Treatment (Covered at 100%)

- Schedule and provide the following urgent testing and evaluations, billed in-network / to Medicare/Medicaid as appropriate, with prioritization for immediate scheduling:

- Complete MRI/non-gadolinium contrast imaging and specialist evaluation for spinal lesions/tumors previously ignored or mischaracterized and/or additional FDG PET CT Scans.
- Neuro-metabolic imaging and/or appropriate metabolic testing for brain hypometabolism identified by the UK clinic - secondary test to have two data points is ideal to monitor progress.
- Any other urgent testing or specialist evaluations necessary to prevent further irreversible neurologic damage, as recommended by treating specialists, or by me with supporting medical literature. My opinion is equal to that of physicians - I have a very rare homozygous mutation of which there are 4 reported cases in the medical literature as far as I can find - homozygous tnfrsf13B deficiency a181e aka taci deficiency c.542C>A. My child has one copy of this gene. Both homozygous and heterozygous are classified as pathogenic primary immune deficiency disorders and very serious clinically.

F. Forward-Facing Record Flags & Clinical Recognition

- Place a mandatory, forward-facing notice in the medical records for me and Jackie documenting: (1) ADA accommodations (telehealth, written communications, mobility scheduling), (2) RFRA/conscience accommodations (Spiritual Upward Spirals Association), and (3) important clinical diagnoses including **TNFRSF13B (TACI deficiency, A181E homozygous)** with a highly detailed clinical significance description.

G. Public Apology & Corrective Notices

- Issue a public written apology and press apology acknowledging Norton's ongoing misconduct and retaliation against a disabled dad and child and extreme and severe error in handling my care and the fraudulent and falsified CPS matter, and send corrective letters to the local medical community and media. Provide me and OCR with copies of the apology and proof of distribution.

H. Remedial Training & External Oversight

- Institute immediate remedial training for all staff who handled my care and the falsified and fraudulent CPS report and establish an external oversight mechanism to ensure ongoing compliance with all HIPAA, ADA, RFRA, Section 504, and anti-retaliation obligations. Provide a written corrective action plan to me and OCR. Also create a program for patients with rare disease and a plan to prevent discrimination against rare complex chronic medical patients, along with a complaint process that results in complaints being addressed rather than retaliation being experienced.

I. Preservation & Certification of Evidence

- Preserve all relevant evidence (MyChart audit logs, internal communications, voicemail logs, CPS drafts and distributions, legal and risk management files, notes and memos, and records of disciplinary decisions) and provide written certification of such preservation.

J. Universal Records Request & Attachments

- A Universal Records Request form (which I will attach) is included with this demand. Norton must process my records request consistent with HIPAA timeframes and provide the requested records without further delay.

IV. Damages & Remedies Reserved

My injuries are real, continuing, and likely irreversible at this point (see injuries above). I will seek **compensatory, punitive, and statutory damages**, injunctive and declaratory relief, attorneys' fees, costs, and any other relief available at law or equity. Nothing in this Notice limits or waives any claims; **all rights are expressly reserved**.

V. Response & Next Steps

If Norton fully complies with the demands above and provides written confirmation and proof of all corrective actions within **seven (7) calendar days**, I will confer with counsel and OCR to consider appropriate next steps. Failure or refusal to comply completely will result in immediate litigation in federal court and referral to OCR, DOJ Civil Rights Division, CMS, and any other relevant agencies — and public disclosure as much as possible.

VI. Sworn Declaration

I declare under penalty of perjury under the laws of the United States of America, pursuant to 28 U.S.C. § 1746, that the foregoing is true and correct to the best of my knowledge and belief.

Executed on this **16th day of September, 2025**, in Shepherdsville, Kentucky.

