

999 N. Tustin Ave. Suite# 101 Santa Ana, CA 92705

> Phone: (714) 543-5005 Fax: (714) 543-5595

FIENT:

EGER, ALAN

Date of Birth:

09/18/1962

Employer:

Triace Bicycle / Bridgewater International Inc.

Insurance Carrier:

The Hartford

Claim Numbers: Date of Injury:

YMOC43423 CT 03/01/11 - 02/01/15

Evaluating Physician: Brent Pratley, M.D.

WORKER'S COMPENSATION SUPPLEMENTAL REPORT

To Whom It May Concern:

Mr. Alan Eger was declared permanent and stationary on 07/11/16. The Hartford insurance completed an impairment rating review based on our report. I do agree with the revised table 15-3, page 384 DRE lumbar category II calculated at 8% WPI.

In regards to bilateral knees, we requested x-rays which were approved and taken at our facility on 10/19/16. Left and right knee exams indicated mild knee effusion. There is no atrophy therefore there can be no rating for the torn lateral meniscus if there is indeed one. Table 18-4 indicates 3% whole person disability. 1.5% for the right knee and 1.5% for the left knee.

REASONS FOR OPINIONS:

I derived at the above opinions from the oral history as related by the patient, review of the available medical records/diagnostic testing and examination findings.

"I declare under penalty of perjury that the information contained in this report and its attachments, if any, are true & correct to the best of my knowledge and belief, except as to information that I have indicated I received from others. As to the information, I declare under penalty of perjury that the information accurately describes the information provided to me and except as noted herein, that I believe to be true. I have not violated Labor Code Sec. 139.3 and the contents of the report and bill are true and correct to the best of my knowledge. This statement is made under penalty of perjury". Should you have any additional questions or require any additional information, please do not hesitate to contact me.

1

A DAMONO

Signed in Orange County by:

Doctor's Signature:

| Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: | Doctor's Signature: |

999 N. Tustin Ave., Suite 101 Santa Ana, CA 92705 Phone: (714) 543-5005

Fax: (714) 543-5595

Confidential Fax

To: Law Offices of William Green Attention: Natalie

From: First Hope Medical Clinic Inc.

Fax: 714-282-9065

Pages: 3 including cover letter

Phone: 714-282-9020 Date: 12/05/2016

Re: Eger, Alan

(Urgent) For Review

Please Comment

(Please Reply)

Please Recycle

Notice: the document being faxed hereby may contain PHI (Protected Health Information) that is confidential and may be subject to HIPPAA regulations. It is intended for the immediate confidential delivery to the person to whom it is addressed. If you are not the intended recipient, this is notice to you that distribution, dissemination or copying of this document is prohibited. If this fax was received in error, please call the sender promptly. No waiver of any rights or privileges is intended by this transmission.

Comments:

Dear Natalie,

Per our conversation this morning, I am forwarding a copy of Mr. Eger's supplemental report dated 10/28/16.

If you have any questions please call upon me.

Best Regards,

Nubia R.