

## CASE MANAGEMENT REPORT

Patient/Claimant:	Rick Hollifield	Account File #:	Date: 10/16/98	Page: 1
Referred By:	Deanna Cumpain	D/L:	8/28/96	S.S.#:
Insured:	Kvaas Construction	CorVel File #:	26-1480-9	Report No.: 35

PROGRESS REPORT #35MEDICAL SUMMARY

On 9/18/98, Maureen Wallace, R.N., B.S.N., C.C.M., was working with Mr. Hollifield while I was on vacation. According to her notes of that day, she stated that she had spoken with Mr. Hollifield and that he stated that he was having anxiety attacks because he will go to use his left hand and find that he cannot use it the way he used to. Mr. Hollifield said that he was having, perhaps, three or four of those attacks per month. It was suggested that he keep a diary of episodes of increased pain, anxiety attacks, or anything else that seemed unusual and relay that information to his doctor. Mr. Hollifield was also complaining of left wrist pain when his hand turns certain ways.

Hand therapy was being provided on a three time per week basis at that point in time. Mr. Hollifield had also stated that he was not taking any pain medication.

When I returned from vacation on 9/28/98, I received a message from the hand center, informing me that Dr. Braun was unable to see Mr. Hollifield on 10/1/98, and requesting a rescheduling to 10/2/98.

On 10/1/98, I again received another call from the Hand Center requesting to move the time of the appointment to better accommodate Mr. Hollifield.

On 10/2/98, I received a call from Mr. Hollifield confirming the new time for his doctor appointment and informing me that he had stated that his attorneys would be at his doctor appointment.

On 10/2/98, this nurse attended Mr. Hollifield's follow up appointment with Dr. Braun as scheduled. After an extremely long wait, the doctor came out at 5:00 p.m. asking where Mr. Hollifield was. He was told by his receptionist that Mr. Hollifield was calling every few minutes to see how the doctor's appointments were running. The receptionist said that Mr. Hollifield was on his way and therefore, I continued to wait until he got there.

After another long wait period, Mr. Hollifield arrived. The occupational therapist took measurements and stated that Mr. Hollifield had about 50 ° of motion in his wrist and 2/3 of normal for pronation and supination.

After doctor spoke with Mr. Hollifield and examined his wrist, the doctor said that he felt at this point Mr. Hollifield's condition was permanent and stationary.

When addressing the issue of future medical care, the doctor said that Mr. Hollifield might need a wrist fusion (due to the fact that he was having pain in his wrist) or Mr. Hollifield might need a revision of the distal ulna.

When I asked Dr. Braun why the fusion was not done earlier, doctor explained by stating that Mr. Hollifield would have developed a pseudoarthrosis if the fusion had been done earlier and doctor also said that if the fusion was done earlier, the base of the fracture would not have healed. Finally when addressing any type of future surgery, the doctor said that surgery should be provided to relieve pain or improve Mr. Hollifield's function.

When I asked about any additional hand therapy, the doctor said that he felt that no more hand therapy was needed at this point.

When asked about vocational rehabilitation, the doctor stated that Mr. Hollifield was in his estimation a qualified injured worker and that he had lost 50% or more of the grasping function and pushing and pulling function. The doctor said that he would only be able to do some light gripping and could only lift less than five pounds. The doctor also said that doctor visits, pain and anti-inflammatory medications, splints, etc., should also be included in future medical care.

When asked if Mr. Hollifield might be able to do computer work, the doctor stated that he felt Mr. Hollifield could, but that he would need a split keyboard so that he did not develop shoulder problems in addition to his wrist problem. It should be noted that no attorney was present at the 10/2/98 doctor visit.

On 10/5/98, a call was placed to the Hand Center requesting a copy of the doctor's 10/2/98 status report (doctor did not have time to fill it out on the evening of 10/2/98).

A call was also placed to the claims' examiner and a detailed message was left regarding the outcome of the 10/2/98 doctor visit.

Later that day, I received a copy of doctor's status report along with a copy of the hand therapist's report and both reports were sent to the claims' examiner.

On 10/5/98 I also placed a call to Dr. Braun's office and was told that doctor planned to remove a pin from Mr. Hollifield's left wrist as an office procedure before 10/6/98 at 1:45 p.m. The claims' examiner was informed of doctor's plan.

Yesterday, a call was placed to Dr. Braun's office requesting a copy of doctor's 10/2/98 P&S report but I was told it was not available as yet.

### CLIENT SUMMARY

A call was placed to Mr. Hollifield yesterday to determine if pin removal had relieved some of the sharp pain that he was having in his left wrist. I was told that it did relieve some of the pain "a little bit" and that his left hand and wrist felt like it was getting a little better. When asked if he felt he had any additional movement in that wrist, Mr. Hollifield said that there was a little more movement in the joint since the pin was removed.

### RECOMMENDATIONS

1. Follow up with Dr. Braun's office to obtain a copy of the P&S report.
2. Address any additional issues needed should the P&S report not be complete.
3. Continue to monitor this client's status until the P&S report is received and deemed complete.
4. Upon receipt of the P&S report, speak with the claims' examiner regarding file direction.

The next report is due on: 11/5/98

Respectfully submitted,

*Doris Harrah, R.N. - / g.*

Doris Harrah, R.N., B.S.N. C.C.M.

DH:cg

cc: Office File/Case File

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