Sincerely,

/s/ John R. Fouts

John R. Fouts, MBA

Son of a Vietnam-War-Era Veteran

Founder, *Upward Spirals Association* (508(c)(1)(A) Spiritual Faith-Based Organization – Protected under RFRA)

Federal SSA SSDI Recipient – Protected under ADA, VAWA, Section 504, and 1915(c)

Mainstream Voucher Holder – HUD/IHCDA/CASI Program

Email: icreateupwardspirals@gmail.com

Alternate: torchoftruth@zohomail.com

Phone (Text Only – ADA Accommodation): **502.956.0052**

Voice calls & voicemails will be ignored


Fax (HIPAA Compliant): **604.641.2805**


Evidence archive (prior to block on saving):

<https://archive.org/details/@jfouts1979>

Attachments (to include when sending)

- Norton Global Ban Letter (Sept 8, 2025)
- KBML Complaint (May 25, 2025) and follow-ups (June 4 & June 6, 2025)
- MyChart messages and audit logs relevant to accommodation requests / urgent communications
- Evidence of Dr. Glisson infusion office refusal to release infusion records to Dr. Brown can only be provided by her office but verbally noted the ongoing inability to get infusion dosage.
- MRI and UK clinic reports showing prior imaging and brain hypometabolism findings
- Norton Pediatric Protective Services CPS report and supporting documents refuting it - Related Baptist Health (Jackie's former PCP refusals to correct medical records primarily based on falsified CPS report)
- Universal Records Request form (signed)

 13-C-2025-08-27-First-15-Ps-MyChart-Msgs-Through-Norton-Portal-As-Of-Today-2025-08-27-JRF.pdf











 !!!Dr-Pendleton-Immediate-Records-Correction-Request-Required-Jackie-A-Fouts-RE-CPS-Interview-and...

13 attachments

 !2025-08-26-JACKIE-FOUTS-UNIVERSAL-RECORDS-REQUEST-LETTER.pdf
1237K

 !2025-08-26-Signed-Universal-Records-Request-John-Fouts.pdf
809K

 13-D-Former-DOCKET-32-FILED-2025-01-13-Falsifications, Misrepresentation - Norton Pediatric Protective Services.pdf
1861K

-  **04-N-2025-04-03-FDG-PET-SCAN-SHOWING-HYPOMETABOLISM-IN-BRAIN-JOHN-R-FOUTS-MyChart - Test Details (1).pdf**
56K
-  **2025-01-24-Response-To-Baptist-Health-Compliance-Officer-Formal-Re-Jackie-A-Fouts.pdf**
107K
-  **2025-09-07-BaptistHealth-496-Opens-subject-immediate-legal-notice-failure-to-correct-medical-records-federal-legal-action-following-up-again-2025-02-11 (2).pdf**
92K
-  **12-A-2025-05-30-URGENT Follow-Up—Formal Complaint Against Dr JoshAllen and Norton Community Medical Associates—No Response.pdf**
300K
-  **12-B-2025-05-25-Formal Complaint KY Board of Medical Licensure Regarding Dr Josh Allen and Norton Community Medical Associates.pdf**
117K
-  **12-C-Gmail - 2025-06-04 - Subject_FINAL NOTICE—KBML Non-Response Entered into Ministerial Record for Federal and Public Review.pdf**
147K
-  **12-D-Follow-Up 2025-06-06 FINAL NOTICE – KBML Non-Response Entered into Ministerial Record for Federal and Public Review.pdf**
155K
-  **13-A-2025-09-15-Norton-Infusions-Jameka-Milton-and-Dr-Glisson-Primary-Infusion-Dr-2017-to-Present.pdf**
145K
-  **14-2025-09-14-Dr-Shaikun-ADA-Notes-How-Important-Stability-and-Medical-Access-ADA-Accommodations-and-Dangers-of-Displacement.pdf**
198K
-  **14-2025-09-02-Grounded-Serpent-Fouts ADA letter-Signed-Dr-Brown.pdf**
462K

CRT, Ask (CRT) <Ask.CRT@usdoj.gov>
To: John Fouts <icreateupwardspirals@gmail.com>


Tue, Sep 16, 2025 at 11:36 PM

Thank you for contacting the Department of Justice. If you are contacting us to report a civil rights violation, please use the new [Civil Rights Reporting Portal](#).

Gracias por comunicarse con el Departamento de Justicia. Si se está comunicando con nosotros para reportar una vulneración de derechos civiles, por favor utilice nuestro nuevo [Portal de Informes de Derechos Civiles](#).

