

The Client – Case No. [REDACTED]
Defendant Medical Exam Attendance Report
Submitted: April 12, 2018
Prepared by: A TTS Client
Advocate
Total Trial Solutions

CONFIDENTIAL — ATTORNEY WORK PRODUCT

Exam Date: April 10, 2018

Appointment Time: 1:40 p.m.

Location: [REDACTED]

Examining Doctor: The Examiner , orthopedic surgeon

Examination Start Time: 1:32 p.m.

Examination End Time: 2:32 p.m.

1:10 p.m.: The TTS Client Advocate and The Client arrive at the scheduled location, and check in with the receptionist. The receptionist asks The Client for his driver's license, which he provides. The receptionist invites The Client and The TTS Client Advocate to have a seat in the waiting room.

1:32 p.m.: The Examiner enters the waiting area and introduces himself to The Client and The TTS Client Advocate . The Examiner asks The Client to complete a form containing a pre-examination checklist, which he does. The Examiner invites The Client and The TTS Client Advocate into an exam room.

The Examiner tells The Client that this is an IME and explains to him what that means. The Examiner says he does not work for anyone; he works for himself. The Examiner says that he read many of The Client's medical records and asks The Client if he ended up underneath an 18-wheeler, and he says yes. The Examiner asks The Client if the Jaws of Life were used. The Client says no, but they had to break the windows and remove him from the car over the console, through the passenger side door. The Examiner asks The Client if he was transferred to Albany Medical Center, and he says yes. The Examiner asks The Client if he had a chest tube put in. The Client says he had a choice between that or a pigtail tube, and decided to go with the pigtail after consulting with his cousin, who is an M.D. The Examiner asks The Client how long the pigtail was in, and he says two or three days. The Examiner asks The Client if he was admitted on the morning of December 10, 2015, and released on December 18, 2015, and he says yes.

The Examiner tells The Client that he read some notes indicating that The Client was pissed off at the hospital staff, and had to be consulted by a psychologist several times. He asks The Client what happened. The Client says he had a meltdown, which is not like him. The Examiner says, "Well that was before you found yourself under a truck."

The Examiner asks The Client what his complaints were at the hospital. The Client says he complained about the gash in his head, and wanted it to be cleaned. He adds that the gash was encrusted, and he was losing his feeling in that area of his head. The Client says he also complained of back pain mostly on his left side, which kept him from being able to lay in bed. The Examiner asks The Client if he had complained about his thigh, and he says yes, his left thigh was bothering him along with the majority of his left side in general.

The Examiner asks The Client what kind of car he was driving. The Client says he was driving a Subaru Outback. The Examiner asks The Client if it is correct that he was diagnosed with pneumothorax, transferred to Albany Medical Center, and complained of pain along his left side. The Client says that sounds correct. The Examiner asks The Client if he went straight home after the hospital, and he says yes. The Examiner asks The Client whom he lives with, and he says his wife. The Examiner asks The Client if his wife is well, and The Client says no, she suffers from an autoimmune disease. The Examiner asks The Client if he is his wife's caretaker. The Client explains that she is not bed-ridden, but he has to help her when she has her bad moments. The Examiner asks The Client if his wife is able to take care of herself for the most part, and he says yes. The Examiner asks The Client if his wife is able to help The Client with things around the house, and he says yes.

The Examiner asks The Client if he uses any ambulatory aids. The Client says yes, he uses a tri-pod cane. The Examiner asks The Client who prescribed the cane. The Client says he had the cane from his prior knee surgeries, and self-prescribed it for stability for one month. The Examiner asks The Client if he was prescribed any medications. The Client says he took oxycodone for about 30 days. The Examiner asks The Client if he is taking oxycodone now, and he says no.

The Examiner asks The Client which doctor he followed up with after the hospital. The Client says he saw his primary care physician, Dr. Todd Baldwin. The Examiner asks The Client if the gash on his head was sutured in the hospital. The Client says no. The Examiner asks The Client what happened when he saw Dr. Baldwin. The Client says he asked Dr. Baldwin what they were going to do about his head, as he was pulling out shards of glass on his own. The Examiner says that he does not know if The Client was ever told this, but it is very common for trauma patients to pull out glass after their accidents. The Client says he was never told, but he knows now. The Examiner asks The Client what Dr. Baldwin ended up doing for him. The Client says Dr. Baldwin told him to soak his head and see how he feels. The Client adds that he was disappointed with his doctor's treatment recommendation.

