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ORTHOPAEDIC SURGERY

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July 25, 1984

Mr. Paul D. Eklund Attorney at Law Slo Engineers Building Cleveland, Ohio 44114

> Re: Carol ine Oddo-Giul io File Number: T-7651

Dear Mr. Eklund:

Caroline Oddo-Giulio was examined on June 25, 1984 regarding an accident which occurred on February 27, 1982. This 54-year-old female informed me, in the presence and with the assistance of her daughter, that she was injured on approximately February 28, 1982. At that time, she was shopping and while attempting to make a turn, the cart stopped suddenly. She attempted to turn It again and "a Tot of pain'r in her right knee. She was taken to Euclid General Hospital where "two things of blood' were removed from her right knee. Medication and crutches were prescribed.

Approximately two days after the accident, she came under the care of Dr. Nowacek and, on the same day, under the care of Chiropractor Kulka. The latter "stretched my leg" approximately three times a week. She also received other "therapy".

On April 19, 1982, she was admitted to St. Luke & Hospital by Dr. Nowacek. Surgery was performed and she-remained hospitalized for approximately two weeks. At the time of her discharge, she was wearing a "support" and using crutches.

Thereafter, she continued under Dr. Nowacek's care and wore the support for approximately one month. She continued on crutches until July of 1982. She also received physical therapy as an out-patient.

During 1983, she continued under Dr. Nowacek's care until he left the Cleveland area. She was examined by a "therapist" in 1984.

At the time of this examination, Mrs. Oddo-Giulio stated that "at times it's better - at times I'm in pain". Her symptoms were diffuse and were related to the entire knee. She also noted that "sometimes it feels just like the accident". After walking for approximately five minutes, her knee would become "tired" and she would develop more pain. She ascended and descended the stairs one step at a time. Her knee became swollen in the evening. She would also notice cramps in her muscles. She was taking "pain pills".

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Her past medical history indicated no symptoms referable to her right kneen rior to the accident under discussion. She had been involved in vehicular accidents in 1978 or 1979 and in 1981. She had not injured her knee. She had received no further injuries.

Physical examination revealed a female of approximately her stated age who was of short stature and somewhat overweight. She stated that she was 5 feet 4 inches tall and weighed 175 pounds. She arose from the sitting position without difficulty; ambulated without Timp and was able to ascend and descend the examining table in a normal fashion. In the standing position, there was mild varus deformity bilaterally. She could only perform a 3/4 squat because of pain in her knee. She arose from the squatting position without assistance.

Further examination of her right knee revealed a well-healed, long, median parapatellar incision. There was no measurable quadriceps atrophy nor palpable effusion. There was a full range of motion with a good end point to extension and no crepitus. There was no instability. There was tenderness to palpation about the entire knee.

Radiographs of the right knee revealed no evidence of fracture or dislocation. There was minimal narrowing of the medial joint compartment: There was spurring involving both the patellofemoral and femoral tibial articulations.

The material forwarded to me has been reviewed and does not include written reports from either Dr. Nowacek or Chiropractor Kulka.

Emergency room records of Euclid General Hospital indicate that Mrs. Oddo-Giulio was treated in that facility on February 19, 1982, approximately eight days before the accident. At that time, she had slipped and fallen on "R. side". Examination revealed findings referable to various parts of the body, including 'tender R: patella, R. tibla" Radiographs of the right knee were obtained.

Additional records from Euclid General Hospital indicate that she was also treated on February 27, 1982 the day of the accident. At that time, the examining physician noted "swollen, ecchymotic about R. knee. Swollen, tender; mildly ecchymotic calf. Aspirated 50.0 cc. blood s fat". Radiographs of the right knee were obtained and interpreted by the radiologist as demonstrating "There is a large joint effusion at the right knee. There are mild degenerative changes...a '3.0 mm. rounded density...was present on the previous examination...,, '(The radiographs of the right knee obtained on February 19, 1982 and February 27, 1982 were not included in the packet of radiographs sent to me.) The diagnosis: of the examining physician was "Internal derangment R. knee" although it is difficult to determine the interval between the accident and that examination.

Office records of Chiropractor Kulka cover his treatment between March 8, 1982 and April 1j,1982. At the time of the initial examination, approximately a week after the accident, the patient had some findings referable to the right knee. I am unable to determine what physical findings may have been present on subsequent examinations. Treatment consisted of "manipulation, electrotherapy, ultrasound".

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Records of St. Luke's Hospital indicate that Mrs. Oddo-Giulio was in that facility between April 19, 1982 and May 5, 1982. The examining physician noted "R. knee FROM (full range of motion) ...tenderness medial jt. line & medial border of the patella. No locking. No effusion". On April 20, 1982, approximately two months after the accident, the patient underwent surgery for the post operative diagnosis "Degenerative left medial meniscus, chondromalacia of the medial facet of the left patella". Although degenerative arthritic changes were noted, there were no changes described which could have resulted from the accident which occurred two months previously. The history and physical contained in the discharge summary, dictated by Dr. Nowacek, does not appear consistent with the initial history and physical examination.

Based on the information available to me. 1 believe that Mrs. Oddo-Giulid sustained some injury to her right knee on February 27, 1982. I am unable to determine whether the findings described in the emergency room record of that day are related to that particular incident or to the incident which occurred on February 19, 1982. Assuming that she did sustain some injury to her right knee on February 27, 1982, then she would have required some treatment for a period thereaften. However, I do not betreve that the surgery performed is by Dr. Nowacek on April 20, 1982 was causally related to the accident under discussion. As noted above, there were no findings at the time of surgery which could be related to an accident which had occurred two months previously.

At the time of this examination, approximately two and a half months after the accident, Mrs. Oddo-Giulio has some symptoms referable to her right knee. (Her physical and radiographic examination indicate that her symptoms are on the basis of her pre-existing degenerative joint disease. Assuming that there has been no increase in this condition, which cannot be explained by either the passage of time or the surgery, a believe she with have no permanent disability offectry are routable to the accident of February 27, 1982, a

Very truly yours,

Dennis B. Brooks, M.D.

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