

## II. PRIOR MEDICAL CONDITION

At the time of the crash, Ms. Sharma was forty-six (46) years old. Ms. Sharma was a healthy woman. Ms. Sharma was free of any body pain. Ms. Sharma had never sustained injuries like these. Ms. Sharma did not require any form of medical treatment described herein nor did she suffer or experience constant and debilitating pain in her: **(1) Head; (2) Neck; (3) Left shoulder; and (4) Low back.** Previously, she did not suffer from **pain, spasm, and fixations in head, neck, left shoulder, and lumbar spine.**

On **Saturday, October 26, 2018**, upon arrival at the ABC Immediate Care, Ms. Sharma was referred to the emergency department and treated under the directions of the attending physician, Dr. Deepak Singh, PAC. Her chief complaints were: **stiffness in neck and shoulders mainly and some aching in her lower back from whiplash; posterior neck pain constant and aching, 2/10**. Ms. Sharma's physical examination revealed: cervical spine tenderness to palpation over lower cervical spine; right and left paraspinal tenderness and tender over right and left trapezius muscles; mild tenderness right and left lower back. Ms. Sharma underwent x-ray examination of cervical spine, results in the pertinent parts were as follows:

- **X-ray report of cervical spine:** No acute pathology.

After careful review and medical examination, Dr. Singh gave the following diagnoses: **(1) Cervicalgia; (2) Person injured in unspecified vehicle accident, initial encounter (V89.9XXA); and (3) Myalgia, unspecified site (M79.10)**. Upon diagnoses, Dr. Singh recommended the following: (1) Patient stabilized, treated, and discharged home in stable condition; (2) Given **Ketorolac injection** in the emergency department; and (3) Prescribed **Naproxen 500 mg and Cyclobenzaprine 5 mg**.

On **Wednesday, October 31, 2018**, Ms. Sharma visited Bone and Spine Injury Clinics and was attended by Dr. S. Jain, D.C. Her chief complaints were: **(1) Low back pain- 6/10**, aching, spastic, tight, occurs between  $\frac{3}{4}$  the to all of the time awake, and precludes carrying out activities of daily living, aggravated by bending forward and backward; **(2) Neck pain-6/10**, aching, stiff and sore, occurs between  $\frac{3}{4}$  the to all of the time awake, and precludes carrying out activities of daily living, aggravated by twisting to left and right, straining and by moving; and **(3) Headaches-6/10**, aching bilateral temporal headaches, occurs between  $\frac{3}{4}$  the to all of the time awake, and precludes carrying out activities of daily living, aggravated by activity and by stress. Ms. Sharma's initial physical review revealed: cervical and lumbar spine range of motion moderately restricted accompanied with moderate pain; cervical distraction test positive bilaterally, Jackson compression test positive bilaterally, maximum cervical compression test positive bilaterally, shoulder depression test positive bilaterally, Goldthwait's sign present bilaterally, Yeoman's test positive bilaterally, Kemp's test positive for local pain in lumbar spine; neck palpation of the inion (base of the occiput-midline) demonstrated moderate pain, articular fixations, and mild edema; midline structures (spinous process tips and nuchal ligament from C1 through C7) of the paracervical muscles disclosed moderate pain, moderate muscle spasms, and tender trigger points; thoracolumbar midline structures demonstrated moderate pain, articular fixations, and mild muscle spasms; iliolumbar midline structures of the low back demonstrated moderate pain, moderate muscle spasms, and tender trigger points. Ms. Sharma underwent x-ray examination of cervical and lumbar spine, results in the pertinent parts were as follows:

- **X-ray examination of cervical and lumbar spine:** No evidence of fractures, gross osseous pathology, significant anomalies, developmental distortions or pathological calcinosis present. Also, the facet joints appear normal and the joints of Luschka (Uncinate processes) appear intact. There appears to be **slight intervertebral disc space narrowing at L4-L5**. **There is some evidence of foraminal encroachment (narrowing of the vertebral foramen), causing bony impingement of the spinal nerves at L4-L5.**

