Aurora Sinai Medical Center

945 North 12th Street
Milwaukee, WI 53233

T (414) 219 2000
F (414) 219 7402
www.AuroraHealthCare.org

MEDICAL RECORD CERTIFICATION

I, Brianna McCloe, RHIA, Custodian of the Hospital Records and Patient Files of Aurora Sinai Medical Center, located at 945 North 12th Street, do hereby certify that the annexed photographic copy of the hospital record of Cassandra White. Date of Birth 8.17.70, covering the period from 11.29.01 to 12.27.01, have been compared with the original on file with Aurora Sinai Medical Center and the annexed copy is a complete, legible, and accurate duplicate of the records requested. The total number of copied pages is 7.

Further, I do hereby certify that said medical records are made by, or from information transmitted by, a person with knowledge, at or near the time of the acts, events, conditions, opinions, or diagnoses recorded, all in the course of regularly conducted hospital activity.

In testimony I have hereunto
Set my hand this
14 Day of April, 2003

Brianna McCloe, RHIA

Brianna McCloe, RHIA
Site Supervisor

Sinai Samaritan Medical Center

Aurora HealthCare®

Milwaukee, Wisconsin

AURORA SINAI MEDICAL CENTER
OUTPATIENT (SE) ADMISSION

SIGNATURE DT: 11/29/01
WHITE, MS CASSANDRA L
2972 N 74 ST #4
APT 3
MILWAUKEE, WI 53210-1016
PHN: 414/302-1078
SSN: 397-92-4769

MRST: SINGLE SEX: F
DOB: 08/17/1970 (31 Y)
RLGN: UNKNOWN
PARISH: UNKNOWN
PASTOR VISIT: NOT KNOWN
RACE: 3 - 2
LANG: ENGLISH

MRU: 41-96-50
CASE: 05037221
ADMT: 11/29/01
13:20

CAMPUS: SSMC-E
LOC: SM1

SVC:
ACCOM:
ADM TYP: ELECTIVE

COMPLAINT: LEFT SHOULDER PAIN

PROCED: NONE INJURY: NOT AN INJ DT: NONE

PHYS: ADMIT: 3057 FLEJSIEROWICZ, MAGDALENA (UPIN: G90492)
ATTND: 3057 FLEJSIEROWICZ, MAGDALENA (UPIN: G90492)
REFER:
PCP: 3057 FLEJSIEROWICZ, MAGDALENA (UPIN: G90492)
ROLE1:

** PAT EMPLOYMENT (FOR OOY) **
OCC: NONE
EMP: NONE

** CONTACT ** (RELATION: SISTER)
WHITE, FELICIA
UNKNOWN
MILWAUKEE, WI 53200
PHN: 414/535-7382
ALT: UNKNOWN
** CONTACT 2 ** (RELATION:)

** GUARANTOR ** (RELATION: SELF)
WHITE, CASSANDRA L
2972 N 74 ST #4
APT 3
MILWAUKEE, WI 53210
PHN: 414/302-1078
ALT: UNKNOWN
PRI. INS: LMH-MEDICAID MANAGED HEALTH
INS NO: 3979247690 SSN: 397-92-4769
HMO CODE: EFFECTIVE DTS: // - //
VERIFIED BY: CARD
TREATMENT AUTHORIZATION:

SEC. INS: NONE

COMMENT: HEATHER

PRINTED BY: CM PRINTED: 11/29/01

AuroraHealthCare® Milwaukee, Wisconsin
Aurora Rehabilitation Center

- [ ] St. Luke's Medical Center
- [x] Sinai Samaritan Medical Center
- [ ] Other
- [ ] West Allis Memorial Hospital
- [ ] Hartford Memorial Hospital
- [ ] The Medical-Surgical Clinic

White, Cassandra Managed Health
OP: 11/29/01 DOB: 8/17/70
H: 302-1078 Heather Teplin, PT
MRU# 41-96-50 Case #05037221
Dr. Flejsierowicz DX: L shldr pain

DAILY PROGRESS NOTE - 4 Session

- [ ] Occupational [x] Physical [ ] Speech [ ] Recreation
- [x] Sports Medicine Institute [ ] Inpatient Rehabilitation Program [ ] Outpatient [ ] Acute

Authorized Visits (Outpatient): 8

Treatment Diagnosis: (L) Shoulder Pain

Precautions:

Missed Appointments:

Initial Eval Date: 11/29/01

	12/10/01 #2	12/13/01 #3	12/17/01 #4	12-20-01 #5
Time (min) / Units / Equipment	30 (1 MAN 1 US)	30 (1 US 1 JX)	30 (1 MAN, 1 THER)	MT² EX 40'
Goals: # 1 Date 11/29/01 Pt to be (I) c̄ Codman's ex to ↑ (L) Shld ROM progressing to LTG #1 Target Date/Visits: 2v Date Met 12/10/01 # 2 Date 11/29/01 Pt to report pain @ 5/10 at its worst c̄ ADL's, progressing to LTG #2 Target Date/Visits: 3v Date Met # 3 Date 11/29/01 Pt able to sleep @ night c̄ pain < 2/10. Target Date/Visits: 4v Date Met # Date Target Date/Visits: Date Met	Session Outcome/Assessment Sleeping - 6-7/10 Codman's "helps alot." O: US to (L) Pec insertion / Ant capsule of GH to ↓ tenderness and pain c̄ ROM. H moles - post glide to GH, gentle distraction Passive ER, Flexion, Abd. Pt taught to perform AAROM c̄ opp. UE. A: Pt reports ↑'d ROM p̄ US + ROM ex's. Demo good understanding c̄ AAROM ex's. Met goal #1.	Session Outcome/Assessment Felt a "pop" and "pop back-in" this AM. US helped alot Pain @ 5/10 now O: US @ 1.5 watts/cm² x 10 min to Ant Shld. STM to Pec insertion Isometrics Flex, Ext, IR, ER Ice x 8 min to Ant Shld. A: Pt performed Isometrics correctly. (MD re-visit p̄ possible subluxation "popping" event.) ??	Session Outcome/Assessment Pt ~15 minutes late for PT today Trouble c̄ sleep - Wakes up 2° to (L) shoulder pain. Pain Ratings Best 0/10 Worst 6/10 → Taking out Garbage → Reaching behind back (bra) → Reaching overhead Arrow Flex (L) 0-110° - Pain (R) 0-180° IR 5/5 bilat - Pain (L) ER (L) 3+/5 - Pain Arrow Flex (Lymne) 0-145° + Subluxation/Relocation test (L)	Session Outcome/Assessment Pt states her arm "popped out of place last evening" Required help to relieve pain + to move arm. instructed pt to contact MD + schedule an appt ASAP. STM to (L) Shld. Pec / upper arm Point tenderness post humeral head and in mid deltoid region. Educated pt in proper sitting posture. Use of towel wedge and scap rehaction c̄ sitting.
Education *Home Exercise Program D/V=Demonstrate/Verbalize NR = Needs Reinforcement	[x] Pt. [ ] Caregiver: Topic: HEP [x] Able to D / V [ ] NR [ ] See Interdisc. Pt. Teach Rec.	[x] Pt. [ ] Caregiver: Topic: Isometrics [x] Able to D / V [ ] NR [ ] See Interdisc. Pt. Teach Rec.	[x] Pt. [ ] Caregiver: Topic: Scap Posture Depression [ ] Able to D / V [x] NR [ ] See Interdisc. Pt. Teach Rec.	[x] Pt. [ ] Caregiver: Topic: posture [x] Able to D / V [ ] NR [ ] See Interdisc. Pt. Teach Rec.
Plan for next session: X-rays (-). MD R/C Jan 3-02	Pt cont PT POC to ↑ use of (L) UE and ↓ pain [signature] SAT CSCS	Pt cont PT to ↑ shld ROM and ↓ pain. [signature] SAT CSCS	Next MD Jan 2 or 3 Plan to advance ROM + strength x 2 wks prior to MD rev.	assess shld stability next visit.
Signature	J. Kummer PT	J. Kummer PT	J. Kummer PT	[signature]

Updated Treatment Plan and goals were discussed and set with the patient and /or significant other. Date: 11/29/01

FAXED 1/2-10/5

SPORTS MEDICINE INSTITUTE
AuroraHealthCare
Milwaukee, Wisconsin

Location:	Tel:	Fax:
☐ Brookfield	(262) 821-4460	821-4464
☒ Downtown	(414) 219-7776	219-7775
☐ Mequon	(262) 243-4161	243-4166
☐ Oconomowoc	(262) 569-2222	569-5898
☐ Whitefish Bay, JCC	(414) 219-7776	219-7775

White, Cassandra Managed Health
OP: 11/29/01 DOB: 8/17/70
H: 302-1078 Heather Teplin, PT
MRU# 41-96-50 Case #05037221
Dr. Flejsierowicz DX: L shldr pain

☒ **Physical Therapy** ☐ **Occupational Therapy**
☒ **Progress Report** ☐ **Discharge Summary**

Diagnosis: _____ Dates of Service (to / from): 11/29/01 - 12/27/01

Therapist: Jeremy Kammann, PT Total Visits: 6

Treatment Provided:

☐ US, HP, Fluidotherapy, Paraffin
☐ Phonophoresis / Iontophoresis
☐ Electrical Stimulation
☐ Traction
☐ Joint Mobilization
☒ Soft Tissue Mobilization
☒ Therapeutic Exercise
☐ Cardiovascular Exercise
☒ Stabilization Exercise
☐ Gait Training
☒ Body Mechanics Training
☒ Functional Activity Training / Work Simulation
☒ Postural Training
☐ Balance / Proprioception Training
☐ Aquatics / Whirlpool / Underwater Treadmill
☒ Home Exercise
☐ Other _____

Treatment Provided (specify): _____

Current Functional Status: Pt referred back to MD due to reports of (L) shoulder instability 2-3 x/wk

AROM (L) Flexion 0-110° → Pain vs (R) 0-180°
ER (L) MMT 3+/5 → Pain
(+) Subluxation / Relocation test (L)
↑'d anterior laxity (L) GHJ vs (R)

Recommendations: ☐ Continue Therapy Referred to MD due to symptoms consistent c̄ shoulder instability.

MD visit 1/3/02

☐ Plan discussed and agreed upon with patient / significant other.

Jeremy Kammann 12/31/01
Signature / Date

Physician Reply / Orders:

☐ D/C Therapy: _____

☐ Continue Therapy: Frequency _____ times per week Duration _____ weeks

☐ I agree with the Therapist's recommendation.

☐ Special Instructions / Precautions: _____

I certify / re-certify the need for these services, furnished under this plan of treatment, and while under my care.