The Examiner asks The Client what happened next. The Client says he self-referred to Dr. Alan Gotesman out of New Windsor, NY. The Examiner asks The Client what his complaints to Dr. Gotesman were. The Client says he complained of pain in his left shoulder, left thigh, and back. The Examiner asks The Client what happened next. The Client says he sent him for an MRI, but cannot remember what part of his body, and then he recommended physical therapy for the left

shoulder with notes on specific exercises for the back and thigh. The Examiner asks The Client how long he went to physical therapy, and he says for about one month. The Examiner asks The Client if physical therapy

helped, and he says no. The Examiner asks The Client if he went back to Dr. Gotesman. The Client says no, he went to another orthopedist, Dr. Nicolas Belasco out of Goshen, NY, as he came up on a Google search for orthopedists with a specialty in concussions. The Examiner says he does not believe there is such a specialty in orthopedics. The Client says he could be mistaken, but that is what it came up on Google. The Examiner runs a Google search of Dr. Belasco on his cell phone and says he is a family practitioner. The Client says he was having mental issues and it looked as though Dr. Belasco dealt with the head.

The Examiner asks The Client if it is correct that he saw Dr. Baldwin and Dr. Gotesman in January 2016. The Client says that is correct. The Examiner asks The Client when he saw Dr. Belasco. The Client says he is not sure, but probably spring 2016. The Examiner asks The Client what his complaints to Dr. Belasco were. The Client says he complained about his shoulder and neck pain, but his biggest complaint was that he was starting to get severe migraine pains in the right occipital region of his head. The Examiner asks The Client if he ever had a problem with headaches prior to the accident, and he says no. The Examiner asks The Client what Dr. Belasco did for him. The Client says he gave him sumatriptan and naproxen, and sent him for an MRI of his brain. The Examiner asks The Client if the medications helped, and he says yes. The Examiner asks The Client if he is presently taking those medications, and he says yes, as needed. The Examiner asks The Client if he is still seeing Dr. Belasco, and he says yes. The Examiner asks The Client if he is seeing Dr. Belasco continuously. The Client says no, he has not seen him in more than six months, but will be seeing him in August 2018.

The Examiner asks The Client who his current primary care physician is. The Client says he switched from Dr. Baldwin to a doctor from the Saugerties Wellness Center. The Examiner asks The Client why he changed. The Client says there were some issues with the no-fault insurance that made him feel embarrassed and he felt better leaving the practice.

The Examiner asks The Client if he has seen any other doctors. The Client says yes, he saw a pain management doctor out of Fishkill, NY, Dr. Rosenblatt. The Examiner asks The Client when he saw Dr. Rosenblatt. The Client says he thinks he saw Dr. Rosenblatt around summer 2016. The Examiner asks The Client what Dr. Rosenblatt did for him. The Client says he gave him injections into his low back. The Examiner sounds surprised, and says, "The low back?" The Examiner asks The Client if the injections helped, and he says no.

The Examiner asks The Client what happened next. The Client says he went back to Dr. Belasco, who recommended a second pain management doctor, Dr. Kevin Weiner. The Examiner asks The Client if he went to see Dr. Weiner mostly for the low back pain, and he says yes. The Examiner asks The Client what Dr. Weiner did for him. The Client says he gave him a series of three epidural injections. The Examiner asks The Client if it helped, and The Client says yes, he has been about 40% better for almost a year now.

The Examiner asks The Client what happened next. The Client says he went to see a spinal surgeon, Dr. Kornell, for his back pain. He adds that Dr. Kornell told him he could do some linkages, but recommended that The Client wait on the surgery and just try to stay as fit as possible for now. The Examiner asks The Client if he went to physical therapy again, and he says yes. He adds that he went to a physical therapist in Kingston, NY this time, and that therapist made a difference.

The Client states that he remembers that while he was in the trauma center in January 2016, he saw Dr. Deroo, who told him that he had a hernia. The Client says he had a revision of a previous revision done by Dr. Brian Binetti in April 2017.

The Examiner asks The Client what doctors he is seeing now. The Client says Dr. Belasco thinks he has psychological problems stemming from the crash, so he sent him to Dr. Ruben in Newburgh, NY, but he and The Client did not jive, so The Client went to a neuropsychologist out of Rhinebeck, NY, Dr. Victor Zelek. The Examiner asks The Client what happened next. The Client says he had a neuropsychological evaluation done, which found that he has cognitive deficiencies. The Client adds that he has been doing cognitive therapy since February 2016.

