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300141-040

Khosrow Tabaddor, M.D.

Orthopaedic Surgeon
Qualified Medical Evaluator

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SUPPLEMENTAL REPORT

June 18, 2014

AIMS Acclamation
Po Box 269120
Sacramento, CA 95826

RE:	ANDERSON, TIFFANY
DATE OF EVALUATION:	November 1, 2011
EMPLOYER:	San Joaquin County MVCK
DATE OF INJURY:	June 29, 2011
CLAIM NO:	VE0700184
FILE NO:	86351-7

FEE DISCLOSURE

ML 106-95: This is a Qualified Medical Evaluation Supplemental Report. This represents the summary of total time spent on record review, the preparation of a narrative report and its review & final editing. **Total time spent was 30 mins.**

****This is a medical legal report and does not qualify for a PPO/Network discount.**

Dear Ms. Anderson,

In response to your letter dated 4/24/14, I looked at your file one more time and for your information, I reviewed hundreds of pages of examinations performed by Dr. Donald Rossman, Dr. David Wong, Dr. William Federal, Dr. Gary Murata, Dr. Daniel

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Dietrich, Dr. Wendelin Schaefer, Dr. Peter Gannon, and reports from the physical therapist Daniel Sartori and Jeff Suckow and based on their clinical examinations and treatment recommendations I express my opinion.

I agree that Dr. Eck's reports were not included within the group of treating physicians, however please also note that I could not withhold my opinion after reviewing hundreds of pages of other physicians reports because of two reports of Dr. Jon Eck dated 7/6/11 and 7/18/11 were unavailable. It is very clear that in summary of submitted medical records, I had to point out that Eck's report were also submitted, but were illegible.

At your request I clarify that Dr. Eck's handwritten notes which were illegible was not at any basis to affect my medical opinion. Furthermore your comment about "apparent intellectual incongruity of my response to #4," is very unreasonable and unfair. In my assessment, I did not point to any physician name and I formulated my opinion based upon available medical records.

Thank you for the opportunity to review this additional information. If I may be of additional assistance please correspond with me, in writing, at 8221 N. Fresno St, Fresno, Ca. 93720.


ATTESTATION

I, Khosrow Tabaddor, M.D., personally took the examinee's history, reviewed the medical records, performed the physical examination, and dictated this report. All of the opinions expressed in the report are mine.

I hereby declare under penalty of perjury that I have not violated Labor Code Section 139.3 and have not offered, delivered, received or accepted any rebate, refund, commission, preference, patronage, dividend, discount or other consideration for any referral for examination or evaluation by a physician.

I declare under penalty of perjury that the information contained in this report and its attachments, if any, is true and correct to the best of my knowledge and belief, except as to information that I have indicated I received from others. As to that information, I declare under penalty of perjury that the information accurately describes the information provided to me and, except as noted herein, that I believe it to be true.

Sincerely yours,


Khosrow Tabaddor, M.D.
Orthopaedic Surgeon

Signed this 20 day of June 2014 in LA County in the State of California.

State of California
DIVISION OF WORKERS' COMPENSATION - MEDICAL
AME or QME Declaration of Service of Medical - Legal Report (Lab. Code § 4062.3(i))

Case Name: Tiffany Anderson v AIMS ACCLAMATION INSURANCE MANAGEMENT SE
(employee name) (claims administrator name, or if none employer)

Claim No.: VE0700184 EAMS or WCAB Case No. (if any): _____

I, Nicholas Dennie, declare:

1. I am over the age of 18 and I am not a party to this case.

2. My business address is: 8221 N. Fresno St, Fresno, CA 93720

3. On the date shown below, I served this QME Findings Summary Form with the original, or a true and correct copy of the original, comprehensive medical-legal report, which is attached, on each of the persons or firms named below, by placing it in a sealed envelope, addressed to the person or firm named below, and by:

A depositing the sealed envelope with the U.S. Postal Service with the postage fully prepaid.

☒ placing the sealed envelope for collection and mailing following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the U. S. Postal Service in a sealed envelope with postage fully prepaid.

C placing the sealed envelope for collection and overnight delivery at an office or a regularly utilized drop box of the overnight delivery carrier.

D placing the sealed envelope for pick up by a professional messenger service for service.
(Messenger must return to you a completed declaration of personal service.)

E personally delivering the sealed envelope to the person or firm named below at the address shown below.

Means of service:

(For each addressee,
Enter A-E as appropriate)

Date Served:

Addressee and Address:

<u>B</u>	<u>6/28/2014</u>	<u>Tiffany Anderson, 2 N Avena Ave Lodi CA 95240</u>
<u>B</u>	<u>6/28/2014</u>	<u>AIMS ACCLAMATION INSURANCE MANAGEMENT SERVICES, P.O. Box 269120</u>
<u>B</u>	<u>6/28/2014</u>	<u>L/O Stockwell Harris Woolverton Muehl, 1545 River Park Dr Ste 330 Sacramento CA 9</u>

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 6/28/2014

Nick Dennie

(Signature of Declarant)

Nicholas Dennie

(Print Name)