Physician Signature: _____ **Date:** _____

AuroraHealthCare® Milwaukee, Wisconsin
Aurora Rehabilitation Center

- [ ] St. Luke's Medical Center
- [x] Sinai Samaritan Medical Center
- [ ] Other _____
- [ ] West Allis Memorial Hospital
- [ ] Hartford Memorial Hospital
- [ ] The Medical-Surgical Clinic

White, Cassandra Managed Health
OP: 11/29/01 DOB: 8/17/70
H: 302-1078 Heather Teplin, PT
MRU# 41-96-50 Case #05037221
Dr. Flejsierowicz DX: L shldr pain

DAILY PROGRESS NOTE - 4 Session

- [ ] Occupational
- [ ] Physical
- [ ] Speech
- [ ] Recreation
- [x] Sports Medicine Institute
- [ ] Inpatient Rehabilitation Program
- [ ] Outpatient
- [ ] Acute

Authorized Visits (Outpatient): 8

Treatment Diagnosis: _____ Precautions: _____

Missed Appointments: Initial Eval Date: 11-29-01

	12-27-01 #6	1/28/02 # –	#	#
Time (min) / Units / Equipment	2-MT & 1-Estim 45'	DC NOTE		
Goals: # 2 Date 11-29-01 Pain level ..... Target Date/Visits: ____ Date Met ____	Session Outcome/Assessment: Pt. reports she has experienced 2 recent episodes of "slipping of her shoulder" within the last week. On one of the episodes pt. was abducted and externally rotated. Point tenderness of a moderate degree along superior & anterior GH jt. Moderate ↑ tone in UT musculature and significant hiking and protracting of the shoulder present. Pain range is 3/10-10/10. Tx - STM to UT region and reinforcement of scapular positioning exercises. E-Stim x 20min w/HP to UT. Pt. instructed in protective arm positioning.	Session Outcome/Assessment: Pt has not returned to SMI since 12/27/01. Goal reassessment + recent obj. findings unavailable DC from PT	Session Outcome/Assessment	Session Outcome/Assessment
# 3 Date 11-29-01 Sleep ..... Target Date/Visits: ____ Date Met ____				
# ____ Date ____ Target Date/Visits: ____ Date Met ____				
# ____ Date ____ Target Date/Visits: ____ Date Met ____				
Education *Home Exercise Program D/V=Demonstrate/Verbalize NR = Needs Reinforcement	[x] Pt. [ ] Caregiver: ____ Topic: Posture Reinforcement [ ] Able to D / V [ ] NR [ ] See Interdisc. Pt. Teach Rec.	[ ] Pt. [ ] Caregiver: ____ Topic: ____ [ ] Able to D / V [ ] NR [ ] See Interdisc. Pt. Teach Rec.	[ ] Pt. [ ] Caregiver: ____ Topic: ____ [ ] Able to D / V [ ] NR [ ] See Interdisc. Pt. Teach Rec.	[ ] Pt. [ ] Caregiver: ____ Topic: ____ [ ] Able to D / V [ ] NR [ ] See Interdisc. Pt. Teach Rec.
Plan for next session:	Pt. to see MD on 1-3-02. Dave Schober, LAT			
Signature	[signature] PT	[signature] PT		

Updated Treatment Plan and goals were discussed and set with the patient and /or significant other. Date: _____

White - Medical Record / Yellow - Therapist

☐ Now

For an appointment, please call . . .

Downtown
1218 West
Kilbourn Avenue
(414) 219-7776
1-800-219-7776

Brookfield
19601 West
Bluemound Road
(262) 821-4460

Mequon
1249 West
Liebau Road
(262) 243-4161

Whitefish Bay
6255 North Santa
Monica Boulevard
(414) 219-7776
ext. JCC

Oconomowoc
1061 East
Summit Avenue
(262) 569-2222

West Bend *
1110 Gateway Court
(262) 306-6100
*Affiliated Site

Date 11/28/01

Name Cassandra White

Diagnosis (L) shoulder pain

Surgical Procedure and Date s/p fall

Rx _____ Physical Therapy Evaluate and Treat as per Protocol

_____ Special Instructions/Precautions

Frequency _____ times per week

Duration _____ weeks

I certify/recertify the need for these services furnished under this plan of treatment and while under my care.

Physician Signature

Address/Phone

AuroraHealthCare® Milwaukee, Wisconsin
Aurora Rehabilitation Center

- [ ] St. Luke's Medical Center
- [x] Sinai Samaritan Medical Center
- [ ] Other
- [ ] West Allis Memorial Hospital
- [ ] Hartford Memorial Hospital
- [ ] The Medical-Surgical Clinic

White, Cassandra Managed Health
OP: 11/29/01 DOB: 8/17/70
H: 302-1078 Heather Teplin, PT
MRU# 41-96-50 Case #05037221
Dr. Flejsierowicz DX: L shldr pain

REHABILITATION EVALUATION SUMMARY-Single Discipline

- [ ] O.T. [x] P.T. [ ] Speech
- [ ] Acute [ ] Outpatient [ ]

Diagnosis (L) Shoulder Pain

Onset Date: 2wks ago Surgery Date: [x] N/A Precautions: (—)

Social History: 31yo ♀ c̄ 2yo daughter @ home s/p fall

Functional limitations prior to injury: [x] None

Functional Limitations (ADL/Work): [x] See Medical History Questionnaire

Level of Function needed to return to previous activity/ADLs/Work: Laundry, groceries, general household

Assessment: Functional Limitations Due to:

- [ ] Impaired Gait
- [x] Impaired Strength
- [x] Impaired Activity Tolerance
- [x] Impaired Work / Leisure Tolerance
- [ ] Excessive Scar Tissue
- [ ] Impaired Balance
- [x] Impaired Joint Motion
- [ ] Impaired Skin Integrity
- [ ] Impaired Cognition
- [ ] Impaired Safety
- [x] Impaired ADL/IADL
- [x] Pain
- [ ] Edema
- [ ] Impaired Posture / Biomechanics
- [x] Muscle Guarding
- [ ] Impaired Swallowing
- [ ] Impaired Communication
- [ ]

Number	Discharge Goals Target Date: 12/29/01	Treatment Plan
1.	Pt (I) c̄ HEP to increase Flexibility + Strength in (L) UE to equal (R) to allow for return to daily functioning	Manual Therapy Modalities PRN HEP instruction
2.	Pt to report pain ≤ 1/10 consistently c̄ performing daily chores (laundry, dishes, groceries, cleaning)	Posture / Body mechanics ed. Ther ex
3.	Pt to be able to care for daughter needs c̄ no reports of pain - (dressing, holding)	Frequency: 2xwk Duration: 4wks

Potential for Goal Achievement: [x] Good [ ] Fair [ ] Limited:

Factors related to Goal Achievement: (+) = Benefit (-) = Barriers

- ___ Family Support
- ___ Motivational Level
- ___ Weight Bearing Status
- ___ Safety Awareness
- (-) Activity Tolerance
- ___ Medical Status
- ___ Cognition / Communication
- ___ Other:

[x] **Patient agrees with treatment plan and goals**

J Duncombe SPT CSCS / B Tagaf PT CSCS — Signature
11/29/01 — Date
219-7776 — Telephone Number

For Physician: [ ] N/A

- [ ] **For Physician Review.** This form does not need to be returned.
- [ ] **Please sign and return.**
- [ ] The above treatment plan is a change / modification from the original prescription. Your signature is required to indicate agreement with the above plan of care. **Please sign and return.**

I certify the need for these services, furnished under this plan of treatment, and while under my care.

Physician Signature / Date

05403150

REHABILITATION EVALUATION SUMMARY
SINGLE DISCIPLINE

White - Medical Record / Yellow - Therapist
AHC 05403150.j (Rev. 04/01)

AuroraHealthCare® Milwaukee, Wisconsin
Aurora Rehabilitation Center

- [ ] St. Luke's Medical Center
- [x] Sinai Samaritan Medical Center
- [ ] Other
- [ ] West Allis Memorial Hospital
- [ ] Hartford Memorial Hospital
- [ ] The Medical-Surgical Clinic

White, Cassandra Managed Health
OP: 11/29/01 DOB: 8/17/70
H: 302-1078 Heather Teplin, PT
MRU# 41-96-50 Case #05037221
Dr. Flejsierowicz DX: L shldr pain

INITIAL EVALUATION - UPPER QUADRANT

- [x] P.T.
- [x] Sports Medicine Institute
- [ ] O.T.
- [ ] Acute
- [ ] Inpatient Rehabilitation
- [ ] Outpatient Rehabilitation

NT = Not Tested N/A = Not Applicable

Diagnosis: (L) Shoulder Pain **Precautions:** [x] N/A

Subjective/Pain: Now: 5-6/10 Best: 5/10 Worst: 8/10 Hand Dominance: [ ] Left [x] Right
Hot showers help. Awakens @ night, difficult c̄ all ADL/IADL that use (L) UE. Stiff and sore

Observation: (Posture) Rounded Shoulders

Palpation: Tender over (L) GH area, AC jt, Pec insertion, inferior scapular angle, (L) UT

Scapular Position: (L or R or (B)) [x] Symmetrical ___Elevated ___Depressed ___Anterior Tilt ___Winging ___Upward Rotation ___Downward Rotation ___Abduction ___Adduction

UE Sensation: [ ] NT [x] Intact [ ] Impaired:

Functional Range of Motion: [ ] NT

		L Yes	L No	R Yes	R No			L Yes	L No	R Yes	R No
Place hand on opposite shoulder	*	x		x		Place hand behind back	*		x	x	
Touch top of head	*	x		x		Over head reach	*		x	x	
Place hand behind neck	*	x		x						x	

Comments:

* = Pain

Scapulohumeral Rhythm: [ ] Normal [x] Impaired: 2° Pain in (L) Shld

ROM / Strength:

Cervical ROM: [ ] NT [x] WFL c̄ (L) Shld pain @ end range (B) rot.

Elbow / Wrist / Hand: [ ] NT [x] WFL

- [ ] All motions WFL except those noted
- [x] Only those motions that were assessed are noted.
- [ ] Gross muscle strength WFL except as noted.
- [x] Only muscle strength that was assessed are noted.

Position	MOVEMENT	ROM	END FEEL	Position	MUSCLE(S)	MMT L	MMT R
4	Flexion	WFL on R, (L) 80°		4	(L) Shld NT 2° pain	/5	5/5
4	Abduction	for all 90°		4		/5	5/5
1	Ext. Rot. (0/45/90)	22° 70° of	E	4		/5	5/5
1	Int. Rot. (0/45/90)	38° Abd	E	4		/5	5/5
						/5	/5
						/5	/5
						/5	/5
						/5	/5

* = Painful A = Active, A/A = Active, Assist, P = Passive / Position: 1 = Supine, 2 = Prone, 3 = Sidelying, 4 = Standing, 5 = Sitting
End Feel: E = Empty, B = Bony, C = Capsular, S = Soft Tissue Approx.

