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CARMEN BLASK
PARALEGAL

October 5, 2009

Michael Dixon
Dameron Occupational Health Services
525 West Acacia Street
Stockton, CA 95203

Re: Tiffany Anderson vs San Joaquin County.- Mosquito and Vector Control District
DOI: 06/19/2008 03/26/2009 07/02/2009
EAMS No: ADJ
WCAB No: Unassigned Unassigned Unassigned
Claim No: VE0700184

Dear Mr. Dixon:

This office represents the above captioned applicant for workers' compensation benefits. Please fill out the attached form as this office is concerned about the applicant's condition.

Certainly, if you have any concerns about the applicant you can call this office and I would be more than happy to discuss the applicant with your office.

As you know, once the applicant is permanent and stationary, the process to settle the applicant's case begins. Please also be aware that an applicant does not have to be permanent and stationary to be considered feasible for vocational rehabilitation. Your opinion that the applicant cannot return to his/her usual and customary work is all that is necessary to begin the vocational rehabilitation process.

Thank you for your time and cooperation. This office looks forward to working with you.

Very truly yours,

RONALD M. STEIN, INC.
Professional Law Corporation



Ronald M. Stein
RMS/elc

Enclosure

cc: Tiffany Kay Anderson

When is the applicant's next date of treatment? _____

Is the applicant permanent and stationary? Yes _____ No _____

When did the applicant become permanent and stationary? _____

Did or are you going to write a permanent and stationary report? _____

Can you send us a copy of same? _____

If the applicant is not permanent and stationary, when do you expect the applicant to become permanent and stationary? _____

Have you reviewed a job description of the applicant's usual and customary position? _____

*Do you expect to return the applicant to his/her usual and customary work?
Yes _____ No _____

If the applicant cannot return to his usual and customary work, is the client entitled to vocational rehabilitation? _____

Is the applicant a Qualified Injured Worker?
Yes _____ No _____

*Please remember that an injured worker can be determined to be a qualified injured worker, even if the applicant is still temporarily disabled (not permanent and stationary).

Doctor's Signature

Date

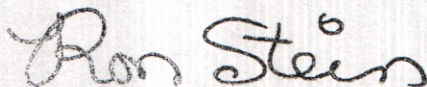
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If the applicant goes to an Agreed Diminished Future Earning Capacity expert (DFEC), you will be notified and will have the opportunity to cross-examine the DFEC expert. I would request the same courtesy.

Your continued cooperation with this office will be greatly appreciated.

Very truly yours,

RONALD M. STEIN, INC.
Professional Law Corporation

A handwritten signature in cursive script that reads "Ron Stein". The signature is written in dark ink and is positioned above a horizontal line.

Ronald M. Stein
RMS/elc

Enclosure

cc: Tiffany Kay Anderson