



Please note:

This file may contain sensitive information that we are not legally authorized to redact per *California Business and Professions Code § 22458*.

Additionally, the copy or copies following this page may be difficult to read.

We have done our best to produce a legible copy of any original documents that were not in good condition.

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF WORKERS' COMPENSATION
WORKERS' COMPENSATION APPEALS BOARD

ADEL HANNA
DOB: 3/29/1946
SSN: XXX-XX-XXXX

AKA:
DOB:
SSN:

VS.

CALIFORNIA INSTITUTION FOR MEN , STATE FUND - RIVERSIDE - STATE
CONTRACTS

Case No: ADJ15547702
(IF APPLICATION HAS BEEN FILED, CASE NUMBER
MUST BE INDICATED REGARDLESS OF DATE OF INJURY)

SUBPOENA DUCES TECUM

(When records are mailed, identify them by using the
above Case No. or attaching copy of the subpoena.)

NO PERSONAL APPEARANCE NECESSARY

Please refer to the In Bold summary description
found below to identify the documents requested by
this Subpoena

*The People of the State of California Sends Greetings to: **Custodian Of Records***

LEE, KENNETH W MD

WE COMMAND YOU to appear before A NOTARY PUBLIC

At ONTELLUS, 27450 Ynez Road, Suite 300, Temecula, CA 92591-4680

On the 27th day of March, 2023, at 9 o'clock A. M. to testify in the above-entitled matter and to bring with you and
produce the following described documents:

**ANY AND ALL MEDICAL/TREATMENT RECORDS PERTAINING TO THE CARE, TREATMENT AND EXAMINATION OF CLAIMANT/APPLICANT REGARDLESS
OF TIME PERIOD WHEN SERVICES WERE RENDERED.**

(Do not produce X-rays unless specifically mentioned above.)

For failure to attend as required, you may be deemed guilty of a contempt and liable to pay to the parties aggrieved all losses and amages
sustained thereby and forfeit one hundred dollars in addition thereto.

This subpoena is issued at the request of the person making the declaration on the reverse hereof, or on the copy which is served herewith.

Date 03/13/2023



CC: NATALIA FOLEY ESQ
295923

**WORKERS' COMPENSATION APPEALS BOARD
OF THE STATE OF CALIFORNIA**

Workers Compensation Judge

**Records copied and submitted to the designated
court by ONTELLUS will be deemed as full
compliance with this Subpoena.**

FOR INJURIES OCCURRING ON OR AFTER JANUARY 1,
1990 AND BEFORE, JANUARY 1, 1994:

If no Application for Adjudication of Claim has been filed, a declaration
under penalty of perjury that the Employee's Claim for Workers'
Compensation Benefits (Form DWC-1) has been filed pursuant to Labor
Code Section 5401 must be executed properly.

SEE REVERSE SIDE

[SUBPOENA INVALID WITHOUT DECLARATION]

Order Ref #: 1968775

You may fully comply with this subpoena by mailing the records described (or authenticated copies, Evid Code 1561) to the person and place stated
above within ten (10) days of the date of service of this subpoena.

This subpoena does not apply to any member of the Highway Patrol, Sheriff's Office or City Police Department unless accompanied by notice from
this Board that deposit of witness fee has been made in accordance with Government Code 68097.2 et seq.

DECLARATION FOR SUBPOENA DUCES TECUM

Case No.: ADJ15547702

STATE OF CALIFORNIA, County of RIVERSIDE

The undersigned states:

That he / she is (one of) the representative(s) for the defendant in the action captioned on the reverse hereof.

That LEE, KENNETH W MD has in his / her possession or under his / her control the documents described on the reverse hereof. That said documents are material to the issues involved in the case for the following reason:

To determine present and/or past physical condition; nature, extent and duration of sickness; injury, disability and/or necessity of further treatment.

Declaration for Injuries on or After January 1, 1990 and before January 1, 1994

That an Employee's Claim for Workers' Compensation Benefits (DWC Form 1) has been filed in accordance with Labor Code Section 5401 by the alleged injured worker whose records are sought, or if the worker is deceased, by the dependant(s) of the decedent, and that a true copy of the form filed is attached hereto. (Check Box if applicable and part of declaration below, See instructions on front of subpoena.)

I declare under penalty of perjury that the forgoing is true and correct.