Flexibility/Special Tests: NT. 2° Pain

Joint Stability/Mobility: NT 2° Pain

Additional Comments: Pt very tender + reports pain c̄ all motions, wait until results of X-ray to finish specific shld assessment.

Session Length: 60 min **Units Billed:** 3 eval, 1 TEX

Today's Treatment: Initial Eval, Codmans (L&R only) HP x 15 min to shoulder. Posture education.

Signature: [signature] SAT OSCS / [signature] OSCS Date 11/29/01

INITIAL EVALUATION
UPPER QUADRANT

White - Medical Record / Yellow - Therapist
AHC 05403080.j (Rev. 04/01) Front

CERTIFICATION OF MEDICAL RECORDS

PATIENT: Casandra White

DATE OF TREATMENT: 11/28/01 TO 4/15/02

I, Joyce James Correspondence Technician at Aurora River Center,

hereby certify that the documents annexed hereto, and consisting of 15 pages, constitute an accurate and legible duplicate of the medical records in our possession regarding the above named patient, as requested, and for which authorization was granted.

4/7/03
Date

Correspondence Technician

AURORA HEALTH CENTER – DOWNTOWN
1575 North RiverCenter Drive – Milwaukee, WI 53212

PATIENT: **WHITE, CASSANDRA**
DOB: **08/17/70**
CHART:
ATTENDING: **M. Flejsierowicz, M.D.**

February 14, 2002

This is a 30--year-old African-American female who just underwent a left shoulder surgery by Dr. Boyle and she is now getting extensive physical therapy. She is here for follow-up.

She does complain of about a few day history of cough and congestion.

PHYSICAL EXAMINATION:
VITAL SIGNS: Blood pressure 110/80.
HEENT: Throat looks clear.
LUNGS: There was rhonchi present in the right mid lung field and scattered wheezing present. No rales.
CARDIOVASCULAR: S1, S2. Normal heart rate and rhythm. No murmurs or gallops appreciated.
MUSCULOSKELETAL: Her left shoulder, she has good range of motion. She is able to comb her hair. There is a scar present medially but it is well healed. There is no open areas present and not a lot of tenderness to palpation.

ASSESSMENT AND PLAN:
1. Left shoulder surgery. Patient is recovering uneventfully. She does see Dr. Boyle every two weeks for regular follow-up.
2. Bronchitis, acute with a bronchospasm. I am giving her Z-Pak for five days plus Robitussin-AC for the cough. She was warned about possible side effects.

M. Flejsierowicz

M. Flejsierowicz, M.D.
DD: 02/14/02
DT: 02/20/02

AURORA HEALTH CENTER – DOWNTOWN
1575 North RiverCenter Drive – Milwaukee, WI 53212

PATIENT: **WHITE, CASSANDRA**
DOB:
CHART:
ATTENDING: **M. Flejsierowicz, M.D.**

January 22, 2002

PREOPERATIVE EVALUATION: Left shoulder arthroscopic surgery done by Dr. Austin Boyle on 01/25/02.

HISTORY OF PRESENT ILLNESS: This a 31-year-old African-American female who is her for preoperative evaluation for left shoulder injury due to a fall back in November.

PAST MEDICAL HISTORY: Includes a history of seizure disorder.

ALLERGIES: Denies drug allergies.

MEDICATIONS: Tegretol.

FAMILY HISTORY: Significant for high blood pressure and epilepsy.

SOCIAL HISTORY: Patient is a smoker, smokes a few cigarettes a day. Denies alcohol.

REVIEW OF SYSTEMS: Unremarkable except for her left shoulder pain. She denies chest pain, shortness of breath, abdominal pain, nausea or vomiting. No blood in her stool.

PHYSICAL EXAMINATION: She is alert and oriented.
HEENT: External ear canals are clear. Tympanic membranes are intact. There is a little bit of left-sided ptosis, but this is not new.
NECK: Supple. No thyromegaly. No nodules. No lymphadenopathy.
LUNGS: There is good air movement. No crackles. No wheezes.
CARDIOVASCULAR: S1, S2. Normal heart rate and rhythm. No murmurs, gallops or rubs appreciated.
ABDOMEN: Soft, nontender. Normal bowel sounds. No CVA tenderness.
EXTREMITIES: Normal peripheral circulation with good pedal pulses.
SKIN: Normal.
NEUROLOGIC: Normal without focal deficit.

ASSESSMENT AND PLAN: Preoperative evaluation for left shoulder surgery. We will obtain CBC, BUN, creatinine and electrolytes.

Please call me if you have any questions.

M. Flejsierowicz, M.D.
DD: 01/22/02
DT: 01/23/02

FAXED

AURORA HEALTH CENTER – DOWNTOWN
1575 North RiverCenter Drive – Milwaukee, WI 53212

PATIENT: **WHITE, CASSANDRA**
DOB: **08/17/70**
CHART:
ATTENDING: **M. Flejsierowicz, M.D.**

January 17, 2002

This patient is here to follow-up on her left shoulder injury from her fall in the beginning of November. She did see Dr. Boyle and she is thinking about the surgery that he suggested. She still complains about episodes of instability of her left shoulder and pain.

PHYSICAL EXAMINATION:
VITAL SIGNS: Blood pressure 120/80.
EXTREMITIES: Left shoulder, there is limited range of motion on rotation anteriorly and posteriorly. No swelling, warmth or deformity. No impingement sign. Normal muscle strength and pulses.

ASSESSMENT AND PLAN: Left shoulder injury due to fall. The patient was reassured that surgery is probably a very good idea. I did review the MRI results with her. She does have some concerns, but I would like her to address all her concerns with Dr. Boyle, and I think she should proceed with the surgery since she does continue to have the left shoulder problem. She was going to get back to me if she needs a preoperative clearance.

M. Flejsierowicz

M. Flejsierowicz, M.D.
DD: 01/17/02
DT: 01/22/02

Telephone Message

Date: 12/27/01 Time: 10 : 12 AM PM	Rec. By: JW
For: Flex	Caller:
Patient Name: White Cassandra	Phone #: 302-1078
Message:	Relationship to Patient:
Pt is receiving thearpy for shoulder Her shoulder popped again she was told to inform doctor of this	8-17-70
Patient Chart No.	Call Back Requested: Yes No
	Call Back At: : AM PM

Follow-up Action:

(L) MRI App 3 rd Hold PE

Date/Time Follow-up Completed: / / : AM PM 12/28/01

Initials:

Telephone Message

AURORA HEALTH CENTER – DOWNTOWN
1575 North RiverCenter Drive – Milwaukee, WI 53212

PATIENT: **WHITE, CASSANDRA**
DOB: **08/17/70**
CHART:
ATTENDING: **M. Flejsierowicz, M.D.**

January 3, 2002

She is here to follow-up on her shoulder pain. She was seeing a physical therapist and received a letter that she has to be decreased range of motion and that she has some dislocation in her shoulder and that they would rather have her see a specialist. Indeed, she said she does have pain at times and she feels like her shoulder pops at times. She has pain at night but she says it is tolerable and she does not wish to have anything for the pain.

PHYSICAL EXAMINATION:
VITAL SIGNS: Blood pressure 120/80.
MUSCULOSKELETAL: Left shoulder, she does have pain on flexion. She does have positive subluxation test and there is severe anterior laxity present with tenderness to palpation in the anterior bicipital grove.

ASSESSMENT AND PLAN: Unstable left shoulder. Patient is scheduled for an MRI on the 7th of January and she also is going to schedule an appointment with the orthopedic surgeon for further evaluation. She was advised not to lift, push or pull with her left shoulder or to reach above the left shoulder.

M. Flejsierowicz, M.D.
DD: 01/03/02
DT: 01/07/01

Telephone Message

Date: 12/7	Time: 11:40 AM PM	Rec. By: PAM
For: Dr. Fles		Caller: Cassandra
Patient Name: White, Cassandra		Phone #: 302-1078
		Relationship to Patient:

Message: DOB 8/17/70

Calling about xray on her Shoulder please Return her Call. Would like to know What the xray Says

Patient Chart No.	Call Back Requested: Yes No	Call Back At: : AM PM

Follow-up Action:

call that it is normal

Sports Medicine 279 Fax

X-rays 7775

Date/Time Follow-up Completed: / / : AM PM

Initials:

Telephone Message

AURORA HEALTH CENTER – DOWNTOWN
1575 North RiverCenter Drive – Milwaukee, WI 53212

PATIENT: **WHITE, CASSANDRA**
DOB: **08/17/70**
CHART:
ATTENDING: **M. Flejsierowicz, M.D.**

November 28, 2001

This is a 30-year-old African-American female who fell on the street in the beginning of November and ever since then she has been complaining of pain in her left shoulder.

She is taking Tylenol. She is here to follow-up.

PHYSICAL EXAMINATION: She is in no acute distress.
VITAL SIGNS: Blood pressure 120/90. Weight 183.
EXTREMITIES: Left shoulder, no edema noted. No deformity and no bruising. She does have decreased range of motion. She is not able to reach above the shoulders without pain. She does have pain on active and resisted range of motion. There is no impingement sign. Grip is normal.

ASSESSMENT AND PLAN:
1. Left shoulder injury due to fall. We will obtain an x-ray to make sure the bones are intact.
2. I recommended physical therapy at least three times a week to prevent frozen shoulder and ibuprofen 800 mg t.i.d. for now and follow-up in two weeks.

M. Flejsierowicz, M.D.
DD: 11/28/01
DT: 12/03/01

AURORA MEDICAL GROUP
AURORA HEALTH CARE

1/2 Janie M. Washington, M.D.

ESTABLISHED ANNUAL EXAMINATION

DATE April 15, 2002 LMP 3-23-02
NAME Cassandra White CONTRACEPTION none
DOB 8-17-70 AGE 31 LAST PAP RESULT neg
MARITAL STATUS: (S) M W D SEP LAST MAMMOGRAM ~~neg~~

CHIEF COMPLAINT: Annual Gyne Exam

PAST MEDICAL HISTORY:

ALLERGIES: NKDA

CURRENT MEDICATIONS: Ø

TOBACCO + ALCOHOL (−) DRUGS (−)
IMMUNIZATIONS TB test (−) ?Td

PLEASE SEE COMPLETE PAST HISTORY DATED 4/4/97
REVIEWED AND UPDATED AS NEEDED
Hx Abnormal pap possibly HGSIL, colp-Dx (−) Chronic cervicitis

Complete review of systems was done. Except as elicited in HPI and rest of history, all of the following are negative: constitutional symptoms, eye, ear, nose, throat, mouth symptoms, cardiovascular disease, respiratory problems, gastrointestinal and genitourinary problems, intergumentary problems, musculoskeletal or neurologic disease, hematologic and endocrine disease, allergic and immunologic problems and psychiatric problems. All other systems are negative.

