

Department of Industrial Relations  
DIVISION OF WORKERS' COMPENSATION  
DISABILITY EVALUATION UNIT  
464 West 4th Street, Suite 239  
San Bernardino, Ca 92401  
909/383-4522

STATE OF CALIFORNIA  
GAVIN NEWSOM, Governor

CONSULTATIVE RATING DETERMINATION  
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Alberto Hernandez  
DEU File No: J58501  
Occupation : ORDER PACKER  
EAMS Case No: DEU12946944  
Employee Representative:

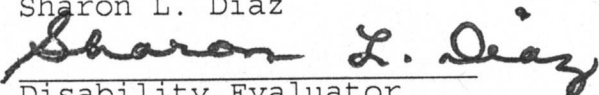
WCAB #.....:  
Age at DOI: 55  
Employer Representative:

Doctor:QME) J. AKMAKJIAN Rpt Dt:2/13/2020

CERVICAL - DIAGNOSIS-RELATED ESTIMATE (DRE)  
20% (15.01.01.00 - 8 - [5]11 - 460H - 14 - 17) 3  
LUMBAR - DIAGNOSIS-RELATED ESTIMATE  
15% (15.03.01.00 - 8 - [5]11 - 460H - 14 - 17) 3  
RIGHT-ARM - PERIPHERAL NEUROPATHY - ENTRAPMENT/COMPRESSION - CARPAL TUNNEL  
20% (16.01.02.02 - 6 - [4]8 - 460G - 9 - 11) 2  
3 C 3 C 2 = 8  
AFTER APPORTIONMENT, IF ANY

DUE TO 11/15/2019 DOI

Sharon L. Diaz



Disability Evaluator  
DEU Form 230 (Rev 1-91) M67913

July 13, 2020

\_\_\_\_\_  
Date

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Alberto Hernandez  
DEU File No: J58387  
Occupation : LOADER  
EAMS Case No: DEU11396739

WCAB #.....: ADJ CT  
Age at DOI: 53

Employee Representative:

Employer Representative:

Doctor:QME) J. AKMAKJIAN Rpt Dt:2/13/2020

CERVICAL - DIAGNOSIS-RELATED ESTIMATE (DRE)

80% (15.01.01.00 - 8 - [5]11 - 460H - 14 - 17) 14

LUMBAR - DIAGNOSIS-RELATED ESTIMATE

70% (15.03.01.00 - 8 - [5]11 - 460H - 14 - 17) 12

RIGHT-ARM - PERIPHERAL NEUROPATHY - ENTRAPMENT/COMPRESSION - CARPAL TUNNEL

80% (16.01.02.02 - 6 - [4]8 - 460G - 9 - 11) 9

14 C 12 C 9 = 31

AFTER APPORTIONMENT, IF ANY

DUE TO CT 12/1/08- 7/16/18 DOI

Sharon L. Diaz

*Sharon L. Diaz*

July 13, 2020

Disability Evaluator

DEU Form 230 (Rev 1-91)

M67911

Date