Mailsuite Notification <notification@mailsuite.com>
Reply-To: julie.mcdonnell@nortonhealthcare.org, ocrmail@hhs.gov, ocrcomplaint@hhs.gov, ocr@usdoj.gov, ada.complaint@usdoj.gov, crt@usdoj.gov, ask.crt@usdoj.gov
To: icreateupwardspirals@gmail.com

Wed, Sep 17, 2025 at 12:50 PM

 Hot conversation: McDonnell, Julie opened it many times in a short period or forwarded it. [View all 13 opens](#) | [turn off hot conversations](#)

McDonnell, Julie <JULIE.MCDONNELL@nortonhealthcare.org>
To: John Fouts <icreateupwardspirals@gmail.com>

Wed, Sep 17, 2025 at 3:20 PM

Mr. Fouts,

Given your demands, we feel it is Norton's best interest to cease all communication with you. If you have an attorney, please ask him or her to contact me directly. Thank you.

Julie McDonnell

System Vice-President, Associate General Counsel

Norton Healthcare

From: John Fouts <icreateupwardspirals@gmail.com>

Sent: Tuesday, September 16, 2025 11:32 PM

To: McDonnell, Julie <JULIE.MCDONNELL@nortonhealthcare.org>; OCRMail@HHS.gov;
OCRComplaint@hhs.gov; ocr@usdoj.gov; ada.complaint@usdoj.gov; CRT@usdoj.gov;
ask.CRT@usdoj.gov

Subject: [EXTERNAL] 2025-09-16 - Sworn Notice of Intent to Sue, Demand for Immediate Relief, and Preservation of Claims - Re: Norton Healthcare dismissal letter

CAUTION: **EXTERNAL EMAIL**

Do **NOT** click links or open attachments unless you recognize the sender and know the content is safe. If you are not sure, please report the email as phishing using the Report Email button. For information on phishing and reporting, visit the IS Security Awareness page on Nsite.

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(Sworn Statement pursuant to 28 U.S.C. § 1746)

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REQUESTED)**

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September 16, 2025

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John R. Fouts

[184 Cedarview Dr.](#)

Shepherdsville / Louisville area, KY 40165

Email: icreateupwardspirals@gmail.com

Phone: (502) 956-0052 (Text Only - ADA Accommodations)

To:

Julie McDonnell, Esq.

System Vice President & Associate General Counsel

Norton Healthcare

[4967 U.S. Highway 42](#), Fenley Building, Suite 100

Louisville, KY 40232-5070

Email: JULIE.MCDONNELL@nortonhealthcare.org

Cc:

U.S. Department of Health & Human Services — Office for Civil Rights (OCR)

Civil Rights Division, U.S. Department of Justice

(CRT@usdoj.gov)

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and heterozygous are classified as pathogenic primary immune deficiency disorders and very serious clinically.

F. Forward-Facing Record Flags & Clinical Recognition

- Place a mandatory, forward-facing notice in the medical records for me and Jackie documenting: (1) ADA accommodations (telehealth, written communications, mobility scheduling), (2) RFRA/conscience accommodations (Spiritual Upward Spirals Association), and (3) important clinical diagnoses including **TNFRSF13B (TACI deficiency, A181E homozygous)** with a highly detailed clinical significance description.

G. Public Apology & Corrective Notices

- Issue a public written apology and press apology acknowledging Norton's ongoing misconduct and retaliation against a disabled dad and child and extreme and severe error in handling my care and the fraudulent and falsified CPS matter, and send corrective letters to the local medical community and media. Provide me and OCR with copies of the apology and proof of distribution.

H. Remedial Training & External Oversight

- Institute immediate remedial training for all staff who handled my care and the falsified and fraudulent CPS report and establish an external oversight mechanism to ensure ongoing compliance with all HIPAA, ADA, RFRA, Section 504, and anti-retaliation obligations. Provide a written corrective action plan to me and OCR. Also create a program for patients with rare disease and a plan to prevent discrimination against rare complex chronic medical patients, along with a complaint process that results in complaints being addressed rather than retaliation being experienced.

