

Adheya's Sample Demand Summary

The names and information has been changed.

John Jones Law Firm

1234 Main St
Irvine CA 92614

Phone: (714) 555-5555

Facsimile: (714) 555-5444

March 10, 2010

**Attention: Smith
X INSURANCE COMPANY
P.O. Box 11111
Wilson, TX 78989**

RE: Our Client:	Renea Doe
Date of Loss:	06/07/2005
Claim No. :	867212-7101-29-8228
Your insured:	Jon. Doe
Defendant:	Dana Blake

Dear Ms. Smith:

This letter is a formal Uninsured Motorist demand for compensation on behalf of our client, Renea Doe, who was injured by the negligence of the above-named defendant in an automobile accident on August 22, 2005.

FACTS

On or about August 22, 2005 at or around 1:30 p.m., Mrs. Renea Doe was involved in an automobile accident with defendant, Deborah Huff. At the time of the accident, Mrs. Doe was a passenger in a 1994 Toyota Camry bearing California license plate number X1234, driven by John Doe, traveling eastbound in the #1 lane of Foothill Blvd. in the city of Upland, California. Defendant Dana Blake was the operator of a 1999 Toyota Celica bearing California license plate number 52LO52, traveling westbound in the center median turn pocket of Hilll blvd. The accident occurred when Ms. Blake failed to yield the right-of-way to oncoming traffic and made a left turn in front of the vehicle Mrs. Doe was in, causing two parties' vehicles to collide into each other. Due to the extensive property damage to the 1998 Toyota Camry, the vehicle was deemed a total loss.

Negligence in this matter is beyond reasonable dispute in that the facts clearly evident that Defendant Dana Blake carelessly, negligently and recklessly operated her vehicle in violation of California Vehicle Code 21801 (a), which states, "The driver of a vehicle intending to turn to the left or to complete a U-turn upon a highway, or to turn left into public or private property, or an alley, shall yield the right-of-way to all vehicles approaching from the opposite direction which are close enough to constitute a hazard at any time during the turning movement, and shall continue to yield the right-of-way to the approaching vehicles until the left turn or U-turn can be made with reasonable safety."

BODILY INJURY

As a result of Defendant Dana Blake's negligence, Mrs. Renea Doe sustained significant injuries. Immediately after the accident, Mrs. Doe sought treatment from the following facilities:

Provider Name: American Medical Response
Address: 20101 Hamilton Ave., Suite 300, Torrance, CA 90502
Initial Examination: August 7, 2006
Final Examination: August 7, 2006

Diagnosis:

1. Neck pain
 2. C/O sternum
 3. Pain on palpation
 4. Cervical spine pain
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Provider Name: Kaiser Permanente Medical Center
Address: 9961 Sierra Avenue, Fontana, CA 92335
1025 W. I Street, Ontario, CA 91762
Initial Examination: August 9, 2006
Final Examination: November 25, 2006

Diagnosis:

1. Colick, intermittent abdominal pain
 2. Chest wall injury—moderate tenderness located in the anterior chest
 3. Extremities—bony tenderness present
 4. Left hip with mild tenderness located in the anterior & lateral aspect of the hip
 5. Single contusion to the chest & abdomen, hypertension, and a 5 mm low density in the lower pole of the right kidney—too small to characterize and may statistically likely represent a tiny renal cyst.
 6. Chest tenderness along sternum
 7. Right hip pain, abdomen swelling and ecchymosis lower pelvis area
 8. Contusion of chest and abdomen
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Provider Name: RP Byrne Chiropractic
Address: 481-B N. Central Avenue, Upland, CA 91786
Initial Examination: August 9, 2006
Final Examination: January 28, 2010

Diagnosis:

1. Neck pain
2. Chest pain
3. Backache
4. Arm/elbow pain
5. Right knee achiness
6. Constant rib cage (dull pain/ache) and sternum pain
7. C8 nerve hypertension regularly—on and off,
8. Constant hand & left arm achy pain
9. Right leg pain radiated to ankle
10. Right foot and big toe pain
11. Spasms of muscles by exertion
12. Shoulder and right thumb pain
13. Bruises on right medial
14. Difficulty sleeping
15. Weakness in right arm and hand
16. Left buttock pain radiated down to leg and knee
17. Some pain in anterior rib cage, right small toe and lateral side of foot numbered periodically
18. Right pinky finger--some numbness
19. Ultrasound of spine showed inflammation in soft tissue structures of spine
20. Nerves in neck burned.

