



**Frank Guellich, M.D.**  
**American Board of Orthopedic Surgery**  
**Hand Surgical Specialist**

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June 24, 2023

Ms. Natalia Foley, Attorney-at-Law  
Workers Defenders Law Group  
751 South Weir Canyon Road, Suite 157-455  
Anaheim, CA 92808

Workers Compensation Appeals Board  
1065 North Link, Suite 170  
Anaheim, CA 92806

Mr. Arthur Daniel Monroy, Claims Adjuster  
Disneyland Resort  
P.O. Box 3909  
Anaheim, CA 92803

**SUPPLEMENTAL REPORT**

**RE:** SHAH, BHARGAV  
**Case #:** 22054581  
**DOB:** May 1, 1956  
**Date of Injury:** July 20, 2022; CT 10/21/20 – 10/21/22; July 3, 2018  
**Employer:** Disneyland Resort  
**WCAB Case #:** ADJ16483391; ADJ16860757; ADJ15867699  
**Claim #:** DLRW2022095173; DLRW2022096551; DLRW2018083560

To Whom It May Concern:

Under penalty of perjury, this report is submitted pursuant to 8 Cal Code of Regulations Section 9795 (b) and (c) as an **ML-203 -95**, a Qualified Supplemental Medical-Legal Evaluation.

Total pages of records received and reviewed, **21**. Declaration(s) enclosed at the end of report.

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My prior evaluation of April 10, 2023 is reviewed.

The Employer's Report of Occupational Injury is not available.

The Workers' Compensation Claim, July 3, 2018, shows back pain and shoulders.

**ADJs:**

1. 15867699, details are not available.
2. 16860757, details are not available.
3. 16483391, details are not available.

**WORK HISTORY:**

He worked for Disneyland in California from June 2012 to April 2023.

Body parts included cervical spine, bilateral shoulders, lumbosacral spine, and bilateral knees.

At this point, we still need an MRI of bilateral shoulders plus contrast.

**CERVICAL SPINE:**

April 10, 2023.

**Current Complaints:**

Intermittent pain radiating to the left upper extremity.

**Physical Examination:**

Using a digital inclinometer, flexion 47 degrees, extension 55 degrees, bending 37 degrees.

Motor power in the upper extremities is 5/5.

Sensation to touch is 1+ in the upper extremities.

There is a 7 cm anterior neck scar.



The reflexes in the upper extremities, biceps, brachioradialis, and triceps are 1+. There is no atrophy in the upper extremities.

**Diagnostic Studies:**

MRI of the cervical spine, no contrast, Tesla 1.5, April 19, 2023:

- a. C4-5 level, moderate left neural foraminal narrowing.
- b. C5-6, mild spinal canal stenosis.
- c. C6-7, moderate bilateral neural foraminal narrowing.

EMG and nerve conduction of the upper extremities, April 18, 2023, is normal.

**Permanent and Stationary:**

June 24, 2023.

**Future Medical Care:**

No further testing. No surgery is indicated. Pain management is indicated.

**Rating:**

Using Page 392, Table 15.5,

- a. MRI of the cervical spine, April 19, 2023.
- b. Radiculopathy of the upper extremities, DRE II, 8%.

**LUMBAR SPINE:**

**Current Complaints:**

April 10, 2023, has constant pain radiating to the left lower extremity.

**Physical Examination:**

April 10, 2023, digital inclinometer, flexion 55 degrees, extension 27 degrees, and bending 27 degrees.

Motor power in the lower extremities is 5/5.



Sensation to touch is 1+ to the lower extremities. There is no atrophy to the lower extremities.

Knee and ankle reflexes are 1+.

Straight leg raising is negative.

There is no leg length discrepancy.

Diagnostic Studies:

MRI of the lumbosacral spine, 1.5 Tesla, no contrast, April 19, 2023:

- a. L3-4, moderate bilateral foraminal narrowing with a slight indentation of the left L3 nerve root.
- b. L4-5, moderate-to-severe spinal stenosis with a slight indentation of the left L4 nerve root.

EMG and nerve conduction of the lower extremities, April 18, 2023, is normal.

Permanent and Stationary:

June 24, 2023.

Future Medical Care:

No further testing. No surgery is indicated. Pain management is indicated.

Rating:

Using Page 384, Table 15.3,

- a. MRI of the lumbosacral spine, April 19, 2023.
- b. Radiculopathy, DRE II, 8%.

**RIGHT KNEE:**

Current Complaints:

April 10, 2023.



Physical Examination:

April 10, 2023, flexion 120 degrees, extension 0 degrees.

Using Page 537, Table 17.10, there is no disability for the right knee.

Diagnostic Studies:

MRI of the right knee. Findings, no contrast, 1.5 Tesla, April 18, 2023:

- a. Mild tricompartmental narrowing.
- b. 5 mm joint body posterior.

Future Medical Care:

No further testing. No surgery is indicated. Pain management is indicated.

Permanent and Stationary:

June 24, 2023.

**LEFT KNEE:**

April 10, 2023.

Current Complaints:

Intermittent pain.

Physical Examination:

April 10, 2023. Antalgic gait on the left. Flexion 120 degrees, extension 0 degrees.