I. Preservation & Certification of Evidence

- Preserve all relevant evidence (MyChart audit logs, internal communications, voicemail logs, CPS drafts and distributions, legal and risk management files, notes and memos, and records of disciplinary decisions) and provide written certification of such preservation.

J. Universal Records Request & Attachments

- A Universal Records Request form (which I will attach) is included with this demand. Norton must process my records request consistent with HIPAA timeframes and provide the requested records without further delay.

IV. Damages & Remedies Reserved

My injuries are real, continuing, and likely irreversible at this point (see injuries above). I will seek **compensatory, punitive, and statutory damages**, injunctive and declaratory relief, attorneys' fees, costs, and any other relief available at law or equity. Nothing in this Notice limits or waives any claims; **all rights are expressly reserved**.

V. Response & Next Steps

If Norton fully complies with the demands above and provides written confirmation and proof of all corrective actions within **seven (7) calendar days**, I will confer with counsel and OCR to consider appropriate next steps. Failure or refusal to comply completely will result in immediate litigation in federal court and referral to OCR, DOJ Civil Rights Division, CMS, and any other relevant agencies — and public disclosure as much as possible.

VI. Sworn Declaration

I declare under penalty of perjury under the laws of the United States of America, pursuant to 28 U.S.C. § 1746, that the foregoing is true and correct to the best of my knowledge and belief.

Executed on this **16th day of September, 2025**, in
Shepherdsville, Kentucky.

Sincerely,

/s/ John R. Fouts

John R. Fouts, MBA

Son of a Vietnam-War-Era Veteran

Founder, *Upward Spirals Association* (508(c)(1)(A) Spiritual Faith-Based Organization – Protected under RFRA)

Federal SSA SSDI Recipient – Protected under ADA, VAWA, Section 504, and 1915(c)
Mainstream Voucher Holder – HUD/IHCDA/CASI Program

Email: icreateupwardspirals@gmail.com

Alternate: torchofruth@zohomail.com

Phone (Text Only – ADA Accommodation): **502.956.0052**

Voice calls & voicemails will be ignored

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Attachments (to include when sending)

- Norton Global Ban Letter (Sept 8, 2025)
- KBML Complaint (May 25, 2025) and follow-ups (June 4 & June 6, 2025)
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- Norton Pediatric Protective Services CPS report and supporting documents refuting it - Related Baptist Health (Jackie's former PCP refusals to correct medical records primarily based on falsified CPS report)

• Universal Records Request form (signed)

 13-C-2025-08-27-First-15-Ps-MyChart-Msgs-Through-Norton-Portal-As-Of-Today-2025-08-27-JRF.pdf

 !!!Dr-Pendleton-Immediate-Records-Correction-Request-Required-Jackie-A-Fouts-RE-CPS-Interview-and...

McDonnell, Julie <JULIE.MCDONNELL@nortonhealthcare.org>
To: John Fouts <icreateupwardspirals@gmail.com>

Tue, Oct 7, 2025 at 8:35 AM

Mr. Fouts,

When I emailed you on September 17 (below), I asked you to cease all communications with Norton Healthcare. That request includes all Norton employees, including Kerrie Fullen, whom you have continued to email, as recently as last night and also on September 29 and October 3. Our Health Information Management department received your recent requests for medical records and will work to fulfill those requests, assuming there are requests for anything different than what has been provided to you previously. In the meantime, please refrain from contacting any Norton employee via email, telephone, or via MyChart. As I stated, if you have an attorney, he or she may contact me directly.

Julie McDonnell

From: McDonnell, Julie

Sent: Wednesday, September 17, 2025 3:20 PM

To: John Fouts <icreateupwardspirals@gmail.com>

Subject: RE: [EXTERNAL] 2025-09-16 - Sworn Notice of Intent to Sue, Demand for Immediate Relief, and Preservation of Claims - Re: Norton Healthcare dismissal letter

Mr. Fouts,

Given your demands, we feel it is Norton's best interest to cease all communication with you. If you have an attorney, please ask him or her to contact me directly. Thank you.