Chest, knees & hip x-rays were taken. Mrs. Doe was prescribed with Codeine Tylenols Rx & Ibuprofens to relieve pain. Light exercises were recommended, as well as nerve block. Mrs. Doe was referred to see pain management for lumbar to calm down nerve irritation. Mrs. Doe has had five lumbar spine injections. A cervical spine injection was also suggested. T-Ball exercises were recommended at home twice a day for buttock and sacrum. Botox to lumbar—1st time—she was able to sit longer with a bit of relief.

Provider Name: Big Basin Chiropractic
Address: 14471 Big Basin Way, Ste. C, Saratoga, CA 95070-6093
Initial Examination: June 3, 2007
Final Examination: November 18, 2009

Diagnosis:

1. Upper back pain
2. Neck pain
3. Pain in both Thenar Eminences (pain interferes with sleeping, working & daily routine)
4. Right occipital sore
5. Low back pain radiating down to her hips, right thigh, knees, right calf and right foot—
toe numbness.
6. Neck and scalp following a radiofrequency rhizotomy.
7. Pain in C2-3 areas bilaterally radiating down into shoulders.

Provider Name: Team Physical Therapy
Address: 7945 Haven Avenue, Rancho Cucamonga, CA 91730
Initial Examination: July 25, 2007
Final Examination: March 7, 2008

Diagnosis:

1. Mid back weakness & shoulder pain
2. Low back sprain/strain
3. Neck pain
4. Soreness & pain in right lumbar spine & thoracic spine (cramping pain)
5. Tightness in left leg
6. Pain in hips
7. Pain & soreness in piriformis
8. Random lumbar & thoracic spine spasms
9. Muscle fatigues very quickly
10. Loss of sleep
11. Energy level decreases

Provider Name: Advanced Radiology
Address: 8641 Wilshire Blvd., Beverly Hills, CA 90211
Initial Examination: August 30, 2007
Final Examination: August 30, 2007

Diagnosis:

1. MRI of cervical spine--1 mm protrusion in C5-6. The foramina are open. 1 mm protrusion in C6-C7. The foramina are open.
2. MRI of thoracic spine
3. MRI of the lumbar spine--L3-4 has a 2 mm bulge. The foramina are open.

Provider Name: Brotman Medical Anesthesia Group
Address: P.O. Box 7001, Tarzana, CA 91357-001
Initial Examination: July 23, 2008
Final Examination: October 26, 2009

Procedures:

1. 7/23/08--Cervical spine & cord anesthesia
2. 12/17/08--cervical spine & cord anesthesia--bilateral C2-3
3. 7/20/09--Lumbar spine (L4-5, L5-S1) Anesthesia
4. 10/26/09--Lumbar spine bilateral SI joint rhizotomy anesthesia

Provider Name: Southland Spine & Rehabilitation
Address: 1520 Nutmeg Place, Ste. 110, Costa Mesa, CA 92626
Initial Examination: August 10, 2007
Final Examination: January 23, 2010

Diagnosis:

1. Pain in neck and shoulders radiated to her right arm and affected her ulnar hand. She also experienced back pain radiating down to her right leg. Swelling of abdomen and pain in chest.
2. Aching and stiffness of neck and shoulders associated with headaches and lightheadedness.
3. Weakness in arms and hands
4. Mid to low back pain radiated down her legs to her ankles
5. Tingling and numbness in right leg
6. A mild concussion
7. Strain and sprain of the cervicothoracic spine and associated musculoligamentous structures.
8. Medial and lateral epicondylitis, right elbow
9. Cervical radiculopathy on the right versus ulnar neuropathy.
10. Chronic strain and sprain of the thoracolumbosacral spine and associated musculoligamentous structures.
11. Consider a thoracic and/or lumbar disc or intraspinal injury, with lower extremity radiculopathy.
12. Bilateral sacroiliitis
13. Bilateral sacroiliac joint sprain/strain, right lumbar facet syndrome, and left third occipital nerve headache syndrome.
14. Lumbar facet syndrome
15. Bilateral piriformis syndrome, right greater than left
16. Refractory right sacroiliitis
17. Right thoracic outlet syndrome with associated vascular headaches and right cubital tunnel (double crush).
18. Bilateral occipital nerve headache syndrome—status post bilateral C2-3 medial branch rhizotomy.

