

Claims correspondence

Law Offices of North Shore Defense

Re: Rivera, Jordan — Claim SYN-2024-001

Dear Qualified Medical Evaluator:

Please address the following issues from the enclosed fictional packet.

1. Are the medical findings consistent with the February 1, 2024 lifting incident?
2. Please comment on whether the March 28, 2024 MRI supports left L5 contact.
3. State whether the records document any prior lumbar injury.

Very truly yours,

Progress note

June 10, 2024 — follow-up after epidural injection.

He is unable to walk more than two blocks before the pain.

She sleeps with difficulty and wakes at night.

He dresses himself without difficulty.

Driving is limited to 20 minutes.

Modified duty continues: no lifting over 10 pounds.

PROGRESS NOTE

Sunrise Spine & Pain Clinic

Progress Note

Date: 03/12/2024

Patient: TESTCASE, ALEX

DOB: 01/01/1980

Chief Complaint: Low back pain radiating to left leg after lifting incident at work on 02/01/2024.

HPI: 44-year-old warehouse worker reports persistent lumbar pain, rated 7/10, worse with prolonged standing. Denies prior back injury.

Plan: MRI lumbar spine ordered. Continue NSAIDs. Modified duty, no lifting over 10 pounds.

Electronically signed: R. Nguyen, M.D.

LEX000101

IMAGING REPORT

Bayview Imaging Center - Radiology Report

Exam: MRI LUMBAR SPINE WITHOUT CONTRAST Date: 03/28/2024

Patient: TESTCASE, ALEX

Clinical history: Low back pain with left lower extremity radiculopathy.

Findings: L4-L5 disc protrusion contacting the left L5 nerve root.

Mild degenerative disc disease at L5-S1.

Impression: 1. Left paracentral disc protrusion at L4-L5.

2. Mild lumbar spondylosis.

Radiologist: S. Patel, M.D.

LEX000102

PROCEDURE NOTE

Sunrise Spine & Pain Clinic - Procedure Note

Procedure: LEFT L4-L5 TRANSFORAMINAL EPIDURAL STEROID INJECTION

Date: 05/06/2024

Patient: TESTCASE, ALEX

Indication: L4-L5 disc protrusion with left L5 radiculopathy,
failed conservative management.

The patient tolerated the procedure well. No complications.

Post-procedure pain reduced from 7/10 to 3/10.

Performing physician: R. Nguyen, M.D.

LEX000103

PROGRESS NOTE

Sunrise Spine & Pain Clinic

Progress Note

Date: 06/10/2024

Patient: TESTCASE, ALEX

Interval history: Reports approximately 50% relief following the May 6, 2024 epidural steroid injection. Pain now 4/10.

Work status: Continued modified duty. Re-evaluate in 6 weeks.

Electronically signed: R. Nguyen, M.D.

LEX000104

IMAGING REPORT

Bayview Imaging Center - Radiology Report

Exam: MRI LUMBAR SPINE WITHOUT CONTRAST Date: 03/28/2024

Patient: TESTCASE, ALEX

Clinical history: Low back pain with left lower extremity radiculopathy.

Findings: L4-L5 disc protrusion contacting the left L5 nerve root.

Mild degenerative disc disease at L5-S1.

Impression: 1. Left paracentral disc protrusion at L4-L5.

2. Mild lumbar spondylosis.

Radiologist: S. Patel, M.D.

LEX000102