Using Page 537, Table 17.1, there is no disability.

Using Page 529, Table 17.5, 7% whole person impairment.

Diagnostic Studies:

MRI of the left knee, no contrast, 1.5 Tesla, on April 18, 2023:

- a. Moderate arthritis in femoral condyles and tibial plateau suggestive of early osteoarthritis.
- b. Root avulsion, medial meniscus.

Future Medical Care:

Arthroscopic surgery to the left knee. Postop physical therapy x6.

Permanent and Stationary:

If he declines orthopedic surgery, he is permanent and stationary, June 24, 2023. If he accepts orthopedic surgery, he is not permanent and stationary.


This concludes the Represented Panel Qualified Medical Evaluation Supplemental Report regarding Mr. Bhargav Shah. If you have any questions, please feel free to contact me.

#### **COMPLIANCE DISCLOSURE STATEMENT**

I certify that I reviewed all available medical records in their entirety, and composed and drafted the conclusions of this report. The conclusions and opinions within this report are solely mine. I declare under penalty of perjury that the information contained 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 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, that I believe it to be true. In accordance with Labor Code Section 5703(a) (2), there has not been a violation of Labor Code Section 139.3, and the contents of the report are true and correct to the best of my knowledge. This statement is made under penalty of perjury.

Pursuant to 8 Cal. Code Regs. Section 49.2-49.9, I have complied with the requirement for face-to-face time with the patient in this evaluation. If necessary, I have discussed apportionment in the body of this report. If I have assigned disability caused by factors other than the industrial injury, that level of disability constitutes the apportionment. The ratio of nonindustrial disability, if any, to all described disability represents my best medical judgment of the percentage of disability caused by the industrial injury and the percentage of disability caused by other factors, as defined in Labor Code Section 4663 and 4664.

Sincerely,



Frank Guellich, M.D.

American Board of Orthopedic Surgery  
Hand Surgical Specialist

Date Report Signed: ^

7/15/23 County: ^ San Diego

FG:AMS/rbs:7/10/23



# Declaration Pursuant to Cal. Code Regs., Title 8, § 9793(n)

Injured Worker: **BHARGAV K. SHAH**  
Claims Administrator: **Disney Anaheim**  
Claim #: **DLRW2018083560**  
DOI: **7/3/2018**  
WCAB: **ADJ15867699**

I, DANIEL MONROY, declare:

I am a **SR. CLAIMS EXAMINER** for Disney Anaheim, the claims administrator for the employer, Disneyland Resort, PSI, a party to this action and the provider of documents herein. Pursuant to Cal. Code Regs., Title 8, § 9793(n), I declare as the provider of the documents that we have complied with the provision of Labor Code § 4062.3 before providing the documents to the physician.

I declare that the **total additional page count of the documents provided to Dr. Guelich/QME** is 21 (which includes this declaration).

I declare under penalty of perjury under the law of the State of California that the foregoing statements are true and correct.

Executed on 6/20/2023 , at ANAHEIM, California.

  
DANIEL MONROY  
SR. CLAIM EXAMINER  
DISNEY ANAHEIM/DISNEYLAND RESORT

6/20/2023  
DATE

Dr. GUELICH: LEASE REVIEW THE MRI REPORT AND THE CT REPORTS THAT YOUR EQUESTED IN YOUR REPORT DATED 4/10/23. PLEASE SEND US YOUR SUPPLMENTAL REPORT ONCE YOU REVIEW THE DOCUMENTS.

THANK YOU.



State of California

DIVISION OF WORKERS' COMPENSATION - MEDICAL UNIT

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

Case Name: Bhargav Shah (employee name)

Claims Adjuster: Arthur Daniel Monroy (claims administrator name, or if none employer)

Claim Number: DLRW2022095173 ADJ16483391;ADJ16860757;ADJ15867699

EAMS or WCAB Case No. (if any):

I, Alicia Escobar, declare: (Print Name)

- 1. I am over the age of 18 and not a party to this action.
2. My business address is: 11010 White Rock Road, Suite 120 Rancho Cordova, CA 95670.

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:

- A depositing the sealed envelope with the U. S. Postal Service with the postage fully prepaid.
B placing the sealed envelope for collection and mailing following our ordinary business practices.
C placing the sealed envelope for collection and overnight delivery at an office or a regularly utilized drop box of the overnight delivery carrier.
D placing the sealed envelope for pick up by a professional messenger service.
E personally delivering the sealed envelope to the person or firm named below at the address shown below.

Means of Service: (For each address, enter A-E as appropriate)

Date Served:

Addressee and Address Shown on Envelope:

B
B
B

July 19, 2023
July 19, 2023
July 19, 2023

Arthur Daniel Monroy, Disneyland Resort, PO Box 3909, Anaheim, CA 92803
, Workers Compensation Appeals Board, 1065 N. Link Ste. 170, Anaheim, CA 92806
Natalia Foley, Workers Defenders Law Group, 751 S Weir Canyon Rd STE 157-455 ,
Anaheim, CA 92808

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date: July 19, 2023

[Handwritten signature]

(signature of declarant)

Alicia Escobar

(print name)