After careful review and physical examination, Dr. Jain gave the following diagnoses: (1) **Sprain of ligaments of lumbar spine (S33.5XXA)**; (2) **Sprain of ligaments of cervical spine (S13.4XXA)**; (3) **Post-traumatic headaches, unspecified (G44.309)**; (4) **Muscle spasm (M62.83)**; and (5) **Myalgia**. Upon diagnoses, Dr. Jain recommended physical therapy and rehabilitative treatment x3/week for 8 weeks, to include: (1) **Electrical muscle stimulation**; (2) **Intersegmental traction**; and (3) **Chiropractic adjustments**.

On **Friday, November 02, 2018**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain- 7/10**, occurs between 76% all of the time awake; **neck pain-7/10**, occurs between 76% all of the time awake; and **headaches-8/10**, occurs between 76% all of the time awake. Objective complaints were: cervical and lumbar spine range of motion still very restricted; palpation of cervical and lumbar regions of the spine still revealed articular fixations, hypertonic musculature, tenderness and tender trigger points; mild swelling was noted in the cervical region. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Chiropractic adjustments**.

On **Friday, November 09, 2018**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain**-occurs between 76% all of the time awake; **neck pain-8/10**, occurs between 76% all of the time awake; and **headaches-7/10**, occurs between 76% all of the time awake. Objective complaints were: cervical and lumbar spine range of motion still moderately restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, tenderness and myofascial trigger points; mild swelling was noted in the cervical region. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Electrical muscle stimulation**; (2) **Intersegmental traction**; and (3) **Chiropractic adjustments**.

On **Wednesday, November 14, 2018**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-7/10**, occurs between 76-100% of the time awake; **neck pain-8/10**, occurs between 76-100% of the time awake; and **headaches-8/10**, occurs between 76-100% of the time awake. Objective complaints were: cervical and lumbar spine range of motion very restricted; palpation of cervical and lumbar regions of the spine revealed articular fixations, hypertonicity, slight pain, myofascial trigger points; mild swelling was noted in the cervical region. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Electrical muscle stimulation**; (2) **Intersegmental traction**; and (3) **Chiropractic adjustments**.

On **Monday, November 19, 2018**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-7/10**, occurs between 76-100% of the time awake; **neck pain**-occurs between 76-100% of the time awake; and **headaches**- occurs between 51-75% of the time awake. Objective complaints were: cervical and lumbar spine range of motion markedly restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and tender trigger points; mild swelling was noted in the cervical region. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Electrical muscle stimulation**; (2) **Intersegmental traction**; and (3) **Chiropractic adjustments**.

On **Friday, November 30, 2018**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-5/10**, occurs between 51-75% of the time awake; **neck pain-5/10**, occurs between 51-75% of the time awake; and **headaches-7/10**, occurs between 51-75% of the time awake. Objective complaints were: cervical and lumbar spine range of motion very restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and tender trigger points; mild swelling was noted in the cervical region. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Electrical muscle stimulation; (2) Intersegmental traction; and (3) Chiropractic adjustments.**

On **Wednesday, December 12, 2018**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-6/10**, occurs between 51-75% of the time awake; **neck pain-5/10**, occurs between 51-75% of the time awake; and **headaches-5/10**, occurs between 25-50% of the time awake. Objective complaints were: cervical spine range of motion slightly decreased, and lumbar spine range of motion moderately restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, tenderness, and myofascial trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Electrical muscle stimulation; (2) Intersegmental traction; and (3) Chiropractic adjustments.**