See pink sheet 4/15/02

Janie MD

AURORA MEDICAL GROUP
AURORA HEALTH CARE

Janie M. Washington, M.D.

LAB TESTS ORDERED

LABEL HERE
Cassandra White
8/17/70

NONE

DX: Annual Gyne Exam

PAP
- SLIDE
- THIN PREP

GC/CHLAMYDIA
GBS

WET PREP
- NORMAL
- YEAST
- TRICH
- BV
- WBCs

CULTURES
- VAG
- URINE
- THROAT-STREP
- OTHER

PREG TEST
- URINE POS NEG
- BHCG PROG

U/A
- PH 5.0 SPECGR 1.015
- LEU (+) BLOOD +
- NIT (−) PROT (−)
- GLUC (−) KET (−)
- BIL (−) URO (+)2

STOOL GUAIAC
- HEME-3 HEME-1

HSV
- SITE _____

MAMMOGRAM
- BILATERAL LEFT RIGHT

U/S LEFT RIGHT

ULTRASOUND
- PELVIC WITH TRANSVAG ABD

BONE DENSITY

CT SCAN
- PELVIC ABD

BLOODWORK

CBC	COMP METABOLIC	FSH	HEP SCREEN
TSH	LIPID A	VDRL	ESTRADIOL
CHOL	PROLACTIN	HDL	HSV TITER
DHEAS	TESTOSTERONE	HIV	LIVER PANEL

JMWNP

AURORA MEDICAL GROUP 2/2 Janie M. Washington, M.D.
AURORA HEALTH CARE

ESTABLISHED ANNUAL EXAMINATION

DATE April 15, 2002
NAME Cassandra White
DOB 8.17.70

PHYSICAL EXAM:

T 97.4 BP 120/70 PR WT 182 HT ____ REPEAT BP ____

GEN: WD WN NAD ABNL: ____
MENTAL STATUS: A&OX3 ABNL: ____
HEENT: NORMAL ABNL: ____
LUNGS: CLR TO A ABNL: ____
COR: RRR s m S3S4 ABNL: ____
BREAST: Soft, NT s masses, D/C, dimpling or nodularity
Axillary & Supraclavicular areas s palpable abnormality
Nipple D/C N Y Describe ____
Fibrocystic Δs N Y Describe ____

ABD: Soft, NT s palpable masses ABNL: ____

PELVIC: V/V/BUS WNL ABNL: ____
Bladder NL to palpation ABNL: ____
CX s lesions or CMT ABNL: ____
Uterus: midline 6wks.
Adnexa
Cul de sac NL to palpation ABNL: ____
RV confirms ABNL: ____
EXT NL ABNL: ____

DIAGNOSIS:
1. Annual Gyne Exam
2. STD ✓ (refuses HIV, Hep panel, RPR)
3. Hx abnormal paps.
4. hematuria + leukocytes

PLAN:
1. Self-breast exam, adequate calcium, multi-vit w/iron, and exercise recommended & discussed.
2. Call for test results one week after all test completed.
3. Follow up PRN 1YR 6MNS 3MNS 1MN 6WKS 3WKS 2WKS 1WK
4. GC Chlamydia
5. Urine for CX.

Jacobs NP
4/15/02

CLIENT INFORMATION

A060 WW
AHC/AURORA MED GRP DNTWN/OB-GYN
1575 RIVERCENTER DR STE 124
MILWAUKEE, WI 53212

8901 W. Lincoln Ave.
West Allis, WI 53227-0901
Milwaukee 414-328-7900
National 800-877-7016

PRINTED 04/22/02 11:09	ACCESSION # SHC02-21610
REQ. # 62330359	PATIENT ID # 14569156
DATE OF BIRTH 08/17/1970	COMPANY NAME
AGE/SEX 31Y F	COLLECTION SITE
SS # 397-92-4769	SPECIMEN TYPE R05

PATIENT NAME	LAB ID #	
WHITE CASSANDRA L		
REFERRING CLIENT		
DARROW JULIA		

TEST	RESULT	UNITS	REFERENCE RANGE

Patient: WHITE,CASSANDRA L

Specimen collected: 04/15/2002
Specimen #: SHC02-21610
Accessioned: 04/16/02
Date received: 04/16/02

Pathologist: Paul A. Angermeier, M.D.
Cytotechnologist: Betty A. Setum, CT(ASCP)

SPECIMEN:
PAP,THIN PREP (TP, PAP)

PATHOLOGICAL DIAGNOSIS:
ATYPICAL SQUAMOUS CELLS OF UNDETERMINED SIGNIFICANCE (SEE COMMENT).

Paul A. Angermeier, M.D.
04/22/02

Comment:
Satisfactory for interpretation.

Favor inflammatory change.

Case reviewed by the pathologist.

The Pap smear is a SCREENING test for cervical cancer with a well-recognized false negative rate.
Director of Cytopathology: Janet R. Durham, M.D.

ASCUS
Dr Washington consulted.
Repeat Pap JRW
JS

CLINICAL INFORMATION:
Leukorrhea STD CGPT

Previous Pap Smears:
1. SHC01-1428 01/16/01 LBN
NEGATIVE FOR ABNORMAL EPITHELIAL CELLS.
2. SHC00-2408 07/10/00 JRD
ATYPICAL SQUAMOUS CELLS OF UNDETERMINED SIGNIFICANCE (SEE COMMENT).
3. C00-37897 04/17/00 MMA
ATYPICAL SQUAMOUS CELLS OF UNDETERMINED SIGNIFICANCE (SEE COMMENT).

CLIENT INFORMATION

A060 WW
AHC/AURORA MED GRP DNTWN/OB-GYN
1575 RIVERCENTER DR STE 124
MILWAUKEE, WI 53212

8901 W. Lincoln Ave.
West Allis, WI 53227-0901
Milwaukee 414-328-7900
National 800-877-7016

PRINTED: 04/22/02 11:09	ACCESSION # SHC02-21610
REQ. # 62330359	PATIENT ID # 14569156
DATE OF BIRTH 08/17/1970	COMPANY NAME
AGE/SEX 31Y F	COLLECTION SITE
SS # 397-92-4769	SPECIMEN TYPE R05

PATIENT NAME	LAB ID #	
WHITE CASSANDRA L		
REFERRING CLIENT DARROW JULIA		

TEST	RESULT	UNITS	REFERENCE RANGE

4. C99-32713 04/12/1999 LBN
ATYPICAL SQUAMOUS CELLS OF UNDETERMINED SIGNIFICANCE, FAVOR REACTIVE (SEE
COMMENT).
5. C98-24066 04/07/1998 LBN
NEGATIVE FOR ABNORMAL EPITHELIAL CELLS.
6. C93-34010 09/08/1993 PAA
NEGATIVE FOR ABNORMAL EPITHELIAL CELLS.

FEE CODES:00000; 88142; 88141

FINAL REPORT

AURORA CONSOLIDATED LABORATORIES
AURORA MEDICAL GROUP

04/17/2002
08:12

NAME: **WHITE,CASSANDRA**
MR# : 14569156
LOC : 20DT
ACCT: 11031354

DOB: 08/17/1970
AGE: 31Y
SEX: F
SSN: 397924769
PT.PH.: (414)302-1078 CH #: 2000

DR : DARROW NP,JULIA
EDGERTON HEALTH CENTER
6901 W. EDGERTON AVE.
GREENFIELD,WI. 53220

M60194 COLLECTED:04/15/2002 UNK RECEIVED:04/15/2002 13:46 DARROW NP,JULIA
CODES ORDERED: CGPT (PerfAt)

CHLAM/GC AMP.PROBE

SOURCE	VAGINAL		
CHLAMYDIA AMP.PROBE	NEGATIVE	[NEG]	NT
GC AMPLIFIED PROBE	NEGATIVE	[NEG]	CL
			CL

{CL} = TEST PERFORMED AT ACL CENTRAL
{NT} = TEST PERFORMED AT ACL DOWNTOWN (NEWTOWNE)

04/15/2002 URINE CULTURE FINAL 04/16/2002
ACC. NO.:M60196
UNK SPECIMEN DESCRIPTION: URINE

CULTURE: >100,000 COL/ML MIXED FLORA, NO PREDOMINATING ORGANISM PRESENT. {CL}

{CL} = TEST PERFORMED AT ACL CENTRAL
{NT} = TEST PERFORMED AT ACL DOWNTOWN (NEWTOWNE)

JP

[* Indicates Critical Result] - [@, H, L, Indicates Abnormal Result]

END OF REPORT

FINAL EVENT

Aurora Sinai Medical Center

AuroraHealthCare®

945 North 12th Street
Milwaukee, WI 53233
414-219-2000

Patient:	**WHITE, CASSANDRA L**
MRN:	**SSMC-419650**
DOB:	**08/17/1970**
Case #:	**SSMC-05052092**
Pt. Loc/Type:	**ER-SSMC Emergency Department**

RADIOLOGY REPORT

Exam	Exam Date/Time	Accession Number	Ordering MD
DX Shoulder 2 View Min LEFT	01/26/2002 09:40:47	DX-02-0017445	Silkey, John

DX Report

CLINICAL HISTORY: Surgery on Thursday for tendon muscle repair, seizure, injury.

There is no evidence of acute fracture or dislocation.

file XC

Dictating MD: Glazer, Mark
Electronically Signing MD: Mark Glazer

Transcribed Date/Time: 01/26/2002 17:15
Transcribed By: KT
Signed Date/Time: 01/26/2002 19:14

AURORA HEALTH CENTER – DOWNTOWN
1575 North RiverCenter Drive – Milwaukee, WI 53212

PATIENT: **WHITE, CASSANDRA**
DOB: **08/17/70**
CHART:
ATTENDING: **M. Flejsierowicz, M.D.**

December 12, 2001

Patient is here to follow-up on her shoulder pain. She is doing much better, going to physical therapy and she does exercise at home. She is happy with her progress. Her range of motion is getting better. She does have concerns about a possible bite on her left thigh which she noted a couple of days ago.

PHYSICAL EXAMINATION:
VITAL SIGNS: Blood pressure 120/80.
MUSCULOSKELETAL: Left shoulder, there is no deformity of bruising. Full range of motion with some tenderness on active range of motion. There is no impingement sign. Normal grip.
EXTREMITIES: Left thigh, there is an area of induration present with central scabbing about 1 cm in size

ASSESSMENT AND PLAN:
1. Left shoulder injury, patient much better. I would like her to continue with her physical therapy.
2. Left thigh infection, possible bite. We will treat with Keflex 250 mg q.i.d. for 10 days.