Julie McDonnell

System Vice-President, Associate General Counsel

Norton Healthcare

From: John Fouts <icreateupwardspirals@gmail.com>

Sent: Tuesday, September 16, 2025 11:32 PM

To: McDonnell, Julie <JULIE.MCDONNELL@nortonhealthcare.org>; OCRMail@HHS.gov;
OCRComplaint@hhs.gov; ocr@usdoj.gov; ada.complaint@usdoj.gov; CRT@usdoj.gov;
ask.CRT@usdoj.gov

Subject: [EXTERNAL] 2025-09-16 - Sworn Notice of Intent to Sue, Demand for Immediate Relief, and Preservation of Claims - Re: Norton Healthcare dismissal letter

CAUTION: **EXTERNAL EMAIL**

Do **NOT** click links or open attachments unless you recognize the sender and know the content is safe. If you are not sure, please report the email as phishing using the Report Email button. For information on phishing and reporting, visit the IS Security Awareness page on Nsite.

Sworn Notice of Intent to Sue, Demand for Immediate Relief, and Preservation of Claims

(Sworn Statement pursuant to 28 U.S.C. § 1746)

**VIA EMAIL & CERTIFIED MAIL (RETURN RECEIPT
REQUESTED)**

Date:

September 16, 2025

From:

John R. Fouts

[184 Cedarview Dr.](#)

Shepherdsville / Louisville area, KY 40165

Email: icreateupwardspirals@gmail.com

Phone: (502) 956-0052 (Text Only - ADA Accommodations)

To:

Julie McDonnell, Esq.

System Vice President & Associate General Counsel

Norton Healthcare

[4967 U.S. Highway 42](#), Fenley Building, Suite 100

Louisville, KY 40232-5070

Email: JULIE.MCDONNELL@nortonhealthcare.org

Cc:

U.S. Department of Health & Human Services — Office for Civil Rights (OCR)

Civil Rights Division, U.S. Department of Justice
(CRT@usdoj.gov)

NOTICE OF INTENT TO SUE, DEMAND FOR IMMEDIATE RELIEF, AND PRESERVATION OF CLAIMS

(Sworn Statement pursuant to 28 U.S.C. § 1746)

Ms. McDonnell:

I, **John R. Fouts**, submit this sworn Notice of Intent to Sue, Demand for Immediate Corrective Action, and Preservation of Claims against Norton Healthcare for unlawful disability discrimination, retaliation for protected activity, violations of HIPAA rights, fraudulent misrepresentation and defamation, obstruction of life-preserving care, and interference with my child's medical care and records. I have filed a civil rights complaint with the U.S. Department of Health & Human Services, Office for Civil Rights (OCR), and I am sending this Notice to the Department of Justice Civil Rights Division as well.

I. Background and Timeline

- **May 25, 2025:** Formal complaint filed with the Kentucky Board of Medical Licensure (KBML) re: Dr. Joshua Allen & Norton Community Medical Associates.
- **June 4 & June 6, 2025:** Follow-up KBML communications and final notices regarding KBML non-response.
- **September 8, 2025:** Norton issued a "Global Ban" letter excluding me from all Norton facilities, providers, MyChart access, and direct communication.

- The ban occurred **approximately 90 days** after the May 25 complaint and **within 20–30 days** of my most recent KBML correspondence (June 4–6). Both temporal connections are relevant to the retaliation analysis.

