

Alan R. Nash
Legal Nurse Consultant
702-695-9434
nash@nashlegalnurse.com

March 1, 2023

Re: Suzie Que
DOB: 02/05/65
Incident Date: 08/09/22

Your client, Suzie Que, was injured in a motor vehicle collision. Your client was a restrained driver that was rear-ended by an unloaded semi-tractor trailer.

You retained me to review the police report, scene photos, medical records and to conduct related medical/legal research. This information will assist you and your medical experts by providing a concise document with relevant information that will identify causative factors for current injuries and aggravating factors of pre-existing injuries.

1. Injuries Caused And/Or Aggravated By The Events Of 08/09/22:
 - a. Sternal fracture
 - b. Left ankle fracture
 - c. Closed head injury
 - d. Mild traumatic brain injury
 - e. Contusions to: Face, hands, upper extremities, knees.
 - f. Abrasions: Face, upper extremities, lower extremities.
 - g. Ecchymosis: "Seat belt sign"
 - h. Aggravation of rheumatoid arthritis
 - i. Headaches
 - j. Chronic pain to left ankle.

2. In My Opinion:

Within the bounds of my education and experience and after careful review of the provided records, it is my opinion the above-mentioned injuries and outcomes were a direct result and/or a substantial factor from the collision on 08/09/22.

I have based this opinion on the mechanism of injury, hospital records, physician notes, and diagnostic testing which clinically correlate the injuries to the event.

This is not to be used as an expert opinion for the court, merely an opinion utilizing my education, training, and experience.

3. Based upon my review of the records pertaining to Ms. Que's past medical history, it is apparent the rheumatoid arthritis was well controlled up to the date of the collision. Since that time, physician records indicate multiple chronic flare-ups of her rheumatoid arthritis condition which has yet to be adequately controlled.

4. Medical records indicate your client presented by ambulance to the emergency department at Best Hospital on 08/09/22 complaining of:
 1. Head pain
 2. Neck pain
 3. Chest pain
 4. Abdominal pain
 5. Left ankle pain

and was subsequently diagnosed with:

1. Multiple contusions
2. Concussion
3. Left ankle fracture
4. Sternal fracture
5. Abrasions

your client underwent the following procedures:

1. CT Scan of head, cervical spine, chest, abdomen, pelvis.
2. Chest x-ray
3. Left ankle x-ray
4. MRI: Brain and cervical spine
5. Blood/urine tests: trauma panel
6. Open reduction and internal fixation: Left ankle

your client is now 247 days post injury and continues to have the following symptoms:

1. Headaches
2. Forgetfulness
3. Dizziness
4. Neck pain
5. Left ankle pain
6. Difficulty with mobility

I have provided the following medical journal articles regarding the prognoses of Ms. Que's injuries:

- a. Long Term Outcomes of Sternal Fractures.
- b. Mild Traumatic Brain Injury: A Comprehensive Analysis
- c. Pain and Mobility After Ankle Fracture and Surgical Repair
- d. Chronic Rheumatoid Arthritis and Quality of Life

Respectfully submitted,

Alan R. Nash
02/02/23