M. Flejsierowicz, M.D.
DD: 12/12/01
DT: 12/17/01

Milwaukee Orthopedic Specialists, S.C.
1575 N. RiverCenter Drive, #160
Milwaukee, WI 53212
(414) 274-7220
fax (414) 274-7227
Tax ID# 39-1149693

CERTIFICATION OF AUTHENTICITY OF DUPLICATED RECORDS:

X MEDICAL
X BILLING

Pt Name: Cassandra L White

DOB: 08/17/1970

Physician: Mark T Wichman MD

Chart #: 07-63-45

Records requested for dates: 8/24/02 - Present

Dates of Service included: 12/27/02 - 7/15/03

I, custodian of the medical records/bills for Milwaukee Orthopedic Specialists, S.C., do hereby certify that the attached photographic copy of the requested medical records and/or bills of the patient listed above constitute a complete, accurate, and legible duplicate of the original on file, consisting of 24 page(s).

Please note that it is our office policy to not release third-party medical records. These records must be obtained from where they originated.

Signature, Records Custodian: Ann Marie Sindelar

Printed Name: Ann Marie Sindelar

Date: 8/26/03

7/15/03

Cassandra is now 4 ½ months out after left shoulder arthroscopy. She is actually doing well. She is working full time. She is not on any medications. She complains only of some clicking of the left shoulder.

On **physical exam** active assisted forward elevation about 150°. She does have moderate crepitation with range of motion. This is not painful however. Stability is excellent.

Impression: Good progress following left shoulder arthroscopy and revision of Bankart repair.

Plan: I would like to obtain some x-rays today because of the notable crepitation, however the patient thinks she is about two months pregnant. Films will be performed only if she becomes symptomatic. She should continue her home program. I'll see her back for follow up in eight weeks.
MTW/sab
C: Austin Boyle III, M.D.
E. Lepgold, M.D., 1575 N. RiverCenter Dr., Milwaukee, WI 53212

6/16/03

Ms. White is seen 3 ½ months status post left shoulder arthroscopy with Bankart repair. She feels that overall she is doing OK, but she does at time have weakness within the left arm when she is reaching away from the body. She also complains of inability to completely internally rotate when she is at a seated position. She has been in physical therapy. She has not returned to work as of yet.

On **physical examination** shows forward flexion to 150°, abduction to 145°, external rotation to 60°, internal rotation to the buttock. With the patient supine and her arm abducted to 90°, she has external rotation to 90° and internal rotation to 80°. Her strength is intact with resistance in abduction and internal rotation. She has some mild weakness with external rotation.

Impression: Status post left shoulder arthroscopy with Bankart repair.

Plan: Ms. White should continue with physical therapy. She is making progression. She has occasional weakness, however she feels that overall her strength is much improved post-operatively. She, at this time, has not returned to work and we will have her return to work with no more than 4 hours per day for two weeks and then return to full duty after that without restrictions. We'll see her back in follow up in four weeks.
Dictated by Tara R. Christensen, PA-C for MTW/sab
C: Austin Boyle III, M.D.
E. Lepgold, M.D., 1575 N. RiverCenter Dr., Milwaukee, WI 53212

4/10/03

Ms. White is 6 weeks out following left shoulder arthroscopy. Overall she is doing well.

On **physical examination** forward elevation is to about 140°. External rotation to 45°. Resisted external rotation demonstrates good strength.

Impression: Good progress following left shoulder arthroscopy and revision of Bankart repair/capsular plication.

Plan: Begin physical therapy. I'll see her back for follow up in about six weeks. She can discontinue the use of the immobilizer at this time.
MTW/sab
C: Austin Boyle III, M.D.
E. Lepgold, M.D., 1575 N. RiverCenter Dr., Milwaukee, WI 53212

5/22/03

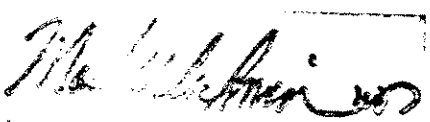
Ms. White returns earlier than her scheduled follow up visit. She is now approximately 3 months status post left shoulder arthroscopy and revision of Bankart tear. She was doing fairly well until last Friday, 5/16/03, when she was getting dressed and felt a "pop" within her left shoulder. She did note today that it felt as though her shoulder popped out of place. She had increased pain for the next day or two, but her pain seemed to resolve over the next couple of days until yesterday, when she stopped a door from closing on her, again noting increased left shoulder pain.

On **physical examination** she has forward elevation to approximately 150°. External rotation to 45-50°. Resisted external rotation reveals no strength deficit. Portals remain well healed. She does have some mild posterior tenderness, not well localized, but near the trapezial region or teres minor region.

X-rays obtained reveal stable satisfactory placement of the two Revo anchors used. No change from previous x-rays.

Assessment:
1. Satisfactory progress three months status post left shoulder Bankart reconstruction, revision.
2. Left shoulder girdle strain.

Plan: Patient will continue with outpatient physical therapy. She is authorized off work. Follow up will be in six weeks time. Further improvement is anticipated at this time.
Dictated by Stephen D. Meissner, PA-C for MTW/sab
C: Austin Boyle III, M.D.
E. Lepgold, M.D., 1575 N. RiverCenter Dr., Milwaukee, WI 53212



2/28/03 **Surgery at Sinai**
Left shoulder arthroscopy with revision Bankart and removal of loose mini-Revo anchor.

3/11/03

Ms. White is now 11 days out following her left shoulder surgery. She's doing well. No specific complaints.

On **physical examination** the portals are clean and dry and healed nicely. Elbow, wrist, and hand mobility is assessed. It looks good.

Impression: Good early progress following left shoulder arthroscopy, hardware removal, revision of Bankart repair and debridement. I'll see her back for follow up in about two more weeks. We'll start a course of physical therapy shortly thereafter. I would like an AP of her left shoulder at the time of her next visit.
MTW/sab
C: Austin Boyle III, M.D.
E. Lepgold, M.D., 1575 N. RiverCenter Dr., Milwaukee, WI 53212

3/25/03

Ms. White is 3 ½ weeks out following left shoulder arthroscopy. She is feeling well. No specific complaints.

On **physical examination** of the left shoulder, portals have healed nicely. Elbow, wrist, and hand mobility looks good. She has external rotation to about 20° She seems not to understand the imposition of some restriction on her external rotation.

An AP of the shoulder demonstrates good position of the anchors. No pathology is noted.

Impression: Good early progress following left shoulder arthroscopy and revision of Bankart repair.

Plan: We will start some therapy after her next visit in 2-3 weeks.
MTW/sab
C: Austin Boyle III, M.D.
E. Lepgold, M.D., 1575 N. RiverCenter Dr., Milwaukee, WI 53212

1/14/03 **Continued**

Plan: I recommend arthroscopy of the shoulder to remove the anchor. Additional repair of the anterior ligament complex would be performed if the repair site were found to be disrupted. Final goal of the surgical procedure would be to evaluate the rotator cuff. One of the patient's biggest concerns is time off of work. I explained that this could be anywhere from just a few days if simple arthroscopy and removal of loose body were performed, to several weeks if additional repair/reconstruction were necessary. The nature of this surgery was discussed at length. Risks and benefits were reviewed. Risks including, but no limited, infection, stiffness, persistent pain, and failure of the repair were reviewed. She understands, accepts, and would like to proceed with left shoulder arthroscopy, possible removal of loose anchor, with possible revision of Bankart repair or debridement/repair of the rotator cuff if this would be encountered. I'll see her back post-operatively.
MTW/sab
C: Austin Boyle III, M.D.
E. Lepgold, M.D., 1575 N. RiverCenter Dr., Milwaukee, WI 53212

1/14/03

This is an initial consultation and second opinion for this 32 year old female, seen today at the request of Dr. Boyle for left shoulder pain. Ms. White is now about one year out following Bankart reconstruction of the left shoulder. She has been worked up for persistent pain by Dr. Boyle with MRI scan. The patient complains of overall achiness and pain in the shoulder. She complains of pain when she tries to sleep at night with the arm in the abducted/externally rotated position. She also complains of difficulty bringing her arm behind her back. She does not note any significant instability at this time.

Past medical history is significant for seizure disorder.

Current medications include Tegretol.

Past surgical history is significant for left shoulder surgery by Dr. Boyle, which was an open Bankart procedure performed on 1/24/02.

On **physical examination** of the left nondominant shoulder, there is no atrophy or deformity. On palpation there is mild tenderness noted over the impingement area anteriorly, as well as the lateral bursa. No significant AC joint tenderness is present. Active assisted forward elevation to 150° limited by pain. Abduction 140°. External rotation 70°. Internal rotation to the thoracolumbar junction with moderate discomfort. There is generalized crepitation with range of motion. With the patient supine and the shoulder abducted 90°, she's got 90° of external rotation with apprehension in this position. Relocation maneuver is positive. Augmentation test is positive in this position as well. She has 70° of internal rotation. The Neer impingement test is 1+. Hawkin's test is 2+.

X-rays of the left shoulder are reviewed. The recent AP view demonstrates a small radiolucent halo around the superior anchor. This is suspicious for loosening. The axillary view demonstrates abnormal positioning of the superior anchor.

MRI scan of the left shoulder is reviewed. It demonstrates some intermediate signal within the distal insertion of the supra and infraspinatus tendons. Implant positioning is difficult to interpret on the MRI views.

Impression: Painful left shoulder following open Bankart repair. There is a suspicion of a loose anchor, which certainly can be detrimental within the glenohumeral joint. There are three current problems that need to be addressed. The first problem would be a loose suture anchor. The second problem would be the integrity of the repair itself, as she does have some persistent instability findings on exam. The third question in the integrity and inflammation of the rotator cuff.

01/10/03

Ms. White returns. Her MRI scan demonstrated post surgical changes of the supraspinatus tendon and no definite abnormalities with her anchors. The anterior labrum remained repaired. There was questionable high position of the humeral head, nothing definite.

Exam again demonstrated crepitus about the left shoulder and significant discomfort, not what would be expected at this stage of post-op.

Diagnosis: Status post left anterior shoulder reconstruction; possible loose suture anchor.

Plan: Ms. White will be seen for additional evaluation by my associate, Dr. Mark Wichman. She may be a candidate for arthroscopic evaluation and removal of a loose suture anchor, if present, suggested on the x-rays, but not on the MRI scan.

AJB/nrs
cc: Dr. E. Lepgold 1575 N. RiverCenter Drive Milwaukee WI 53212

12/27/02

Ms. White returns, last seen 4 months ago. She is having worse shoulder pain, stating that it throbs and that she lacks strength. She has had no injuries.