Executed on 03/13/2023, at Temecula, California

[Signature] ONTELLUS, 27450 Ynez Road, #300 (951) 694-5770
Signature Address Telephone

ONTELLUS FOR: STATE FUND - RIVERSIDE - STATE CONTRACTS
THE INSURANCE CARRIER: DIANA MUNOZ
/s/ PO BOX 65005 ATTN: CLAIMS PROCESSING
FRESNO, CA 93650-5005
(888) 782-8338

DECLARATION OF SERVICE

STATE OF CALIFORNIA, County of: _____

I, the undersigned, state that I served the forgoing subpoena by showing the original and delivering a true copy thereof, together with a copy of the Declaration in support thereof, to each of the following named persons , personally, at the date and place set forth opposite each name.

Name of Person Served Date Place

I declare under penalty of perjury that the forgoing is true and correct.

Executed on _____ at POMONA, California

Signature

ADEL HANNA, LEE, KENNETH W MD



Order Ref #: 1968775

DECLARATION FOR SUBPOENA DUCES TECUM

Case No.: ADJ15547702

STATE OF CALIFORNIA, County of RIVERSIDE

The undersigned states:

That he / she is (one of) the representative(s) for the defendant in the action captioned on the reverse hereof.

That LEE, KENNETH W MD has in his / her possession or under his / her control the documents described on the reverse hereof.

That said documents are material to the issues involved in the case for the following reason:

To determine present and/or past physical condition; nature, extent and duration of sickness; injury, disability and/or necessity of further treatment.

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I declare under penalty of perjury that the forgoing is true and correct.

Executed on 03/13/2023 at Temecula, California

Signature: [Handwritten Signature] Address: ONTELLUS, 27450 Ynez Road, #300 Telephone: (951) 694-5770

ONTELLUS FOR: STATE FUND - RIVERSIDE - STATE CONTRACTS
THE INSURANCE CARRIER: DIANA MUNOZ
/S/ PO BOX 65005 ATTN: CLAIMS PROCESSING
FRESNO, CA 93650-5005
(888) 782-8338

DECLARATION OF SERVICE

STATE OF CALIFORNIA, County of:

I, the undersigned, state that I served the forgoing subpoena by showing the original and delivering a true copy thereof, together with a copy of the Declaration in support thereof, to each of the following named persons, personally, at the date and place set forth opposite each name.

Name of Person Served: [Blank] Date: March, 14 2023 Place: 210 WEST BONITA AVE STE 140 ATTN: MEDICAL RECORDS, POMONA, CA 91767

I declare under penalty of perjury that the forgoing is true and correct.

Executed on _____ at POMONA, California

Signature: [Handwritten Signature]

ADEL HANNA, LEE, KENNETH W MD



Order Ref #: 1968775



Pomona Valley Hospital Medical Center
 1798 N Garey Ave
 Pomona, CA 91767-2918

Patient:	Hanna, Adel	Admit Date:	12/13/2019
MRN:	000854595	Disch Date:	12/15/2019
FIN:	532106457	Admitting:	Chang MD,Ronald C
DOB/Age/Gender:	3/29/1946 73 years Male	Attending:	Chang MD,Ronald C
Medical Service:	Telemetry		

Operative Procedural Documentation

Document Type:	Operative Report
Result Status:	Auth (Verified)
Sign Information:	Lee MD,Kenneth (12/15/2019 23:10 PST)

Operative Report
 DATE OF SURGERY: 12/14/2019

SURGEON: Kenneth W Lee MD

PROCEDURE: Colonoscopy with snare polypectomy and biopsy.

PREOPERATIVE DIAGNOSES: Melena and diverticulosis.

Benefits and risks including infection, bleeding, perforation, death and risks of missed lesions including cancer were discussed with the patient. Alternatives including barium enema were offered and all questions were answered. Consent was signed by the patient and placed in the chart.

MEDICATIONS: Fentanyl and Versed intravenously.