On **Thursday, December 20, 2018**, Ms. Sharma visited Dr. Zoe Jahan, M.D., a **Board-Certified Neurosurgeon** with XYZ Neurosurgical Institute, LLC. Her chief complaints were: **(1) Headache-** daily, intermittent headache, located frontally and last 15-20 minutes; **(2) Neck pain-** extends between shoulder blades; **and (3) Low back pain-**located centrally and extends across back. Ms. Sharma's initial physical review revealed: tenderness to palpation at cervical and lumbar paraspinal muscle; pain with lumbar flexion. Ms. Sharma underwent x-ray and MRI of cervical and lumbar spine, results in the pertinent parts were as follows:

- **X-ray report of cervical spine:** Normal.
- **X-ray report of lumbar spine:** Normal.
- **MRI report of cervical spine:** Reversal of cervical lordosis presumably secondary to muscle spasm.
- **MRI report of lumbar spine:** At L2-L3 central disc herniation with indentation of thecal sac, L4-L5 central disc herniation with fragment underneath the posterior longitudinal ligament at the inferior border of L4 vertebral body in midline. Facet arthropathy L3-S1 bilaterally.

After careful review and physical examination, Dr. Jahan gave the following diagnoses: **(1) Other intervertebral disc displacement, lumbar region (M51.26); (2) Other specified dorsopathies, lumbar region (M53.86); (3) Acute post-traumatic headache, not intractable (G44.319); and (4) Strain of muscle, fascia, and tendon at neck level, initial encounter (S16.1XXA).** Upon diagnoses, Dr. Jahan gave the following recommendations: **(1) Referred**

patient to neurology; (2) **Recommended lumbar facet block at L2-L3 and L4-L5 bilaterally;** and (3) **Eventually may need discectomy at L2-L3 and L4-L5 levels.**

On **Tuesday, January 08, 2019**, Ms. Sharma followed up with Dr. Zoe Jahan, M.D at XYZ Neurosurgical Institute, LLC. After careful review and physical examination, Dr. Jahan gave the following diagnosis: (1) **Other specified dorsopathies, lumbar region (M53.86)**. Upon diagnosis, Dr. Jahan performed the following: **Performed lumbar facet injection at L2-L3 and L4-L5 bilaterally, under fluoroscopic guidance.**

On **Friday, January 11, 2019**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-** occurs between 51-75% of the time awake; **neck pain-** occurs between 25-50% of the time awake; and **headaches-5/10**, occurs between 25-50% of the time awake. Objective complaints were: cervical and lumbar spine range of motion mildly restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Electrical muscle stimulation;** (2) **Intersegmental traction;** and (3) **Chiropractic adjustments.**

On **Wednesday, January 23, 2019**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-** occurs between 25-50% of the time awake; **neck pain-**occurs between 25-50% of the time awake; and **headaches-8/10**, occurs between 51-75% of the time awake. Objective complaints were: cervical and lumbar spine range of motion mildly restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Electrical muscle stimulation;** (2) **Intersegmental traction;** and (3) **Chiropractic adjustments.**

On **Wednesday, February 06, 2019**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-** occurs between 25-50% of the time awake; **neck pain-**occurs between 25-50% of the time awake; and **headaches-** occurs between 51-75% of the time awake. Objective complaints were: cervical and lumbar spine range of motion mildly restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Electrical muscle stimulation;** (2) **Intersegmental traction;** and (3) **Chiropractic adjustments.**

On **Monday, February 11, 2019**, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-** occurs between 25-50% of the time awake; **neck pain-**occurs between 25-50% of the time awake; and **headaches-** no longer affecting her. Objective complaints were: cervical and lumbar spine range of motion mildly restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: (1) **Electrical muscle stimulation;** (2) **Intersegmental traction;** and (3) **Chiropractic adjustments.**

On **Friday, February 22, 2019**, following Dr. Jain's recommendations, Ms. Sharma followed up

at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-** occurs between 25-50% of the time awake; **neck pain-**occurs between 25-50% of the time awake. Objective complaints were: cervical and lumbar spine range of motion somewhat restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Electrical muscle stimulation; and (2) Chiropractic adjustments.**