MRI studies of cervical spine, lower thoracic spine and lumbar spine were recommended. MRI of the lumbar spine reveals minimal degenerative disc disease L3-4, L4-5. Mrs. Doe was a candidate for radiofrequency ablation with Dr. Mills. Dr. Mills recommended bilateral sacroiliac joint intra-articular steroid injection on the right at L4-5 and L5-S1 low volume medial branch nerve blocks. Mrs. Doe underwent bilateral sacroiliac joint intra-articular arthrogram, bilateral sacroiliac joint intra-articular steroids; L4-5 and L5-S1 intra-articular facet steroid injections with arthrograms. Facet blocks on the left and L4-5 and L5-S1 and left C2-3 were recommended as well.

Mrs. Doe described her neck pain as aching, throbbing pain, aggravated by any activity. She described her thoracic spine pain as pins and needles, throbbing spasm. Mrs. Doe stated that

movement of activity aggravated pain. Lumbar spine pain is aggravated by walking, lifting, bending, and prolonged sitting. Pain radiates to both lower extremities.

Mrs. Doe underwent ultrasound examination of lumbar spine and results revealed bilateral sacroiliac joint sprain/strain, bilateral sacroiliac joint sprain/strain, and bilateral facet joint inflammation L5-S1. She also underwent ultrasound examination on her cervical spine and his cervical spine ultrasound revealed Rhomboid major/trapezius myositis, cervical extensor muscle strain; and sternocleidomastoid muscle strain/myositis. A low volume local anesthetic nerve blocks at the left C2-3 levels for patient's 3rd occipital nerve headache syndrome was also provided.

Electro diagnostic studies revealed possible diagnosis of bilateral C6-7-8 nerve root impingement of a chronic nature as well as right cubital tunnel syndrome. Lower extremity electro diagnostics revealed abnormal bilateral L4-5, L5-S1 nerve root impingement with possible bilateral piriformis syndrome. Right scalene piriformis stretching and release was suggested. Mrs. Doe underwent bilateral piroformis trigger point injection and was sent for CT-Guided local anesthetic diagnostic injections to right anterior and middle scalene. Interscalene injections and Botox CT-directed injections to the scalene muscles were recommended as well.

Provider Name: Access Medical Imaging
Address: 155 N. San Vicente Blvd., Beverly Hills, CA 90211
Initial Examination: July 9, 2009
Final Examination: July 9, 2009

Diagnosis:

1. CT guided injection of the anterior and right medial scalene muscles with lidocaine--without apparent complications.

Provider Name: Aspen Medical Resources
Address: P.O. Box 76001, Anaheim, CA 92809
Service Date: July 8, 2008 and July 22, 2008

Supplies:

1. Medical/treatment equipments

Provider Name: Santa Ana Out Patient Surgery Center
Address: 1450 E. 17th Street, Ste. 1, Santa Ana, CA 91705
Initial Examination: May 13, 2008
Final Examination: December 21, 2009

Diagnosis (5/12/08)

1. Bilateral sacroiliitis
2. Right lumbar facet syndrome
3. Severe axial spine pain with evidence of facet/sacroiliac dysfunction.

Procedure:

1. Bilateral sacroiliac joint intra-articular arthrogram
2. Bilateral sacroiliac joint intra-articular steroids L4-L5 & L5-S1 intra-articular facet steroid injections with arthrograms.