II. Summary of Wrongful Conduct (Representative)

1. **Fraudulent Harassment Claim & Retaliation:** Norton’s written justification for the global ban — that I engaged in harassment or posed a direct threat — is false. The medical record and MyChart communications demonstrate that my messages were good-faith clinical reports and requests for urgent medical help. Norton used this false narrative as a pretext for retaliation following protected KBML activity.
2. **Failure/Refusal to Release Infusion Records:** Dr. Sean Glisson’s infusion office refused to provide my copper infusion dosage logs to my current treating provider, Dr. Katie Brown’s office, and assistant Ashley. Despite repeated requests and assurances, Norton withheld critical infusion records. This violated **HIPAA — right of access (45 C.F.R. § 164.524)** and directly obstructed continuity of life-preserving therapy.
3. **Denial of ADA / Section 504 / RFRA Accommodations:** Norton knew of my serious disabilities (neuroimmune dysfunction, vascular insufficiency, copper deficiency requiring infusions, TNFRSF13B deficiency, mast cell activation, etc.) and of my formal requests for reasonable accommodations (telehealth, written communication, mobility/scheduling flexibility, and RFRA/conscience accommodations). Norton refused these accommodations, even acknowledgement, and instead issued a global ban - banning me system-wide, constituting actionable disability discrimination and retaliation under the ADA and Section 504 and violating RFRA obligations.
4. **Mischaracterization of Provider Contact Attempts:** Norton falsely claimed Dr. Allen “repeatedly” requested in-person

visits. In truth, he requested two in-person visits. On both occasions I explained I could not attend due to debilitating illness; he also indicated he would not prescribe the stimulant medication in question, rendering in-person attendance futile. Norton's misstatement was offered to justify punitive measures instead of accommodation.

5. **Obstruction of Life-Preserving Care:** By withholding infusion records and banning contact with Norton providers, Norton obstructed testing and treatment for spinal lesions/tumors and brain hypometabolism, and blocked transfer coordination for copper infusions. These actions placed me at risk of permanent neurologic injury and death. Injuries already sustained include persistent right-eye smearing, worsening expressive language and word-finding deficits, and episodes of producing opposite words/letters - these issues have not resolved. I have also become much more forgetful.
6. **Interference with Child's Care & Records:** Norton has no lawful authority to block my ability as a parent to access my child's medical records or to communicate regarding her care, or take her to her medical appointments. My child, **Jaquelyn A. Fouts (goes by Jackie A. Fouts)**, is currently seen by Norton-affiliated providers. Norton's global ban interferes with parental decision-making and continuity of care and has resulted in denial of educational 504 protections and other harms to Jackie. Jackie is presently homeschooled because of ongoing issues.
7. **Pattern of Fraudulent Misconduct & Defamation:** Norton Pediatric Protective Services authored a CPS report containing objectively false and extreme defamatory statements about me such as fraudulently claiming Munchausens by Proxy, and about my child. Norton has refused correction despite presentation of objective evidence multiple times. That falsified record has been disseminated to third parties and continues to impede access to care and

services, and is highly likely presently being used as a fraudulent predicate for warrantless surveillance to prevent equitable access to court in federal litigation in which I am a plaintiff and/or have been a plaintiff.

8. **Unlawful Global Ban — Lack of Legal Authority:** Norton lacks legal authority to revoke my federally protected rights under HIPAA (right of access), ADA, Section 504, RFRA, or any 1915(c) waiver protections. A unilateral “global ban” imposed by counsel that prevents patient access to records, to providers, or to coordination necessary for life-preserving care is not a lawful means of nullifying federal rights. I would also like to point out that there was no appeal process, no hearing process, and no due process. Norton imposed the ban knowing it would prevent coordination necessary for any transfer of infusion therapy — a fact relied upon to ensure my care could not continue - this was done intentionally and maliciously by Norton Healthcare.
9. **Intentional, Knowing Conduct:** Norton personnel and counsel acted intentionally and with knowledge of the consequences of the ban — i.e., blocking records and provider communication that were necessary for continued, life-preserving care. This was deliberate, not inadvertent, conduct. They acted, fully knowing that severe irreparable neurological irreversible harm would likely occur and that even death would be much more likely - especially since they knew that my child and I had already been evicted without cause despite my medical fragility and in violation of ADA, VAWA, 1915c, Olmstead Act, Section 504, and Mainstream Voucher protections. Letter that was provided regarding medical fragility is attached.