Exam demonstrated decreased internal and external rotation, left versus right, of a mild degree. Active forward flexion was about 135°. Some crepitus was noted.

Grashey, axillary, and outlet views obtained today suggested that the most superior suture anchor had pulled out and may be lying within the joint. There does appear to be some narrowing of the GH joint on the Grashey view.

Diagnosis: Status post left anterior shoulder reconstruction with possible loose suture anchor.

Plan: We will proceed with an MRI scan, left shoulder, follow up after same. We will make further recommendations at that time.

AJB/nrs
cc: Dr. E. Lepgold 1575 N. RiverCenter Drive Milwaukee WI 53212

Aurora Sinai Medical Center
AuroraHealthCare®
945 North 12th Street
Milwaukee, WI 53233
414-219-2000

Patient: WHITE, CASSANDRA L
MRN: SSMC-419650
DOB: 08/17/1970
Case #: SSMC-03298834
Pt. Loc/Type: IMAGING-SSMC Outpatient Services

1/10 AB

RADIOLOGY REPORT

Exam	Exam Date/Time	Accession Number	Ordering MD
MR Shoulder LEFT	01/03/2003 04:00:16	MR-03-0002766	~~Doctor, Unknown~~ Boyle, Austin

1/7/03

MR Report

History: Recent surgery. Pain.

The posterior aspect of the humeral head had an appearance essentially unchanged compared to 01/10/02. There is a small focal Hill-Sachs deformity cephalic to the posterior trough. There are areas of bright signal originating from the humeral marrow beneath and beside the areas of Hill-Sachs deformity. An anterior labral avulsion or stripping, which was seen previously, has been repaired. Anterior tissues as seen on axial slices 8, 9, and 10 seem somewhat bulky and measure up to 10.0 mm in thickness and have heterogeneous intermediate-type signals. There are three anchors in the anterior and somewhat superior glenoid. They have a similar appearance. No apparent dislocation and no way to tell if any are loose based on their appearance.

On coronal oblique images, the humeral head seems perhaps a little high-riding (review of radiographs from 01/26/02 suggest the humerus to be sagging or low relative to the glenoid). This is particularly evident comparing the inferior articulating surface of the humerus to the glenoid cup. On axial images, the head seems satisfactorily centered. The supraspinatus is perhaps slightly thinned. There is an area of bright signal running longitudinally within the lateral 15.0 mm of the supraspinatus, as seen on coronal image 10. This apparently is a deep partial tear.

The acromioclavicular joint demonstrates mild degenerative changes. However, there does appear to be an impression upon the more medial supraspinatus at its "critical zone", although the supraspinatus signal at this site is normal.

IMPRESSION:

1. Humeral head positioning, at least on the externally rotated coronal oblique sections, seems slightly elevated, but similar to prior exam.
2. There are changes in the lateral supraspinatus which are new. Bright signal with longitudinal character may represent a deep partial tear.
3. Repaired anterior labrum, now somewhat thick and bulky.
4. Anterior anchors in place at the glenoid with no abnormality suggested.

Boyle, Austin
~~Doctor, Unknown~~
1575 N. River Center Drive #160
Milwaukee, WI 53212

Print Date: 01/05/03 6:36 AM

Aurora Sinai Medical Center

AuroraHealthCare®

945 North 12th Street
Milwaukee, WI 53233
414-219-2000

Patient:	**WHITE, CASSANDRA L**
MRN:	**SSMC-419650**
DOB:	**08/17/1970**
Case #:	**SSMC-03298834**
Pt. Loc/Type:	**IMAGING-SSMC Outpatient Services**

RADIOLOGY REPORT

Exam	Exam Date/Time	Accession Number	Ordering MD
MR Shoulder LEFT	01/03/2003 04:00:16	MR-03-0002766	Doctor, Unknown

5. A Hill-Sachs lesion is present, unchanged.

Dictating MD: Johnson, Howard H
Electronically Signing MD: Robert J. Swoboda

Proxy MD: Swoboda, Robert J

Transcribed Date/Time: 01/04/2003 12:32
Transcribed By: BD
Signed Date/Time: 01/04/2003 17:07

Aurora Sinai Medical Center
Aurora Health Care
Milwaukee, Wisconsin

WHITE, CASSANDRA L
000000-41-96-50
SCE
Mark T. Wichman, M.D.
000003335879
DOB: 08/17/1970

PROCEDURE DATE: 02/23/2003

SURGEON: Mark T. Wichman, M.D.

ASSISTANT: Austin J. Boyle, III, M.D.

ANESTHESIA: General.

PREOPERATIVE DIAGNOSES:
1. Chronic left shoulder pain following open Bankart procedure.
2. Loose hardware with subchondral cyst formation, left shoulder.

POSTOPERATIVE DIAGNOSES:
1. Chronic left shoulder pain following open Bankart procedure.
2. Loose hardware with subchondral cyst formation, left shoulder.
3. Persistent anterior instability.

PROCEDURE PERFORMED: Left shoulder arthroscopy with:
1. Arthroscopic revision of Bankart procedure.
2. Removal of loose Mini-Revo screw.

BLOOD LOSS: Minimal.

COMPLICATIONS: None.

IMPLANTS: One Linvatec Mini-Revo anchor loaded with #2 Ethibond suture.

PROCEDURE: The patient was brought to the operating room and placed supine on the operating room table. Routine anesthesia monitors were placed and general anesthesia induced with laryngeal mask airway. Intravenous Ancef 1 gm was given.

The left shoulder was examined under anesthesia. Range of motion included full forward elevation and abduction. External rotation was to 80 degrees. Instability testing demonstrated the 2+ anterior laxity. I was able to get the shoulder up and over the anterior glenoid rim, but not dislocate her in this position. Posterior stability demonstrated 1+ laxity. There was some crepitation noted with range of motion assessment. The patient was then turned into the right lateral decubitus position with the left side up. All pressure points were padded including an axillary roll and peroneal nerve support. The left shoulder and upper extremity were prepped and draped in the usual and sterile fashion. The arm was suspended in 70 degrees of abduction with 9 pounds of distal support. A standard posterior-superior portal was established followed by an anterior-superior portal using needle localization high in the rotator interval. A diagnostic glenohumeral arthroscopy was then performed. The findings are as follows:

The biceps tendon was intact. The biceps anchor was intact. No SLAP lesion was present. The posterior labrum was unremarkable except for synovitis. The inferior capsular recess was unremarkable as well. The anterior-inferior labrum had been repaired, and the repair appeared intact. There was a boney Bankart lesion at the

midpoint of the glenoid which remained loose. The site of the superior anchor was identified and opened up with a shaver, probe and the crescent hook from the Spectrum system. Some arthroscopic curettes were used also to help open this hole up. The anchor was obviously loose within the bone. A large soft cyst was present around it. This was consistent with the findings on the MRI and radiographs. With considerable effort, the anchor was finally retrieved with a variety of arthroscopic instruments. There was a large cyst remaining with the anterior-superior glenoid which was mostly subchondral. It was left alone. The repair was revised with two plication stitches using #2 Ethibond, sewing the anterior-inferior capsular ligaments into the repaired and healed labrum. The superior aspect of the repair was then repaired using one more Mini-Revo anchor which had good bone purchase. The suture was passed through the superior portion of the inferior glenohumeral ligament complex and repaired. I could not get it completely tied down, as 1 or 2 mm remained. The tissue was quite stiff and not easily pliable. The repair site was probed and felt to be in good condition.

The scope was removed to evaluate the subacromial space. The arm was repositioned into 30 degrees of abduction, again, with 9 pounds of distal support. A standard posterior-superior portal was again utilized followed by an anterior-superior portal. A diagnostic bursoscopy was then performed. The findings are as follows:

The coracoacromial ligament was difficult to identify after prior surgery. The bursal surface of the rotator cuff was identified and noted to be intact. There was no significant fraying in the subacromial space; therefore, other than partial bursectomy for visualization, no additional surgery was done on this space.

The scope was returned into the joint. The joint was irrigated and aspirated dry. It was infiltrated with 30 cc of 0.5% Marcaine with Epinephrine. The portals were closed with 4-0 Monocryl followed by Steri-Strips. A sterile dressing was applied followed by a DonJoy Ultra Sling brace.

She was then returned to the supine position, woken up, extubated and transferred to the post-anesthesia care unit in stable condition.

Mark T. Wichman, M.D.

MW/ras 000601786/pg
d. 02/28/2003
t. 03/03/2003 12:27 P
Document #: 1061536

cc: Austin J. Boyle, III, M.D.
Edith L. Lepgold, M.D.
Mark T. Wichman, M.D.

MILWAUKEE ORTHO
1575 N RIVERCENTER DR

MILWAUKEE, WI 53212
414 274 7220

[CQFMAIN] Inquiry
Date 08/26/2003
Time 2:59p
User ANN
Page 1

Patient #: 07-63-45 CASSANDRA L WHITE

Birthdate: 08/17/1970 Age: 33 Sex: F SSN: 397-92-4769
Dr: 4 WICHMAN MD MARK T
RDr: 229 LEPGOLD MD EDITH
Date Registered: 01/03/2002

Bill To #: 07-63-45 CASSANDRA L WHITE

2972 N 74TH STREET H/Ph #: 302 1078
APT 4 W/Ph #: 000 0000
MILWAUKEE, WI 53210
Patient Type: 6 MANAGED CARE Bill Cycle #: 4 Credit Status: 0

Last Transactions

			Billed Through Dates
Charge:	07/17/2003	111.00	07/22/2003
Personal:	03/27/2003	10.00	03/25/2003
Insurance:	08/13/2003	60.75	02/25/2003
			01/21/2003

Location: 1 DOWNTOWN
Diagnosis: 718.31 DISLOCATION, RE

Current Coverages

Cov	Insurance Company	Insurance Plan	Subscriber
1	20 COMPCARE ZRT888924769	2004 COMPCARE BLUE C	CASSANDRA L WHITE

Balances

Total Bal:	10.00	0 - 30:	.00	Budget Due:	.00
- Pending:	.00	31 - 60:	5.00	Non-bud Due:	10.00
= Pat Bal:	10.00	61 - 90:	5.00	Total Due:	10.00
		91 - 120:	.00	Bud Balance:	.00
		121 - 150:	.00	Bud Payment:	.00
		151+ :	.00		

****
Debit mode details
****

Posting Date: 08/26/2002 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 34655 U RDr: 22LEPGOLD MD EDITH
Dr: 3 AJ BOYLE MD Loc: 1 MOS DOWNTOWN OF Total Amount: 111.00
Original Pending Amount: 111.00

Line Detail

08/23/2002-08/23/2002 99213 OV EST INTERMED 718.31 DISLOCATION,
PRT: Unit Chg: 111.00 Units: 1 Line Chg: 111.00

