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- Minimally Invasive Spine Surgery
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 Certified, American Board of Orthopedic Surgery

Fellow, American Academy of
Orthopedic Surgeons

MNASS

 Member, North American Spine Society



American College of Spine Surgery



 Alumni, Kerlan-Jobe Orthopedic Clinic

5651 SEPULVEDA BLVD., STE 201 SHERMAN OAKS, CA 91411 PH: (818)788-2400 FAX: (818) 788-2453

724 CORPORATE CENTER DRIVE SECOND FLOOR POMONA, CA 91768 PH. [909] 622-6222 FX. [909] 622-6220 AdminSure 3380 Shelby Street Ontario, CA 91764 Attn: Shannon Rocha

Patient Name : Patricia Bush
Date of Service : April 26, 2021
Claim # : 18-138707

Employer : Pomona Valley Hospital Medical Center

Date of Birth : March 10, 1961
Date of Injury : 11/10/2018
File # : 20052853

FOLLOW-UP REPORT AND REQUEST FOR AUTHORIZATION OF A PRIMARY TREATING PHYSICIAN

We reviewed the AME report of Dr. Mouradian under separate cover. We attempted the left knee cortisone injection per Dr. Mouradian's recommendations at the last visit on March 8, 2021. Unfortunately, the patient reports very little benefit. As a result, we will proceed with Dr. Mouradian's recommendations to evaluate for total knee arthroplasty. It was his opinion that if the patient obtain little benefit from the intraarticular injection that a arthroscopy should be avoided. <u>We are therefore making the request for authorization for knee specialist for further evaluation of the left knee arthroplasty.</u>

Physical examination showed spasm, tenderness and guarding in the lumbar spine. Left knee had patellar crepitus on flexion and extension with medial and lateral joint line tenderness. Positive McMurray's tests were noted bilaterally at both the medial and lateral compartments. Left shoulder has healed incision at the site of the surgical intervention impingement and Hawkins signs with range of motion in flexion to abduction to approximately 100 degrees.

Her current medications will be refilled.

Work restrictions will continue per the previous visit. She is on temporary total disability and will return to my attention in six weeks. It

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is our hope to be in possession of authorization for the knee specialist by then.

DIAGNOSIS:

M75.42 Impingement syndrome of left shoulder S43.402D Unspecified sprain of left shoulder joint subsequent encounter M23.239 Derangement of medial meniscus S43.432D Superior glenoid labrum lesion of left shoulder subsequent encounter S43.409D Shoulder Sprain/Strain

We are requesting that all the patient medical records, related or unrelated to this case be sent to our attention for review which will be incorporated in accessing the treatment and medical legal issues.

I declare, under penalty of perjury, that I have not violated the provisions of California Labor Code 139.3 and that the contents of this report and attached billing are true and correct to the best of my knowledge. I also affirm that I have not violated any sections of Labor Code 4628. Please see attached itemized billing with ICD-10 diagnosis code(s). The foregoing declaration is executed on the date of this report and signed by myself in the County of Los Angeles.

To complete this examination I have been assisted, as needed, for taking histories, taking x-rays, assisting with the patient, transcription of reports by some or all of the following personnel Alma Azucar, Natasha Yokum, Carmen Garcia and Emily Shemwell. Sherry Leoni, DC, or Shahrzad Forat, DC, may also have assisted in compiling and editing of this report. If required an interpreter was provided. All of the above individuals are qualified to perform the described activities by reason of individual training or under my direct supervision.

Please be advised that Dr. Haronian has a financial interest in Osteon Surgery Center, Kinetix Surgery Center and Pomona Orthopedics.

Date

April 29, 2021

Nicholas Cascone, P.A.C

Edwin Haronian, M.D.

Certified Diplomate American Board of Orthopedic Surgery

California License #A71385

*Law Offices of Natalia Foley

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> 8306 Wilshire Blvd, #115 Beverly Hills, CA 90211

PROOF OF SERVICE STATE OF CALIFORNIA

I am employed in the County of Los Angeles. I am over the age of 18 and not a party to the within action; my business address is:

5651 SEPULVEDA BLVD., SUITE 201, SHERMAN OAKS, CA 91411

On 5/11/2021 served the foregoing document described as:

EDWIN HARONIAN, M.D. EVALUATION REPORT

Patient Name: Patricia Bush File Number: 20052853 Claim #: 18-138707 DOS: 4/26/2021

On all interested parties in this action by electronic transmission a true copy of this narrative report from 5651 SEPULVEDA BLVD., SUITE 201, SHERMAN OAKS, CA 91411

Addressed as follows:

Shannon Rocha AdminSure 3380 Shelby Street Ontario, CA 91764 Law Offices of Natalia Foley 8306 Wilshire Blvd, #115 Beverly Hills, CA 90211

I declare that I am over the age of 18 years and not a party to this action. I also declare under penalty of perjury that the foregoing is true and correct and that this declaration was executed on 5/11/2021 at

Emily Shemwell

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