The Examiner summarizes The Client's medical treatment in chronological order. While going through it, The Client remembers that he saw a plastic surgeon, who sutured the gash in his head, and has been going to acupuncture since April 2016. The Examiner asks The Client if the acupuncture is helping, and he says yes, temporarily. The Client adds that he is also seeing a psychologist, Dr. Hammel to talk out his issues.

The Examiner asks The Client what medications he is currently taking. The Client says he is taking sumatriptan, naproxen, and occasionally will take a left over narcotic. The Examiner asks The Client how often he takes naproxen. The Client says he takes naproxen four to six times a month. Dr.

Kircher asks The Client how often he takes sumatriptan, and he says once or twice a month.

The Examiner asks The Client if he is working. The Client says no, the Union covered him for six months after the crash, but then he was forced to resign. The Examiner asks The Client if he is now retired, and he says yes.

The Examiner asks The Client what his present complaints are. The Client says he has low back pain mostly on his left side. He adds that he has sciatic pain down into his butt and thigh. The Examiner asks The Client how his left shoulder is, and he says better, but he sometimes feels a phantom pain in his left shoulder. The Examiner asks The Client how is left thigh is, and The Client says his thigh is okay.

The Client states that he remembers that he goes to the University Eye Center in Manhattan, NY for ocular exercises. The Examiner asks The Client if he has any hobbies, and he says yes, walking. The Examiner asks The Client if he has any limits. The Client says his pace is slow and he can only walk for a mile. The Examiner asks The Client if he has a standing intolerance, and he says he can only stand for about ten minutes before he has to change his posture. The Examiner asks The Client if sitting is a problem. The Client says he can sit for about an hour, as he has for this exam, and then will start to feel his back pain kick in. The Examiner asks The Client if he watched any movies in the last two years, and The Client says maybe one or two. The Examiner asks The Client if he can drive, and he says yes, he can drive for an hour before he has to stop and rest. The Examiner asks The Client if he can take care of himself, and he says yes. The Examiner asks The Client if he has been involved in any prior accidents, and he says no. The Examiner asks The Client if he has any prior serious injuries or surgeries. The Client says yes, he had ACL surgery on one knee and arthroscopic surgery on his other knee. Dr.

Kircher asks The Client if he has any other medical problems, and he says yes, he has high blood pressure.

2:23 p.m.: The Examiner begins the physical exam by asking The Client to flex, extend, and laterally bend his neck. The Examiner uses a digital inclinometer to measure the range of motion of The Client's neck. Using a reflex hammer, The Examiner tests the reflexes at The Client's elbows and wrists.

The Examiner tests the range of motion of The Client's shoulders by performing a series of push and pull resistance tests with The Client's arms, one at a time. The Examiner asks The Client if he has any scarring on his chest and The Client says he does not think so. The Examiner looks for scarring on The Client's chest and says he cannot see any. The Examiner palpates down The Client's spine and asks him if he feels any pain. The Client says no. The Examiner asks The Client to squeeze his hands together, and then pull while The Examiner tests the reflexes at The Client's knees and ankles, one at a time, using a reflex hammer. The Examiner tests the strength of The Client's thigh muscles by asking him to push his legs up against Dr. [REDACTED] resistance. The Examiner asks The Client to stand on his toes. The Examiner asks The Client to bend forward as far as he can, and measures this range of motion using a digital inclinometer. The Examiner uses the pointed end of the reflex hammer to scrape the bottom of The Client's feet, and asks him he feels it. The Client says yes. The Examiner asks The Client to flex and extend his ankles, one at a time. The Examiner asks The Client to extend his knees, one at a time.

2:32 p.m.: The Examiner says the exam is complete and thanks The Client for coming in. The Examiner asks The Client to complete a post-examination checklist, which he does. The Examiner asks The TTS Client Advocate for a business card, which he provides. The TTS Client Advocate asks the receptionist for a copy of the form The Client completed with the pre and post-examination checklists, which she does. A copy of the completed form can be found at the end of this report. The TTS Client Advocate and The Client exit the exam location.

Personal Observations: The Examiner was a pleasure to work with and made sure The Client was comfortable throughout the exam. With that being said however, The Examiner attempted to get The Client to discuss liability in the accident twice with questions such as, "So you did not see that truck until last minute?" I advised The Client before the exam that he is not to discuss anything about who was at fault in the accident and he wisely ignored the doctor's questions. After The Client ignored Dr. [REDACTED] question, The Examiner simply continued with the exam without re-asking The Client the question.