Claim Information

Claim #: 346551 Ins Co: 20 COMPCARE
Filed: 12/03/2002 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: BA:Y PB: N Status: Paid
Claim #: 346552 Ins Co: 52 MANAGED HEALTH SERVICES T19
Filed: 11/05/2002 Plan: 5201 MANAGED HEALTH SERVI
Prior Auth: BA:Y PB: N Status: Paid

----------Receipts----------

Posting Date: 10/11/2002 Allocation Date: 10/11/2002 Batch #: 3
Type: 2000020 PAYMENT CCCOVERAGE Receipt #: 179789 U Claim #: 346551
Total Receipt: .00 Applied: .00

Posting Date: 11/05/2002 Allocation Date: 11/05/2002 Batch #: 3
Type: 2000020 PAYMENT COMPCARE Receipt #: 183491 U Claim #: 346551
Total Receipt: .00 Applied: .00

Posting Date: 11/22/2002 Allocation Date: 11/22/2002 Batch #: 3
Type: 2000052 PAYMENT MHS OPMT N Receipt #: 186426 U Claim #: 346552
Total Receipt: .00 Applied: .00

Posting Date: 11/22/2002 Allocation Date: 11/22/2002 Batch #: 2
Type: 2000052 PAYMENT MANAGED HE Receipt #: 186427 U Claim #: 346552
Total Receipt: .00 Applied: .00

Posting Date: 01/10/2003 Allocation Date: 01/10/2003 Batch #: 3
Type: 2000020 PAYMENT CC OPMT NO Receipt #: 193477 U Claim #: 346551
Total Receipt: .00 Applied: .00

Posting Date: 01/10/2003 Allocation Date: 01/10/2003 Batch #: 3
Type: 2000052 PAYMENT MANAGED HE Receipt #: 193488 U Claim #: 346552
Total Receipt: .00 Applied: .00

Posting Date: 01/29/2003 Allocation Date: 01/29/2003 Batch #: 3
Type: 2000052 PAYMENT MANAGED HE Receipt #: 196091 U Claim #: 346552
Total Receipt: .00 Applied: .00

Posting Date: 03/25/2003 Allocation Date: 03/25/2003 Batch #: 10
Type: 2000020 PAYMENT COMPCARE Receipt #: 204752 U Claim #: 346551
Total Receipt: .00 Applied: .00

Posting Date: 03/25/2003 Allocation Date: 03/25/2003 Batch #: 10
Type: 3000003 CHG ADJ - NO REFERRA Receipt #: 204753 U Claim #:
Total Receipt: 111.00 Applied: 111.00-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	.00	.00	Paid
2	52 MANAGED HEALTH SERVICES T19	.00	.00	Paid

Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	.00	Other Paid	111.00	Pending:	.00
Write-off:	.00	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 11/06/2002 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE

Debit #: 10000183776 U 7000002 - MEDICAL RECORDS FEE
Dr: 3 AJ BOYLE MD Total Amount: 9.00

----------Receipts----------
Posting Date: 11/06/2002 Allocation Date: 11/06/2002 Batch #: 2
Type: 1000006 PAYMENT COPIES1295 Receipt #: 183777 U Claim #:
Total Receipt: 9.00 Applied: 9.00-

----------Payment & Balance Summary----------

Total Amount: 9.00 Total Applied: 9.00 Balance: .00

Posting Date: 01/01/2003 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 43303 U RDr: 22LEPGOLD MD EDITH
Dr: 3 AJ BOYLE MD Loc: 1 MOS DOWNTOWN OF Total Amount: 255.00
Original Pending Amount: 255.00

----------Line Detail----------
12/27/2002-12/27/2002 99213 OV EST INTERMED 718.31 DISLOCATION,
PRT: YYY Unit Chg: 111.00 Units: 1 Line Chg: 111.00
12/27/2002-12/27/2002 73030-3 X-RAY EXAM, SHO 718.31 DISLOCATION,
PRT: YYY Unit Chg: 144.00 Units: 1 Line Chg: 144.00

----------Claim Information----------
Claim #: 433031 Ins Co: 20 COMPCARE
Filed: 01/01/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: BA:Y PB: N Status: Paid

----------Receipts----------
Posting Date: 01/24/2003 Allocation Date: 01/24/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 195657 U Claim #: 433031
Total Receipt: 107.33 Applied: 107.33-
Posting Date: 01/24/2003 Allocation Date: 01/24/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 195658 U Claim #: 433031
Total Receipt: 147.67 Applied: 147.67-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	107.33	147.67	Paid

Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	107.33	Other Paid	.00	Pending:	.00
Write-off:	147.67	Pat Paid On Form:	.00	Pat Bal:	.00

Posting Date: 01/13/2003 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 43742 U RDr: 22LEPGOLD MD EDITH
Dr: 3 AJ BOYLE MD Loc: 1 MOS DOWNTOWN OF Total Amount: 111.00
Original Pending Amount: 111.00

----------Line Detail----------
01/10/2003-01/10/2003 99213 OV EST INTERMED 718.31 DISLOCATION,
PRT: YYY Unit Chg: 111.00 Units: 1 Line Chg: 111.00

----------Claim Information----------
Claim #: 437421 Ins Co: 20 COMPCARE
Filed: 01/13/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: 0236008495311 BA:Y PB: N Status: Paid

----------Receipts----------
Posting Date: 02/04/2003 Allocation Date: 02/04/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 197284 U Claim #: 437421
Total Receipt: 54.77 Applied: 54.77-
Posting Date: 02/04/2003 Allocation Date: 02/04/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 197285 U Claim #: 437421
Total Receipt: 51.23 Applied: 51.23-
Posting Date: 02/04/2003 Allocation Date: 02/04/2003 Batch #: 2
Type: 9000101 Co-ins 5.00 Receipt #: 197286 U Claim #: 437421
Total Receipt: .00 Applied: .00
Posting Date: 03/27/2003 Allocation Date: 03/27/2003 Batch #: 2
Type: 1000001 PATIENT PAYMENT - CA Receipt #: 205112 U Claim #:
Total Receipt: 10.00 Applied: 5.00-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	54.77	51.23	Paid

Ins Totals		Personal Paid:	5.00	*Total Bal*	.00
Paid:	54.77	Other Paid	.00	Pending:	.00
Write-off:	51.23	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 01/16/2003 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 44529 U RDr: 22LEPGOLD MD EDITH
Dr: 4 MT WICHMAN MD Loc: 1 MOS DOWNTOWN OF Total Amount: 174.00
Original Pending Amount: 174.00

----------Line Detail----------
01/14/2003-01/14/2003 99214 OV EST EXTENDED 718.31 DISLOCATION,
PRT: YYY Unit Chg: 174.00 Units: 1 Line Chg: 174.00

==========

----------Claim Information----------
Claim #: 445291 Ins Co: 20 COMPCARE
Filed: 01/16/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: 0236008495311 BA:Y PB: N Status: Paid

----------Receipts----------
Posting Date: 02/07/2003 Allocation Date: 02/07/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 197847 U Claim #: 445291
Total Receipt: 88.74 Applied: 88.74-
Posting Date: 02/07/2003 Allocation Date: 02/07/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 197848 U Claim #: 445291
Total Receipt: 80.26 Applied: 80.26-
Posting Date: 02/07/2003 Allocation Date: 02/07/2003 Batch #: 2
Type: 9000101 Co-ins 5.00 Receipt #: 197849 U Claim #: 445291
Total Receipt: .00 Applied: .00
Posting Date: 03/27/2003 Allocation Date: 03/27/2003 Batch #: 2
Type: 1000001 PATIENT PAYMENT - CA Receipt #: 205112 U Claim #:
Total Receipt: 10.00 Applied: 5.00-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	88.74	80.26	Paid

Ins Totals		Personal Paid:	5.00	*Total Bal*	.00
Paid:	88.74	Other Paid	.00	Pending:	.00
Write-off:	80.26	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 03/07/2003 Batch: 0010 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 48138 U RDr: 22LEPGOLD MD EDITH
Dr: 3 AJ BOYLE MD Loc: 21 SSMC OUTPATIENT Total Amount: 5,250.00
Original Pending Amount: 5,250.00

----------Line Detail----------
02/28/2003-02/28/2003 29806-80 ARTHROSCOPY SHO 718.31 DISLOCATION,
PRT: YYY Unit Chg: 5,250.00 Units: 1 Line Chg: 5,250.00

----------Claim Information----------
Claim #: 481381 Ins Co: 20 COMPCARE
Filed: 03/07/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: 0236008495311SX BA:Y PB: N Status: Paid

----------Receipts----------
Posting Date: 07/08/2003 Allocation Date: 07/08/2003 Batch #: 10
Type: 2000020 PAYMENT COMPCARE Receipt #: 219125 U Claim #: 481381
Total Receipt: .00 Applied: .00

Posting Date: 07/08/2003 Allocation Date: 07/08/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 219308 U Claim #: 481381
Total Receipt: 399.33 Applied: 399.33-
Posting Date: 07/08/2003 Allocation Date: 07/08/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 219309 U Claim #: 481381
Total Receipt: 4,850.67 Applied: 4,850.67-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	399.33	4,850.67	Paid

Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	399.33	Other Paid	.00	Pending:	.00
Write-off:	4,850.67	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 03/07/2003 Batch: 0010 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 48137 U RDr: 22LEPGOLD MD EDITH
Dr: 4 MT WICHMAN MD Loc: 21 SSMC OUTPATIENT Total Amount: 7,935.00
Original Pending Amount: 7,935.00

----------Line Detail----------

02/28/2003-02/28/2003 29806-22 ARTHROSCOPY SHO 718.31 DISLOCATION,
PRT: Unit Chg: 6,563.00 Units: 1 Line Chg: 6,563.00
02/28/2003-02/28/2003 20680 REMOVE DEEP IMP 996.4 MALFUNCTION,
PRT: Unit Chg: 1,372.00 Units: 1 Line Chg: 1,372.00

----------Claim Information----------

Claim #: 481371 Ins Co: 20 COMPCARE
Filed: 03/07/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: 0236008495311SX BA:Y PB: N Status: Paid

----------Receipts----------

Posting Date: 07/09/2003 Allocation Date: 07/09/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 219369 U Claim #: 481371
Total Receipt: 2,449.22 Applied: 2,449.22-
Posting Date: 07/09/2003 Allocation Date: 07/09/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 219370 U Claim #: 481371
Total Receipt: 5,485.78 Applied: 5,485.78-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	2,449.22	5,485.78	Paid

Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	2,449.22	Other Paid	.00	Pending:	.00
Write-off:	5,485.78	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 03/07/2003 Batch: 0010 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 48139 U RDr: 22LEPGOLD MD EDITH
Dr: 21 TR CHRISTENSEN PA Loc: 21 SSMC OUTPATIENT Total Amount: 1,641.00
Original Pending Amount: 1,641.00

