

Disability Evaluation Unit  
Division of Workers' Compensation  
4720 LINCOLN BLVD 2ND FLOOR  
MARINA DEL REY, CA 90292-6902  
(310)4823868

State of California  
Gavin Newsom, Governor

CONSULTATIVE RATING DETERMINATION

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Employee: FLOREEN ROOKS  
DEU Case: DEU10825285  
Occupation: THERAPIST

Age at date of injury: 66

FLOREEN ROOKS  
125 N ALLEN AVE UNIT 321  
PASADENA CA 91106

DVEAL FAMILY AND YOUTH  
SERVICES  
855 ORANGE GROVE BLVD  
PASADENA CA 91103

Date of Injury (DOI): 04-16-2016

Default Qualified Medical Evaluator	Koruon Daldalyan, MD	10-22-2020
Default Qualified Medical Evaluator	Marvin Pietruszka, MD	10-22-2020

**BEFORE APPORTIONMENT:**

**HYPERTENSION:**

04.01.00.00 - 29 - [1.4]41 - 110G - 44 - 54 PD

**UPPER URINARY TRACT:**

07.01.00.00 - 14 - [1.4]20 - 110F - 20 - 26 PD

**VERTIGO:**

11.01.02.00 - 4 - [1.4]6 - 110D - 5 - 7 PD

**COGNITIVE IMPAIRMENT:**

13.04.00.00 - 20 - [1.4]28 - 110I - 36 - 45 PD

**VISION:**

13.07.02.00 - 15 - [1.4]21 - 110H - 26 - 33 PD

**TRIGEMINAL NERVE:**

13.07.04.00 - 5 - [1.4]7 - 110I - 11 - 15 PD

**CERVICAL - DRE:**

15.01.01.00 - 5 - [1.4]7 - 110C - 5 - 7 PD

**LUMBAR - DRE:**

15.03.01.00 - 5 - [1.4]7 - 110C - 5 - 7 PD

**LEFT SHOULDER - SYNOVIAL HYPERTROPHY:**

16.02.02.00 - 2 - [1.4]3 - 110E - 3 - 4 PD

**RIGHT SHOULDER - SYNOVIAL HYPERTROPHY:**

16.02.02.00 - 2 - [1.4]3 - 110E - 3 - 4 PD

**LEFT HIP - DBE - TROCHANTERIC BURSITIS:**

17.03.10.04 - 3 - [1.4]4 - 110D - 3 - 4 PD

**RIGHT KNEE - DBE - CRUCIATE/COLLATERAL LIGAMENT - ANALOGY:**

17.05.10.05 - 3 - [1.4]4 - 110D - 3 - 4 PD

**LEFT KNEE - DBE - CRUCIATE/COLLATERAL LIGAMENT - ANALOGY:**

17.05.10.05 - 10 - [1.4]14 - 110D - 11 - 15 PD

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LEFT ANKLE - DBE - LIGAMENT INSTABILITY - ANALOGY:

17.07.10.01 - 6 - [1.4]8 - 110D - 6 - 8 PD

RIGHT FOOT - DBE - AVASCULAR NECROSIS:

17.08.10.06 - 3 - [1.4]4 - 110D - 3 - 4 PD

15 C 8 C 4 = 25 PD (LEFT LE)

4 C 4 = 8 PD (RIGHT LE)

54 C 45 C 33 C 26 C 25 C 15 C 8 C 7 C 7 C 7 C 4 C 4 = 93 FINAL PD

- SLEEP NOT RATED: PER PAGE 308 OF THE AMA GUIDES, ONLY THE MOST SEVERE IMPAIRMENT FROM THE FOUR MAJOR CEREBRAL IMPAIRMENTS (TABLES 13-2 THROUGH 13-8) IS RATED. ACCORDINGLY, COGNITIVE IMPAIRMENT (TABLE 13-6) IS RATED OVER SLEEP IMPAIRMENT (TABLE 13-4) AS IT RATES HIGHER. CLARIFICATION FROM PHYSICIAN MAY ALTER RATING.

Travis Tucker

12-24-2021



\_\_\_\_\_  
Disability Evaluator  
Rating Reference No:3212354

\_\_\_\_\_  
Date

cc: WORKERS DEFENDERS ANAHEIM