NONPRECEDENTIAL DISPOSITION
To be cited only in accordance with FED. R. APP. P. 32.1

United States Court of Appeals

For the Seventh Circuit
Chicago, Illinois 60604

Submitted May 20, 2026*
Decided May 20, 2026

Before

THOMAS L. KIRSCH II, *Circuit Judge*

JOHN Z. LEE, *Circuit Judge*

REBECCA TAIBLESON, *Circuit Judge*

No. 25-1572

JEFFREY D. LEISER,
Plaintiff-Appellant,

v.

DANIEL LAVOIE, et al.,
Defendants-Appellees.

Appeal from the United States District Court for the Eastern District of Wisconsin.

No. 23-cv-2-pp

Pamela Pepper,
Chief Judge.

O R D E R

Jeffrey Leiser, a Wisconsin prisoner, sued the medical staff at Redgranite Correctional Institution, claiming that they inflicted cruel and unusual punishment on him by limiting his prescription for Tylenol. The district court granted the defendants'

* We have agreed to decide the case without oral argument because the briefs and record adequately present the facts and legal arguments, and oral argument would not significantly aid the court. FED. R. APP. P. 34(a)(2)(C).

motion for summary judgment after determining no reasonable jury could conclude they were deliberately indifferent to Leiser's medical condition. We affirm.

We construe all facts and draw all reasonable inferences in Leiser's favor. *See Arce v. Wexford Health Sources Inc.*, 75 F.4th 673, 678 (7th Cir. 2023). Leiser suffers from chronic pain, which appears to be caused by a nerve impingement in his back. At some point, he obtained a prescription from a prison medical provider for two 500 mg tablets of Tylenol, three times per day, as needed.

Prior to April 2022, providers at Redgranite could prescribe up to eight 500 mg tablets of Tylenol a day, for a total of up to 240 tablets every 30 days. But a committee reviewed prescription practices at Redgranite and found that prisoners were taking Tylenol in amounts that exceeded the recommended limits for chronic use, risking overdose and liver damage. Following the committee's report, in April 2022, Daniel LaVoie, the medical director at Redgranite, announced a new policy that limited prescriptions to 50 tablets every 30 days. Providers could prescribe higher dosages in individual cases with approval, and Tylenol—along with other over-the-counter pain relievers—remained available for sale at the canteen without a prescription.

When Leiser attempted to refill his Tylenol prescription on April 15, 2022, prison medical staff denied the request. Leiser then wrote a letter to LaVoie and submitted a health services request to Nurse Angela Thompson complaining about his reduced prescription. LaVoie denies receiving the letter, but Thompson responded a few days later, informing Leiser that he could purchase medication from the canteen. Leiser then submitted another health services request. Nurse Cindy Barter responded, explaining the new policy a second time, directing Leiser to use all forms of pain management in his care plan, and suggesting that he raise his concerns at his next advanced care provider appointment. Over the next few months, Thompson informed Leiser of the policy several more times and reminded him that he could purchase other over-the-counter medications without a prescription. Leiser informed Thompson and other providers that the canteen was often out of Tylenol, but he does not dispute that other pain relievers remained in stock.

During the summer of 2022, Leiser's knee pain was treated by Doctor Gilbert Steffanides, who diagnosed Leiser with degenerative joint disease in his knee. Steffanides gave Leiser a cortisone injection on June 23, ordered muscle rub ointment on July 25, prescribed Voltaren gel (a topical pain reliever) on August 10, and prescribed topical Lidocaine on September 1. Leiser saw Steffanides again on September 12, this time to address his back pain. Steffanides prescribed a muscle relaxer and another anti-

inflammatory medication, scheduled an x-ray, and recommended an MRI in four to six weeks if Leiser's symptoms did not improve. The parties dispute whether Leiser requested a higher dose of Tylenol at this meeting. Leiser continued to see Steffanides for knee and back pain throughout 2022, and Steffanides continued to adjust Leiser's prescriptions, though he never increased Leiser's dose of Tylenol.

During this time, Leiser alleges that on two occasions he could not access medication that had been prescribed to him. According to Leiser's medical records, Doctor Rey Palop prescribed Leiser two 500 mg tablets, three times a day in early October. On October 18, Leiser requested more Tylenol, stating that an unnamed "male RN" promised to increase his Tylenol prescription. Nurse Jodi Fryczynski responded to Leiser's request. It is unclear whether Palop intended for the prescription to be excepted from the monthly limit, but in the absence of a clear statement that it was excepted, Fryczynski did not provide Leiser more than 50 tablets a month. Instead, she reiterated the policy limits and scheduled Leiser with a provider who had authority to increase his prescription. As for the second instance, Steffanides prescribed Leiser twice daily doses of 800 mg of ibuprofen on November 22, 2022, and set the prescription to expire a year later, on November 10, 2023. But when Leiser attempted to refill the prescription on December 27, 2022, his request was denied because the end date for the prescription had been changed to December 23, 2022. The record does not reveal who changed the end date for this prescription or why it was changed.