----------Line Detail----------
02/28/2003-02/28/2003 29806-1 ARTHROSCOPY SHO 718.31 DISLOCATION,
PRT: Unit Chg: 1,641.00 Units: 1 Line Chg: 1,641.00

----------Claim Information----------
Claim #: 481391 Ins Co: 20 COMPCARE
Filed: 03/07/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: 0236008495311SX BA:Y PB: N Status: Paid

----------Receipts----------
Posting Date: 07/08/2003 Allocation Date: 07/08/2003 Batch #: 10
Type: 2000020 PAYMENT COMPCARE Receipt #: 219127 U Claim #: 481391
Total Receipt: .00 Applied: .00
Posting Date: 07/08/2003 Allocation Date: 07/08/2003 Batch #: 10
Type: 3000002 CHG ADJ - PA ASSIST Receipt #: 219128 U Claim #:
Total Receipt: 1,641.00 Applied: 1,641.00-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	.00	.00	Paid

Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	.00	Other Paid	1,641.00	Pending:	.00
Write-off:	.00	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 03/13/2003 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 48298 U RDr: 22LEPGOLD MD EDITH
Dr: 4 MT WICHMAN MD Loc: 1 MOS DOWNTOWN OF Total Amount: .00
Original Pending Amount: .00

----------Line Detail----------
03/11/2003-03/11/2003 99024 POSTOP FOLLOWUP 718.31 DISLOCATION,
PRT: NNN Unit Chg: .00 Units: 1 Line Chg: .00

----------Receipts----------

==========

----------Payment & Balance Summary----------

			Paid	Write-off	Status
Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	.00	Other Paid	.00	Pending:	.00
Write-off:	.00	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 03/28/2003 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 48306 U RDr: WICHMAN MD MARK T
Dr: 4 MT WICHMAN MD Loc: 1 MOS DOWNTOWN OF Total Amount: 119.00
Original Pending Amount: 119.00

----------Line Detail----------

03/25/2003-03/25/2003 73020-3 X-RAY EXAM, SHO 718.31 DISLOCATION,
PRT: YYY Unit Chg: 119.00 Units: 1 Line Chg: 119.00
03/25/2003-03/25/2003 ADDITIONAL DX 996.4 MALFUNCTION,
PRT: YYY Unit Chg: .00 Units: 1 Line Chg: .00
03/25/2003-03/25/2003 99024 POSTOP FOLLOWUP 718.31 DISLOCATION,
PRT: NNN Unit Chg: .00 Units: 1 Line Chg: .00
03/25/2003-03/25/2003 ADDITIONAL DX 996.4 MALFUNCTION,
PRT: YYY Unit Chg: .00 Units: 1 Line Chg: .00

----------Claim Information----------

Claim #: 483061 Ins Co: 20 COMPCARE
Filed: 03/28/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: BA:Y PB: N Status: Paid

----------Receipts----------

Posting Date: 04/23/2003 Allocation Date: 04/23/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 208922 U Claim #: 483061
Total Receipt: 40.60 Applied: 40.60-
Posting Date: 04/23/2003 Allocation Date: 04/23/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 208923 U Claim #: 483061
Total Receipt: 78.40 Applied: 78.40-

----------Payment & Balance Summary----------

			Paid	Write-off	Status
1	20 COMPCARE		40.60	78.40	Paid
Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	40.60	Other Paid	.00	Pending:	.00
Write-off:	78.40	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 04/14/2003 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 49135 U RDr: 22LEPGOLD MD EDITH
Dr: 4 MT WICHMAN MD Loc: 1 MOS DOWNTOWN OF Total Amount: .00
Original Pending Amount: .00

----------Line Detail----------

04/10/2003-04/10/2003 99024 POSTOP FOLLOWUP 718.31 DISLOCATION,
PRT: NNN Unit Chg: .00 Units: 1 Line Chg: .00
04/10/2003-04/10/2003 ADDITIONAL DX 996.4 MALFUNCTION,
PRT: YYY Unit Chg: .00 Units: 1 Line Chg: .00

----------Receipts----------

----------Payment & Balance Summary----------

			Paid	Write-off	Status
Ins Totals		Personal Paid:	.00	*Total Bal*	.00
Paid:	.00	Other Paid	.00	Pending:	.00
Write-off:	.00	Pat Paid On Form:	.00	Pat Bal:	.00

****

Posting Date: 05/27/2003 Batch: 0002 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 50147 U RDr: WICHMAN MD MARK T
Dr: 4 MT WICHMAN MD Loc: 1 MOS DOWNTOWN OF Total Amount: 144.00
Original Pending Amount: 144.00

----------Line Detail----------

05/22/2003-05/22/2003 73030-3 X-RAY EXAM, SHO 718.31 DISLOCATION,
PRT: YYY Unit Chg: 144.00 Units: 1 Line Chg: 144.00
05/22/2003-05/22/2003 ADDITIONAL DX 996.4 MALFUNCTION,
PRT: YYY Unit Chg: .00 Units: 1 Line Chg: .00
05/22/2003-05/22/2003 99024 POSTOP FOLLOWUP 718.31 DISLOCATION,
PRT: NNN Unit Chg: .00 Units: 1 Line Chg: .00
05/22/2003-05/22/2003 ADDITIONAL DX 996.4 MALFUNCTION,
PRT: YYY Unit Chg: .00 Units: 1 Line Chg: .00

----------Claim Information----------

Claim #: 501471 Ins Co: 20 COMPCARE
Filed: 05/27/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: BA:Y PB: N Status: Paid

----------Receipts----------

Posting Date: 06/19/2003 Allocation Date: 06/19/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 216731 U Claim #: 501471
Total Receipt: 54.69 Applied: 54.69-
Posting Date: 06/19/2003 Allocation Date: 06/19/2003 Batch #: 2

Type: 4000020 WRITE-OFF COMPCARE Receipt #: 216732 U Claim #: 501471
Total Receipt: 89.31 Applied: 89.31-

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	54.69	89.31	Paid

Ins Totals					
Paid:	54.69	Personal Paid:	.00	*Total Bal*	.00
Write-off:	89.31	Other Paid	.00	Pending:	.00
		Pat Paid On Form:	.00	Pat Bal:	.00

Posting Date: 06/23/2003 Batch: 0003 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 54118 U RDr: 22LEPGOLD MD EDITH
Dr: 4 MT WICHMAN MD Loc: 1 MOS DOWNTOWN OF Total Amount: 80.00
Original Pending Amount: 80.00

----------Line Detail----------

06/16/2003-06/16/2003 99212 OV EST BRIEF 718.31 DISLOCATION,
PRT: YYY Unit Chg: 80.00 Units: 1 Line Chg: 80.00

----------Claim Information----------

Claim #: 541181 Ins Co: 20 COMPCARE
Filed: 06/23/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: 0305812075250 BA:Y PB: N Status: Paid

----------Receipts----------

Posting Date: 07/17/2003 Allocation Date: 07/17/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 220729 U Claim #: 541181
Total Receipt: 42.30 Applied: 42.30-
Posting Date: 07/17/2003 Allocation Date: 07/17/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 220730 U Claim #: 541181
Total Receipt: 32.70 Applied: 32.70-
Posting Date: 07/17/2003 Allocation Date: 07/17/2003 Batch #: 2
Type: 9000101 Co-ins 5.00 Receipt #: 220731 U Claim #: 541181
Total Receipt: .00 Applied: .00

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	42.30	32.70	Paid

Ins Totals					
Paid:	42.30	Personal Paid:	.00	*Total Bal*	5.00
Write-off:	32.70	Other Paid	.00	Pending:	.00
		Pat Paid On Form:	.00	Pat Bal:	5.00

Posting Date: 07/17/2003 Batch: 0003 Patient: 07-63-45 CASSANDRA L WHITE
Debit #: 54443 U RDr: 22LEPGOLD MD EDITH
Dr: 4 MT WICHMAN MD Loc: 1 MOS DOWNTOWN OF Total Amount: 111.00
Original Pending Amount: 111.00

----------Line Detail----------
07/15/2003-07/15/2003 99213 OV EST INTERMED 718.31 DISLOCATION,
PRT: YYY Unit Chg: 111.00 Units: 1 Line Chg: 111.00

----------Claim Information----------
Claim #: 544431 Ins Co: 20 COMPCARE
Filed: 07/17/2003 Plan: 2004 COMPCARE BLUE CONFID
Prior Auth: 0305812075250 BA:Y PB: N Status: Paid

----------Receipts----------
Posting Date: 08/13/2003 Allocation Date: 08/13/2003 Batch #: 2
Type: 2000020 PAYMENT COMPCARE Receipt #: 224512 U Claim #: 544431
Total Receipt: 60.75 Applied: 60.75-
Posting Date: 08/13/2003 Allocation Date: 08/13/2003 Batch #: 2
Type: 4000020 WRITE-OFF COMPCARE Receipt #: 224513 U Claim #: 544431
Total Receipt: 45.25 Applied: 45.25-
Posting Date: 08/13/2003 Allocation Date: 08/13/2003 Batch #: 2
Type: 9000101 Co-ins 5.00 Receipt #: 224514 U Claim #: 544431
Total Receipt: .00 Applied: .00

----------Payment & Balance Summary----------

		Paid	Write-off	Status
1	20 COMPCARE	60.75	45.25	Paid

Ins Totals		Personal Paid:	.00	*Total Bal*	5.00
Paid:	60.75	Other Paid	.00	Pending:	.00
Write-off:	45.25	Pat Paid On Form:	.00	Pat Bal:	5.00

CMS
CENTERS for MEDICARE & MEDICAID SERVICES

PART A INTERMEDIARY NATIONAL FQHC INTERMEDIARY MEDICARE
REGIONAL HOME HEALTH INTERMEDIARY
PHONE 414-226-5505 ▾ FAX 414-226-2800

HUMAN RESOURCES

December 10, 2003

Washington Law Offices
8500 West Capitol Drive
Milwaukee, WI 53222

To Whom It May Concern:

During the period February 28, 2003 through July 2, 2003 Cassandra White was absent from work for 692 hours. These missed hours were in conjunction with a medical leave taken for the purpose of surgery. Total wages lost during that time are $ 7,365.84. Through short-term disability, Ms. White received $ 4,230.81.

Feel free to call me if you have further questions. I can be reached at (414) 226-5178.

Sincerely,

Carey Bice

Carey Bice
Payroll Accountant

UNITED GOVERNMENT SERVICES, LLC.
401 WEST MICHIGAN STREET ▾ MILWAUKEE, WI 53203-2804
A CMS CONTRACTED INTERMEDIARY