Diagnosis (7/7/08):

1. Bilateral sacroiliitis
2. Bilateral lumbar facet syndrome
3. Left third occipital nerve headache.

Procedure:

1. Bilateral sacroiliac joint intraarticular arteriogram
2. Bilateral sacroiliac joint intraarticular steroid
3. Bilateral L4-5 & L5 distal branch & motor branch nerve blocks with low volume anesthetic
4. Left third occipital nerve block.
5. Occipital nerve headache syndrome C2-3 facet joint injury.

Diagnosis (10/27/08):

1. Bilateral sacroiliitis
2. Bilateral lumbar facet syndrome

Procedure:

1. Bilateral L4-5 & L5-S1 radiofrequency rhizotomy
2. Bilateral sacroiliac joint intraarticular frequency strip lesioning
3. Bilateral S2-S3 radiofrequency neural ablation.

Diagnosis (7/20/09):

1. Bilateral lumbar facet syndrome

Procedure:

1. Repeat bilateral L4-5 & L5-S1 medial branch radiofrequency rhizotomies.

Diagnosis (9/28/09):

1. Bilateral piriformis syndrome.

Procedure:

Bilateral piriformis Botox chemo enervation under fluoroscopy. Patient suffered from chronic pelvic pain with evidence of piriformis syndrome. She responded favorably to piriformis trigger point injection.

Diagnosis (10/26/09):

1. Bilateral sacroiliitis

Procedure:

1. Bilateral sacroiliac joint strip radiofrequency lesioning.

Diagnosis (12/21/09):

1. Left thoracic outlet syndrome

Procedure:

1. Left interscalene nerve block
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Provider Name: Wilshire SurgiCenter
Address: 8641 Wilshire Blvd., Ste. 201, Beverly Hills, CA 90211
Initial Examination: July 23, 2008
Final Examination: December 17, 2008

Diagnosis (7/23/08):

1. Right lumbar facet syndrome
2. Right sacroiliitiss
3. Right third occipital nerve headache syndrome

Procedure:

1. Right L4-5 & L5-S1 medial branch radiofrequency rhizotomy
2. Bipolar strip radiofrequency lesioning
3. Right sacroiliac joint
4. Right third occipital nerve block (C2-3 medial branch).

Diagnosis (12/17/08):

1. Bilateral third occipital nerve headache syndrome.

Procedure:

1. Bilateral C2-3 medial branch radiofrequency rhizotomy with multiple lesioning bilaterally
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Provider Name: MDI Medical Distributors, Inc.
Address: 24 Hammond, Ste. C, Irvine, CA 92618
Service Date: December 8, 2008

Supplies:

1. Vector Interferential unit
 2. Electrical Stimulation supplies for 2 months
 3. Quick draw Rap Back Brace
 4. Right Sacroiliac Belt Support
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Provider Name: Pat Meredith, M.D.
Address: 3700 E. Inland Empire Blvd. Suite 350, Ontario, CA 91764
Initial Examination: January 22, 2009
Final Examination: March 5, 2009

Diagnosis:

1. Abnormal EMG of the lower limbs and lumbosacral paraspinal muscles with findings upporting a diagnosis of bilateral L4, L5 and S1 nerve root impingement, chronic, mild at the bilateral L4 levels, and moderately chronic at the bilateral L5 and S1 levels.
 2. Abnormal nerve conduction studies supporting the diagnosis stated in #1
 3. Abnormal EMG of the upper limbs and cervical paraspinal muscles with findings supporting a diagnosis of bilateral C6 and C7 as well as possibly left C8 nerve root impingement, chronic, mild.
 4. Abnormal nerve conduction studies indicating right cubital tunnel syndrome, moderate to severe grade, with moderately chronic denervation noted in the right first dorsal interosseous muscle. Surgical release is suggested. Utilizing the inching technique, a definitive drop in conduction velocity was noted within 2.5 cm distal and in particular 2.5 cm proximal to the medial epicondyle of the elbow.
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Provider Name: Lifescape Imaging Center/MDIA
Address: 20750 Ventura Blvd., Suite 106, Woodland Hills, CA 91364
Initial Examination: January 23, 2009
Final Examination: January 23, 2009

Diagnosis:

