

Chicago Wellness Center
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Chicago, IL 60604
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7/10/2012

Johnny Cochran
Dewey, Cheatem and Howe
123 OJ Drive
Beverly Hills,, CA 90210

RE: Arthur Bach

The patient, Arthur Bach, presented to my office on Tuesday, July 10, 2012, for examination and treatment of injuries he sustained in which occurred on . The following is the final report of my findings and conclusions pertaining to this patient.

INITIAL: PATIENT COMPLAINTS

RIGHT SACROILIAC REGION

The patient's right sacroiliac region was described as sharp, shooting and stiff. Using a scale of 0 to 10, with 0 being the absence of pain and 10 being the worst pain possible, he rated his right sacroiliac region an 8. The patient stated that his right sacroiliac region became worse when he bends, sits, stands up, works out and runs. At the time of the initial evaluation, the patient was able to alleviate his right sacroiliac region when he uses ice, uses NSAIDS and lies on his back with his knees bent.

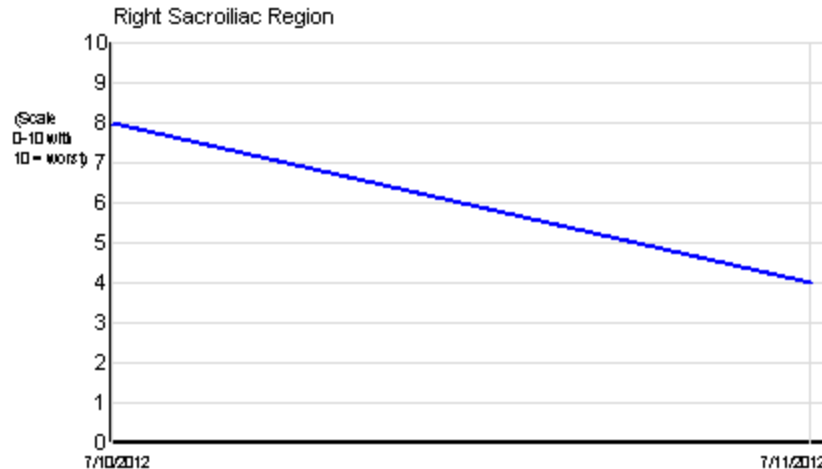
FINAL: PATIENT COMPLAINTS

Upon completion of his treatment, the patient rated his original complaints. Using a scale of 0 to 10 with 0 being nothing and 10 being the original discomfort, the patient rated his original complaints with the following:

RIGHT SACROILIAC REGION = 4

PAIN SCALE PROGRESSION

1: Right Sacroiliac Region



INITIAL: MEDICAL HISTORY

Regarding Arthur's family health history, he does not have an immediate family member with rheumatoid arthritis, heart problems, diabetes, cancer, Lupus, or Amyotrophic Lateral Sclerosis. Therefore, he potentially has a decreased risk for developing those diseases.

The patient informed me that he has had Smoking/Tobacco Use in his past. Also in the past, the patient denies having: Low Back Pain, High Blood Pressure and Dizziness.

The patient informed me that he presently has: Low Back Pain, High Blood Pressure and Dizziness. Arthur denies currently having any of the following: Smoking/Tobacco Use.

When questioned about medications, the patient stated that he is currently taking Hydrochlorothiazide and Allegra. Hydrochlorothiazide is intended to be used for the treatment of hypertension, and it has the potential side effects of dizziness, fatigue, musculoskeletal pain, and nausea. Allegra is intended to be used for the relief of symptoms associated with seasonal allergic rhinitis in adults and children 6 years of age and older, and it has the potential side effects of headaches, upper respiratory infections, back pain, and coughing. Arthur is fully aware of the risks associated with the drugs. When questioned about supplements, the patient stated that he is currently taking so many supplements that additional paperwork is needed to ensure there are no mistakes. The patient has had the following surgical procedures: Tonsillectomy.

When questioned about his work, Arthur responded he sits most of the day, does computer work most of the day, is on the phone most of the day and performs manual labor. During his free time away from work, Arthur swims, lifts weights and plays golf.

INITIAL: EXAMINATION

Tuesday, July 10, 2012

The lumbar exam consisted of: Nachlas, Valsalva and Straight Leg Raise. The pelvic and sacro-iliac exam consisted of: Yeoman's Test, Hibb's Test and Laguerre's Test. The Neurological examination consisted of dermatomal testing and muscle strength testing. The following tests performed were found to be positive:

NACHLAS: The patient had a positive finding during his Nachlas Test. When I approximated his left heel to his left buttock, the patient experienced discomfort in his sacroiliac area. This finding suggests a lumbosacral disorder.