On Wednesday, March 20, 2019, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain- 3/10**, occurs between 25-50% of the time awake; **neck pain-3/10**, occurs between 25-50% of the time awake. Objective complaints were: cervical and lumbar spine range of motion slightly restricted; palpation of cervical and lumbar regions of the spine revealed fixations, hypertonicity, slight pain, and trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Electrical muscle stimulation; and (2) Chiropractic adjustments.**

On Monday, April 01, 2019, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-4/10**, occurs between 25-50% of the time awake; **neck pain-** occurs between 25-50% of the time awake. Objective complaints were: cervical and lumbar spine range of motion mildly restricted; palpation of cervical and lumbar regions of the spine revealed articular fixations, hypertonicity, slight pain, and myofascial trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Electrical muscle stimulation; (2) Intersegmental traction; and (3) Chiropractic adjustments.**

On Monday, April 08, 2019, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-3/10**, occurs between 25-50% of the time awake; **neck pain-2/10**, occurs between 25-50% of the time awake. Objective complaints were: cervical and lumbar spine range of motion slightly restricted; palpation of cervical and lumbar regions of the spine revealed articular fixations, hypertonicity, slight pain, and myofascial trigger points. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Electrical muscle stimulation; and (2) Chiropractic adjustments.**

On Monday, April 15, 2019, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-2/10**, occurs between 25-50% of the time awake; **neck pain-** occurs between 25-50% of the time awake. Objective complaints were: cervical and lumbar spine range of motion somewhat restricted; palpation of cervical and lumbar regions of the spine revealed multiple fixations, hypertonicity, and tenderness. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Electrical muscle stimulation; and (2) Chiropractic adjustments.**

On Monday, April 24, 2019, following Dr. Jain's recommendations, Ms. Sharma followed up at Bone and Spine Injury Clinics. Her chief complaints were: **low back pain-2/10**, occurs less than 25% of the time awake. Objective complaints were: lumbar spine range of motion somewhat restricted; palpation of lumbar regions of the spine revealed articular fixations, hypertonicity, and slight pain. Ms. Sharma underwent the following physical therapy and rehabilitative treatment:

**(1) Electrical muscle stimulation; (2) Intersegmental traction; and (3) Chiropractic adjustments.**

On **Monday, May 03, 2019**, following Dr. Jain's recommendations, Ms. Sharma followed up at **Bone and Spine Injury Clinics**. Her chief complaints were: **low back pain-1/10**, occurs less than 25% of the time awake. Objective complaints were: lumbar spine range of motion slightly restricted; palpation of lumbar regions of the spine revealed multiple fixations, hypertonicity, and tenderness. Ms. Sharma underwent the following physical therapy and rehabilitative treatment: **(1) Intersegmental traction; and (2) Chiropractic adjustments.**

On **Monday, May 24, 2019**, following Dr. Jain's recommendations, Ms. Sharma followed up at **Bone and Spine Injury Clinics**. Her chief complaints were: **low back pain-** ceased to bother. Objective complaints were: cervical and lumbar spine range of motion within normal limits; palpation of lumbar regions of the spine revealed fixations. After careful review and physical examination, Dr. Jain gave the following diagnoses: **(1) Sprain of ligaments of lumbar spine (S33.5XXA); (2) Sprain of ligaments of cervical spine (S13.4XXA); (3) Post-traumatic headaches, unspecified (G44.309); (4) Muscle spasm (M62.83); and (5) Myalgia.** Upon re-evaluation, Dr. Jain gave the following recommendations: **MMI/released from active care.**

Ms. Sharma has shown improvement with the exemplary medical treatment, but still experiences pain and discomfort to her injured areas. Due to the nature and severity of the injuries and present ongoing symptoms and pain, Ms. Sharma can expect to experience future exacerbation of her injuries and future medical treatment in the form of physical therapy sessions, chiropractic care, pain management, epidural steroid injections, pain medications, diagnostic testing, surgical intervention, and post-surgical rehabilitation.