FINDINGS: The moderate sedation start time was at 9:54 a.m., the procedure start time was at 10:04 a.m., the procedure finish time was 10:22 a.m. Rectal examination was normal. After the rectal exam, the Olympus pediatric colonoscope was gently inserted into the rectum and advanced carefully to the cecum. The cecum was identified by the appendiceal orifice and ileocecal valve. Preparation was good. Underwater colonoscopy technique was performed using no air insufflation at all. An attempt was made to pass the colonoscope through the lips of the ileocecal valve to evaluate the terminal ileum, but this was not possible. The colonoscope was then slowly withdrawn through the colon and the mucosa was carefully examined in a circumferential manner, taking care to look behind folds. There was a 12-minute withdrawal time and retroflexion showed a skin tag. There was pan diverticulosis extending from the ascending colon down to the sigmoid colon. There was a tattoo in the sigmoid colon with no polyp in the area. There was a 6 mm sessile transverse colon polyp removed with cold snare polypectomy and retrieved and sent for pathologic examination with no bleeding in bottle #2. There was a lipomatous appearance to the ileocecal valve with no mass in the area, status post biopsies with extrusion of fat consistent with lipoma. The biopsies from the ileocecal valve were placed in bottle #1. The colon was then decompressed and the procedure was terminated.

- POSTOPERATIVE DIAGNOSES:
1. A 12-minute withdrawal time.
 2. No blood or bleeding lesions seen in the colon.
 3. Pan diverticulosis.
 4. A 6 mm transverse colon polyp removed as described with no bleeding.
 4. Lipomatous appearance to the ileocecal valve, status post biopsies.

RECOMMENDATIONS: Biopsies will be discussed in the office next week after hospital discharge. Diet can be advanced. He can be discharged home later today if he remains stable. He needs to get more fiber in the diet. The most likely diagnosis would be diverticular bleeding.

Pomona Valley Hospital Medical Center
1798 N Garey Ave
Pomona, CA 91767-2918

Patient: **Hanna, Adel**
MRN: 000854595
FIN: 532106457
DOB/Age/Gender: 3/29/1946 73 years Male
Medical Service: Telemetry

Admit Date: 12/13/2019
Disch Date: 12/15/2019
Admitting: Chang MD,Ronald C
Attending: Chang MD,Ronald C

Operative Procedural Documentation

Kenneth W Lee MD

D: 12/14/2019 10:29:51 Job#: 010589
T: 12/14/2019 12:04:15 Doc#: 2387724

Electronically Signed on 12/15/19 11:10 PM

Lee MD, Kenneth



Pomona Valley Hospital Medical Center

1798 N. Garey Avenue, Pomona, CA 91767
Tel: (909) 865-9800 Fax: (909) 630-7249

DEPARTMENT OF PATHOLOGY

PVCH Clinical Laboratory Medical Group, Inc.
Purnima S. Chaurushiya, M.D., Philip O. Strassle, M.D.

SURGICAL PATHOLOGY REPORT

Patient Name:	Hanna, Adel	Acct #:	532106457	Pathology #:	S19-10368
Med. Rec. #:	854595	Location/Room:	Tele 3 Stn 3/E355	Collected:	12/14/2019
DOB:	3/29/1946 (Age: 73)	Client:	Pomona Valley Hospital	Received:	12/14/2019
Gender:	M	Copy To:	Malhotra MD, Krishan	Reported:	12/16/2019
Physician(s):	Chang MD, Ronald C				Lee MD, Kenneth

FINAL PATHOLOGIC DIAGNOSIS:

A. CECUM VALVE BIOPSY:

Colonic mucosa with focal underlying adipose tissue, could fit with submucosal lipoma, clinical correlation is recommended.

B. TRANSVERSE COLON POLYP:

Tubular adenoma.

Electronically Signed Out12/16/2019 12:10:01
Philip O. Strassle MD

ps/12/16/2019 12:10:01

SPECIMEN(S) SUBMITTED:

A:CECUM VALVE BIOPSY
B:TRANSVERSE COLON BIOPSY POLYP

CLINICAL INFORMATION:

Rectal bleed

GROSS DESCRIPTION:

A. CECUM VALVE BIOPSY: The specimen is received in a formalin container, labeled with the patient's name and identified as cecal valve. Specimen consists of 3 fragments of yellow-tan tissue all measuring 1 mm. The specimen is entirely submitted in one cassette.

B. TRANSVERSE COLON BIOPSY POLYP: The specimen is received in a formalin container, labeled with the patient's name and identified as transverse colon polyp. Specimen consists of fragment of yellow-tan tissue measuring 3 mm. The specimen is entirely submitted in one cassette.

nc/12/15/2019 11:44:14

PC

ICD-10(s): D12.3

CPT CODE(s):

A; 88305
B; 88305

END OF REPORT