III. New / Additional Demands (Non-Negotiable)

Norton must take the following actions **immediately**, and no later than **seven (7) calendar days** from receipt of this Notice:

A. Personnel Discipline & Removal

- Immediately investigate and **discipline** all Norton physicians, staff, and contractors who participated in or materially contributed to the falsified CPS report, the global ban, or related retaliatory or fraudulent acts — up to and including **termination without severance** where the record shows intentional misconduct. This includes, but is not limited to, **Dr. Sheridan Langford, Dr. Mahajan, Nina at Dr. Mahajan's Office, Carol at Dr. Sheridan Langford's Office** and any social workers or other Norton employees who participated in the falsified CPS report or related misconduct - including Julie McDonnell.
- Provide written confirmation of investigations and any disciplinary actions taken, in writing, to me directly.

B. Records Production & Disclosure

- Provide certified copies to me and to my designated providers (including Dr. Brown) of **all medical records and related communications concerning me or my child (Jacqueline A. Fouts)** from **January 1, 2023 through the present**, including but not limited to:
 - Electronic medical records and MyChart message logs and content of the MyChart messages themselves (including time/date stamps and sender/recipient metadata).
 - Infusion clinic logs and copper infusion dosage records. Iron infusion dosage records.
 - All drafts, final versions, and dissemination lists of the CPS report(s).
 - Handwritten notes, memos, internal emails, legal/ risk management files, and any IM/chat logs referencing me or my child.
 - Any logs or records reflecting contact with or referrals to external entities.

- Provide a complete **custodial list** and written certification of all record sources searched.

C. Disclosure of Contacts with Judicial or Federal Agencies

- Disclose in writing whether Norton or any Norton personnel or contractors have communicated, coordinated, or provided information to any judicial body, law enforcement agency, federal prosecutor's office (including EOUSA/NSD/USDOJ), the FBI, CMS, state or local child protective services, or any other governmental agency regarding me or my child. If such contacts occurred, produce the following metadata and non-privileged content:
 - Date(s) of contact, recipient agency/office, and copies of information exchanged. Name, fax, phone, email, and other contact information must be provided immediately.
 - Copies of any non-privileged communications, including letters, memos, emails, or reports provided.
 - If any communications included or resulted from court orders, directives, sealed docket entries, or legal processes (including but not limited to references to sealed items such as Docket items 43 or 56-2 in case 25-CV-00033 in W.D. Ky.), identify those matters and provide non-privileged descriptive summaries of Norton's role/knowledge. (Do not disclose sealed materials that Norton does not have authority to disclose; instead identify the existence of such contacts and provide applicable metadata and the lawful basis for any nondisclosure.)

D. Corrective Records Action

- Correct, reissue, and disseminate corrected versions of the **already found unsubstantiated** CPS report and any other falsified or materially inaccurate records. Send correction notices and retractions to all recipients of the original report

(medical providers, hospitals, schools, state/local agencies, and any private third parties). Provide proof of transmission and copies of the corrected records.

E. Immediate Medical Testing & Treatment (Covered at 100%)

- Schedule and provide the following urgent testing and evaluations, billed in-network / to Medicare/Medicaid as appropriate, with prioritization for immediate scheduling:
 - Complete MRI/non-gadolinium contrast imaging and specialist evaluation for spinal lesions/tumors previously ignored or mischaracterized and/or additional FDG PET CT Scans.
 - Neuro-metabolic imaging and/or appropriate metabolic testing for brain hypometabolism identified by the UK clinic - secondary test to have two data points is ideal to monitor progress.
 - Any other urgent testing or specialist evaluations necessary to prevent further irreversible neurologic damage, as recommended by treating specialists, or by me with supporting medical literature. My opinion is equal to that of physicians - I have a very rare homozygous mutation of which there are 4 reported cases in the medical literature as far as I can find - homozygous tnfrsf13B deficiency a181e aka taci deficiency c.542C>A. My child has one copy of this gene. Both homozygous and heterozygous are classified as pathogenic primary immune deficiency disorders and very serious clinically.

F. Forward-Facing Record Flags & Clinical Recognition

- Place a mandatory, forward-facing notice in the medical records for me and Jackie documenting: (1) ADA accommodations (telehealth, written communications, mobility scheduling), (2) RFRA/conscience accommodations (Spiritual Upward Spirals Association), and (3) important clinical

diagnoses including **TNFRSF13B (TACI deficiency, A181E homozygous)** with a highly detailed clinical significance description.

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Sincerely,

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