

Brian D. Solberg, M.D.

Qualified Medical Evaluator

Orthopaedic Traumatology

Pelvic and Acetabular Reconstruction

Joint Replacement

790 Leeward Way • Costa Mesa, California 92627

Phone (949) 333-1586 Fax (888) 838-3749

January 19, 2024

Workers Defenders Anaheim

Natalia Foley, Esq.

751 South Weir Canyon Road, Suite 157

Anaheim, CA 92808

SCIF insured Fresno

Mark Blanco

P.O Box 65005

Fresno, CA 93650

Employee: HANNA, Adel
Employer: California Institution for Men
Occupation: Chief Psychiatrist
DOI: 07/19/2022
Claim No: 06853258
WCAB No: ADJ17173512
DOB: 11/11/1972
Date of Report: 01/19/2024

**PANEL QUALIFIED MEDICAL EXAMINER'S
SUPPLEMENTAL REPORT**

ML-203-95 – This is a Supplemental Medical-Legal Evaluation.

Number of pages of records reviewed in preparation of this report = 1

Subtract 50 pages for MLPRR Units = 0

Dear Parties:

I have received written correspondence from Nicole Graves dated 01/09/2024 requesting, "Please indicate if you have found any evidence of CT exposure injuries for the neck, low back, shoulders, lower extremities, and knees for the period of 12/01/2016 through 12/05/2021 and 11/03/2022 through 12/03/2022."

Records Reviewed: 1 page

By way of reference, I have evaluated this applicant on a single occasion in August 2023. At that time, I provided opinions regarding his neck, shoulders, low back, and bilateral knees. This examination was performed pursuant to a specific injury, 07/19/2022.

Within the record review, there were DWC1 and application for Adjudication of Claim for cumulative trauma injurious exposure, and I did review those particular documents. The applicant's examination was obfuscated due to what I would consider to be multiple internal inconsistencies, which are outlined in the report.

I did provide an impairment rating for his shoulder, knee, and cervical spine. I did not find any evidence of a mechanism of injury, which could explain or, within reasonable medical probability, cause a contribution to his conditions in these body areas. This was outlined in my causation of injury paragraph on page 76 and 77.

The applicant's job duties in this case involved patient care as a psychiatrist as well as administrative duties as a Chief of Staff. He was not doing any repetitive bending, stooping, squatting, pushing, pulling, or overhead reaching. In short, his job duties and physical requirements of his job were no different than what I would consider to be normal activities of daily living.

I would therefore reiterate that there is no evidence of industrial causation either on a specific injury basis or a cumulative trauma basis. I would be happy to reevaluate the applicant at some point in the future to see if I can get a better physical examination. However, absent some other history, I see no basis for industrial causation.

DISCLOSURE

The conclusions and opinions expressed in this report were dictated by me and are mine, based on my personal evaluation of the patient and any records available to me.

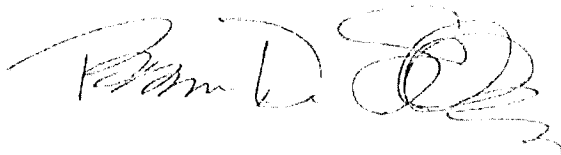
In compliance with Labor Code §4628(b), §4628G), §5703(a)(2) and Regulations 9795, I declare under penalty of perjury that the information in this report and its attachments, if any, is true and correct to the best of my knowledge and belief, except as to information that I have indicated I have received from others. As to

that information, I declare under penalty of perjury that the information accurately describes the information provided to me and, except as noted herein, I believe it to be true.

I further declare under penalty of perjury that I personally performed the evaluation on the date and at the location stated on the face sheet of this report and that, except as stated herein, the evaluation was performed under, and the time spent performing the evaluation was in compliance with, the guidelines, if any, established by the Industrial Medical Council or the administrative director pursuant to §5307.6 of the California Labor Code.

I further declare under penalty of perjury that I have not violated the provisions of California Labor Code §139.3 with regard to the evaluation of this patient or the preparation of this report.

DATED THIS 19TH DAY OF JANUARY 2024, IN LOS ANGELES COUNTY,
CALIFORNIA.

A handwritten signature in black ink, appearing to read "Brian D. Solberg". The signature is stylized with large, flowing loops and a prominent initial "B".

BRIAN D. SOLBERG, M.D.; Q.M.E.; F.A.A.O.S
Diplomate, American Board of Orthopedic Surgery
BS/SS

State of California
DIVISION OF WORKERS' COMPENSATION – MEDICAL UNIT

AME or QME Declaration of Service of Medical - Legal Report (Lab. Code § 4062.3(i))

Case Name: ADEL HANNA v CALIFORNIA INSTITUTION FOR MEN
(employee name) *(claims administrator name, or if none employer)*

Claim No.: 06853258 EAMS or WCAB Case No. (if any): ADJ17173512

I, JESSICA ROGER declare:
(Print Name)

1. I am over the age of 18 and not a party to this action.
2. My business address is: 790 Leeward Way, Costa Mesa, CA 92627
3. On the date shown below, I served the attached original, or a true and correct copy of the original, comprehensive medical-legal report on each person or firm named below, by placing it in a sealed envelope, addressed to the person or firm named below, and by:

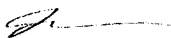
Addressee and Address Shown on Envelope:

Natalia Foley, Esq.
751 S. Weig Canyon Rd., Ste 157
Anaheim, CA 92808

SCIF
Attn: Mark Blanco
PO Box 65005
Fresno, CA 93650

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 01/22/2024



(signature of declarant)

JESSICA ROGER
(print name)