



August 12, 1996

Robert C. Corn, M.D., F.A.C.S.
Timothy L. Gordon, M.D.
Orthopaedic Surgeons

Victoria L. Vance
Attorney at Law
925 Euclid Avenue
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Cleveland, OH 44115-1375

RE: Elizabeth Geist v. Michael Darr, DC

Dear Ms. Vance:

I am writing to you in reference to the above civil action brought on by the plaintiff, Elizabeth Geist and her chiropractor, Dr. Michael Darr. I have had the opportunity to review extensive medical records which included those from Dr. Lawrence Malm, Dr. David Kessler, Dr. J. R. Bestgen, and the records from Lakewood Hospital. I have also had the opportunity to review the medical records from the Cleveland Clinic Foundation, as well as a series of depositions. These included the rather lengthy deposition of the plaintiff, as well as that of the defendant, Dr. Darr.

In addition, there have been a series of x-rays that have been reviewed including the x-rays and scans from the Lakewood Hospital.

After a comprehensive review of this file, including medical records and x-rays, I have come to some conclusions concerning the care and treatment by Dr. Darr. I am expressing these opinions as an orthopaedic surgeon and am addressing primarily the patient's ongoing treatable medical abnormalities, including osteoporosis, osteoarthritis, the remote rib fractures, and the diagnostic procedures.

It is my opinion, within a reasonable degree of medical certainty, that the osteoporosis pre-existed for quite some time prior to the onset of her chiropractic care. It is also my opinion, after review of the records, that there was no history of an acute onset that

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would be compatible with a rib fracture. There was some vague description of chest pain but not the typical extremely well-localized, piercing pain associated with acute bony disruption. Even actual review of the x-rays did not show signs of an acute fracture. I was unable to determine the age of the fractures as some of the x-rays did show fracture healing at the time of the initial rib films. Even the radiologist could not determine the precise age of these fractures. The bone scan also did not add any clearer picture. This study is very sensitive but nonspecific. There is clearly abnormal uptake in a number of ribs. It is impossible to determine the age of these abnormalities. A bone scan will remain positive for at least two years and, in many cases, longer than two years.

It is my opinion, ~~within~~ a reasonable degree of medical certainty, there is no clear evidence of any direct cause and effect relationship between the chiropractic care and the subsequent development of healing rib fractures. After careful review of Dr. Darr's deposition and review of his notes, there was no documented incident in which the typical pain of a fractured rib was noted. There was vague complaints of pain in the chest region, but not the typical pattern one associates with acute traumatic rib fractures.

In *summary*, it is my opinion that although rib fractures were present, it is not clear when these fractures occurred. There is no good correlation between the medical records provided and the precise development of the rib fractures. In my opinion, these fractures are related to her osteoporosis and are pathological in nature. There is no medical correlation between the onset of these fractures, and the care and treatment provided as documented in the medical records.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Corn', with a stylized flourish at the end.

Robert C. Corn, M.D., F.A.C.S.

RCC/bn

cc: File