YEOMAN'S TEST: The patient had a positive finding on his right during his Yeoman's Test. During the maneuver, Arthur experienced an increase in his right sacroiliac pain. This result may indicate an injury to the patient's right anterior sacroiliac ligaments.

LAGUERRE'S TEST: During his examination, Arthur had a positive Laguerre's Test on his right. During this test, Arthur experienced pain in his right sacroiliac joint. This finding suggests a pathologic condition that is of an intraarticular origin.

HIBB'S TEST: The patient had a positive Hibb's Test on his right side. Because the maneuver produced pelvic pain, the result suggests sacroiliac disease.

FINAL: EXAMINATION

Tuesday, July 10, 2012

All orthopedic tests were found to be within normal limits.

FINAL: PALPATION AND OBSERVATION FINDINGS

At the time of the patient's final examination, there were no signs of: guarding, antalgic posture, limping, bruising, edema, spasms, trigger points, or visual muscle tightness

XRAY FINDINGS:

Date of Xrays: Tuesday, July 10, 2012

XRAY VIEWS: AP Lumbar and Lateral Lumbar.

POSITIVE FINDINGS: Hyperlordosis of the patient's lumbar spine was observed measuring 80 degrees where as normal lumbar lordosis is between 40 and 60 degrees. There is severe foraminal encroachment at L5/S1. There were 5 phleboliths visualized in the pelvic basin. The patient's right femur measured 9 millimeters shorter than the other side. The patient's right iliac crest measured 9 millimeters less than the opposite side. Using the Gonstead system of calculating the actual leg length difference, it is determined the patient's right side is actually 7 millimeters shorter than the left. Enthesiopathic changes were noted at the left and right ischial tuberosities. This is characterized by the gradual transition of fibrous tissue to calcified cartilage which maybe due to mechanical stress as seen with tight hamstrings. This condition can also be seen in inflammatory connective tissue diseases such as ankylosing, spondylitis, Reiters syndrome and other inflammatory arthropathies.

TREATMENTS RENDERED:

During the patient's office visits, he received the following treatments: interferential, hydrocollator, trigger point therapy, PNF stretching, the Diversified adjusting technique, the SOT adjusting technique, ultrasound and graston.

1. INTERFERENTIAL: Interferential is electrical therapy that is used to create muscle contractions which break up adhesions, increase blood flow, decrease discomfort, and speed up the healing process.
2. HYDROCOLLATOR: Hydrocollator packs create moist heat to penetrate deeper into the tissues.
3. TRIGGER POINT THERAPY: Trigger point therapy involves applying pressure to muscle tissue in order to relieve pain and dysfunction in a general area of the body.
4. PNF STRETCHING: Proprioceptive Nerve Facilitations stretches are used to increase flexibility, range of movement, and improve muscular strength.
5. THE DIVERSIFIED ADJUSTING TECHNIQUE: The Diversified technique is used to deliver adjustments by hand.
6. THE SOT ADJUSTING TECHNIQUE: The SOT adjusting technique utilizes blocks and gravity to make the necessary adjustments to the patient's spine.
7. ULTRASOUND: Ultrasound is used to deliver heat deep into tissues by using ultrasonic waves.
8. GRASTON: Graston is a technique where specific tools are used to break up adhesions in the patient's soft tissue.

CLINICAL IMPRESSION UPON INITIAL PRESENTATION:

- 1) 724.6 Sacroiliac Pain
- 2) 839.42 Sacroiliac Subluxation
- 3) 846.1 Sacroiliac Ligament Sprain
- 4) 728.85 Muscle Spasm

CLINICAL IMPRESSION FINAL DIAGNOSIS:

- 1) 724.6 Sacroiliac Pain
- 2) 839.42 Sacroiliac Subluxation
- 3) 846.1 Sacroiliac Ligament Sprain
- 4) 728.85 Muscle Spasm

FINAL DISCUSSION

Arthur Bach has progressed under the treatment very well. The healing of soft tissue (muscles and ligaments) often takes three to six months to be completely healed. At the time of his discharge, there was every reason to believe that Arthur Bach should have a complete recovery.

Sincerely,

Dr. Michael L. Silbert