Leiser sued LaVoie, Steffanides, Thompson, Barter, and Fryczynski under 42 U.S.C. § 1983, alleging the defendants were deliberately indifferent to his need for pain medication. The court entered summary judgment in favor of the defendants, reasoning that Leiser merely disagreed with his providers' treatment of his condition and presented no triable issues as to the constitutionality of his treatment.

On appeal, Leiser challenges the district court's conclusion that he did not present evidence that the defendants were deliberately indifferent to his pain. He insists that the defendants knew that his medication regime was insufficient to manage his suffering, yet they refused to increase his prescription for Tylenol.

Deliberate indifference to a prisoner's objectively serious medical condition violates the Eighth Amendment's guarantee against cruel and unusual punishment. *Riley v. Waterman*, 126 F.4th 1287, 1295 (7th Cir. 2025). All parties accept that Leiser's medical issues are serious, so we inquire whether Leiser has put forward evidence upon which a reasonable jury could find that the defendants were deliberately indifferent to his needs, resulting in "the unnecessary and wanton infliction of pain" without "any

penological purpose." *Estelle v. Gamble*, 429 U.S. 97, 103 (1976); *see Farmer v. Brennan*, 511 U.S. 825, 841 (1994) ("[D]eliberate indifference serves under the Eighth Amendment to ensure that only inflictions of punishment carry liability.").

Leiser first contends that LaVoie acted with deliberate indifference when he implemented the policy limiting patients' Tylenol prescription to 50 pills every 30 days. As Leiser tells it, LaVoie all but eliminated patients' access to medication without personally examining them to ensure the change would not inflict unnecessary pain. But there is no dispute that pain medications remained available: medical providers could request an exemption from the Tylenol policy or prescribe alternatives, and both Tylenol and other over-the-counter pain relievers were sold at the canteen. Moreover, the policy sought to mitigate risks—not disregard them—by bringing Tylenol use into accordance with recommended levels. Although Leiser believes the policy was enacted to save money, pointing to the fact that Tylenol was still sold at the canteen, he has not adduced evidence supporting that claim. "[C]ourts deal in proof," not "inferential leaps," and Leiser's speculation does not create a genuine issue of material fact. *Flowers v. Kia Motors Fin.*, 105 F.4th 939, 947 (7th Cir. 2024). Absent evidence that LaVoie implemented the policy without any penological or medical purpose, *see Estelle*, 429 U.S. at 103, we conclude that summary judgment in LaVoie's favor was proper.

Next, Leiser argues Steffanides, Thompson, Barter, and Fryczynski were deliberately indifferent to his pain after the policy went into effect. Because Leiser has presented evidence that these four defendants knew that he was in pain, we ask whether those defendants "responded reasonably" to his condition. *Farmer*, 511 U.S. at 844–45. This analysis is deferential. Disagreement between an incarcerated patient and provider about the course of treatment is generally insufficient to suggest deliberate indifference, particularly when the provider is deciding which pain medication to prescribe. *Lockett v. Bonson*, 937 F.3d 1016, 1023–24 (7th Cir. 2019); *see also Snipes v. DeTella*, 95 F.3d 586, 591 (7th Cir. 1996) (administering pain medication "requires medical expertise and judgment" and "entails risks that doctors must consider in light of the benefits"). As we have previously explained, "the Eighth Amendment does not entitle incarcerated patients to their preferred pain medication, nor does it impose the unrealistic requirement that doctors keep patients completely pain-free." *Arce*, 75 F.4th at 681 (internal citations omitted).

True, medical providers must take "reasonable measures" to relieve the pain of a patient that they know is suffering. *Id.* (quoting *Arnett v. Webster*, 658 F.3d 742, 753–54 (7th Cir. 2011)). But there is no evidence that any defendant disregarded any risk to

Leiser or failed to reasonably address his pain. Steffanides repeatedly prescribed Leiser alternative pain medications and scheduled him for diagnostic testing. Thompson, Barter, and Fryczynski adhered to the new policy concerning Tylenol prescriptions, advised Leiser how he could obtain over-the-counter medications, and scheduled him for follow-up appointments with doctors who had the authority to modify his prescriptions. Although Leiser was at times unable to purchase extra Tylenol, he always had access to other prescribed medications and pain relievers at the canteen. Essentially, Leiser asserts that the defendants should have provided more or different pain killers—not that they disregarded his suffering. Treatment decisions supported by medical judgment do not evince "a sufficiently culpable state of mind" to establish an Eighth Amendment violation. *Arnett*, 658 F.3d at 751. To the extent that Leiser disagrees with his providers concerning the course of his treatment, such disagreements, without more, are insufficient to establish that the defendants were deliberately indifferent. *See Lockett*, 937 F.3d at 1023–24.

AFFIRMED