1. L1-2: Mild disk desiccation without narrowing is seen.
 2. L2-3: Same as L1-2
 3. L3-4: Disk desiccation without narrowing is seen.
 4. Disk desiccation with anterolateral osteophytes noted at the L3-L4 level
 5. Mild to moderate degenerative changes seen involving L3-4, L4-5 & L5-S1 apophyseal joints bilaterally.
 6. Straightening of the normal lumbar lordosis.
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Provider Name: Cal Hand Surg & Orthopedic Spec Med. Clinic
Address: 8641 Wilshire Blvd., #205, Beverly Hills, CA 90211
Service Date: July 23, 2008

Diagnosis:

1. Right lumbar fact syndrome
2. Right sacroiliitis
3. Right third occipital nerve headache syndrome.

Procedure:

1. Right L4-5 & L5-S1 medial branch radiofrequency rhizotomy
2. Bipolar strip radiofrequency lesioning right sacroiliac joint
3. Right third occipital nerve block (C2-3 medial branch).

Provider Name: 17th Street Orthop Spec Med Clinic
 Address: 1450 E. 17th St., Santa Ana, CA 92705
 Service Date: June 8, 2009 & July 20, 2009

Diagnosis:

1. Symptomatic right thoracic outlet syndrome
2. Refractory sacroiliitis
3. Bilateral Lumbar facet syndrome
4. Bilateral occipital nerve headaches—status post bilateral C2-3 medial branch rhizotomy

Procedure:

1. Bilateral piriformis trigger point injection
2. Repeat bilateral L4-5 and L5-S1 medial branch radiofrequency rhizotomies

As a result of the injuries arising out of the above-referenced automobile accident, Mrs. Doe has incurred a significant amount of medical expenses. Please find Mrs. Doe’s medical expenses as follows:

TOTAL MEDICAL SPECIALS

American Medical Response.....	\$ 1,066.89
Kaiser Permanente Hospital.....	\$ 5,093.00
RP Byrne Chiropractic.....	\$ 14,749.00
Big Basin Chiropractic.....	\$ 700.00
Team Physical Therapy, Inc.....	\$ 5,584.00
Advanced Radiology.....	\$ 8,364.00
Brotman Medical Anesthesia Group	
Michael Kelly, M.D., Phillip Jorge, M.D. & Casper Young, D.O.....	\$ 8,275.00
Southland Spine & Rehab – Lawrence Miller, M.D. & Guy Gitts, M.D.....	\$ 20,695.60
Access Medical Imaging.....	\$ 4,050.00
Aspen Medical Resources.....	\$ 6,615.00
Santa Ana Outpatient Surgery/Pacific American Medical Service, Inc./	
Marc Gianzero, M.D.....	\$ 52,862.00
Wilshire Surgicenter, Inc./Pacific American Medical Service, Inc.....	\$ 23,417.00
MDI Medical Distributors, Inc.....	\$ 3,229.00
Patricia Meredith—Medical Office.....	\$ 3,598.24
Lifescape Imaging Center – Corona/Dot Com Medical, A Medical Corp.....	\$ 1,695.00
Cal Hand Surg & Orthop Spec Medical Clinic, Inc.....	\$ 903.38
Seventeenth Street Ortho Spec Medical Clinic, Inc.....	\$ 1,380.76

CURRENT TOTAL.....\$162,402.87

FUTURE MEDICAL COSTS.....IN PROGRESS
(Please note that future medical costs are for ongoing pain consultations, pain management, ongoing treatments, and repeat facet rhizotomies as recommended by Dr. Guy Gotts, M.D. in his final report)

OUT-OF-POCKET EXPENSES

Medications.....\$ 174.50

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CONCLUSIONS

Given the above and full consideration of all losses incurred (including any and all present and future treatment expenses), we hereby make an uninsured motorist policy limits demand of \$500,000.00 upon you to resolve Mrs. Renea Doe's bodily injury claim.

We would appreciate your review of the enclosed materials and that you contact us at your earliest convenience to discuss settling this case without the necessity of litigation, additional costs, and attorneys' fees.

Thank you for your attention to this matter, and I will look forward to hearing from you soon.

Very Truly Yours,

John Jones FIRM

John Jones, Esq.

JJ:tt

Enclosures