

PHU Q. LA, D.C., Q.M.E.

Qualified Medical Evaluator, State of California

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08/22/2023

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PATIENT NAME:	DANELIA MIRANDA
SOCIAL SECURITY NUMBER:	██████████
DATE OF BIRTH:	11/13/1956; AGE: 66
EMPLOYER:	WALMART
OCCUPATION:	Stocker / Sorter
INSURANCE ADMINISTRATOR:	SEDGWICK CMS
CLAIM NUMBER:	C1988787; 9728860
WCAB/EAMS:	ADJ16268047; ADJ16267593
DATE OF INJURY:	09/02/2021; CT 09/06/2000 – 06/03/2022
DATE OF SERVICE / EVALUATION:	August 22, 2023

QME MED-LEGAL MMI REPORT

This is a medical legal report and does not qualify for a PPO/Network Discount.

THIS PANEL QME MED-LEGAL EVALUATION IS DEEMED AS AUTHORIZED BY
PURSUANT LC 4062.3 REQUEST BY THE DEFENDANT AT TESTAN LAW AND WITHOUT
OBJECTIONS FROM THE APPLICANT AT BARKHORDARIAN LAW FIRM.

*Pursuant to Title 8, Regulation 9795, this Medical-Legal Evaluation is PAYABLE ONLY BY THE MEDICAL-LEGAL FEE SCHEDULE with the ML Code specified **ML201-95**. This Comprehensive Medical-Legal Evaluation is PAYABLE EVEN IF THE CLAIM IS DENIED as either employer's insurance/attorney for defendant or the applicant has requested this med-legal PQME for determination of issues included medical causation, liability and compensability.*

Dear Gentleperson(s):

Pursuant DWC Rules of Practice and Procedure and at the request of the defendant at Testan Law and without further objections from the applicant at Barkhordarian Law Firm, Ms. Daniela Miranda verified on California's Driver License as Daniela Miranda presented in my office located at 8237 Sierran Avenue Fontana, California 92335, for her qualified medical reevaluation in reference to appointed QME Panel#7504232 and in relating to the alleged industrial injury outlined by way of DWC WCAB Application for Adjudication of Claim involving the patient's neck, low back, right shoulder, right elbow, right wrist/hand, and both knees arose out of the course of her 22 years employment with Walmart as a stocker and sorter.

The sources of fact in this evaluation include the patient's stated history of injury, past medical and employment history, as well as my comprehensive physical examination. In addition, I received QME advocacy letter from the defendant at Testan Law updated background of the claims along with furnished schedule of records certified 89 pages for my review. Also, Jonathan Ibarra, certified medical interpreter #011235 from One Call Language Services assisted on my medical intake form, examination and history interview. Lastly, I had the privilege to spend one hour and twenty-five minutes face-to-face time with Ms. Danelia Miranda personally, included my comprehensive interview and physical examination.

Pursuant per California Labor Code Section 5401.7, this patient signed Injury Fraud and Disclaimer Notices stating that the patient has the medical history retaken today, and stating to the best of the patient's memory and knowledge that this patient is about to render is complete and accurate.

EMPLOYMENT HISTORY / JOB DESCRIPTION:

Ms. Danelia Miranda had an opportunity to review her employment history mentioned below with me at the time of this re-evaluation. She indicated that the facts about her employment history and job description that were obtained previously in her initial evaluation and today re-evaluation remained complete and accurate. Since our last evaluation on September 27, 2022, Ms. Miranda stated that she remained off work and has not return to work for Walmart or any other employers. Ms. Miranda reported the following past chronological employment prior to Walmart as follows:

-Prior to Walmart, 09/06/2000 to 08/19/2022: Mr. Miranda reported that she worked full-time as a jacuzzi cleaner for an unrecalled staffing agency in Irvine for approximately eight months. She attested that she did not report or sustain any injuries to the alleged body parts during this time period.

-Prior to unrecalled staffing agency, 1999 to 2000: Ms. Miranda stated that she stayed home full-time as a housewife and took care of her five children for approximately twenty-seven years.

-Prior to stayed at home housewife, 1980 to 1997: Ms. Miranda remembered that she worked on and off full-time as general laborer for various unrecalled staffing agency through the inland empire for two years. She also affirmed that she did not sustain or reports any injuries to the alleged body parts during this time period.

Job Description described by Ms. Miranda as a stocker/sorter over the course of her employment with Walmart:

Ms. Danelia Miranda began her full-time employment as a stocker and sorter for Walmart on June 6, 2000 and continued to her last worked day on August 19, 2022. Prior to her alleged cumulative and specific injuries, she worked 8 hours a day and 5 to 6 days a week. Her usual working shift was from 10:00 p.m. to 7:00 a.m., and Sunday through Friday. Over the course of her 22 years with Walmart as a stocker, she was assigned to work in 4 separate departments (craft, clothing, cosmetic and personal hygiene). On a typical work day on the night shift, Ms. Miranda described her daily responsibilities as a stocker and sorter entailed of all aspects of stocking and sorting inventory merchandises onto the shelves. She described that she is required to unwrap the pallet and unload boxes ranging from 5 to 50 pounds to place onto the shelves with frequent use of a step ladder. Lastly, she continued to describe that she is required to all day standing, frequent walking, constant bending, stooping, twisting at the waist level, crouching, and squatting throughout his work day, as well as repetitive activities involving reaching, heavy carrying, lifting pushing, pulling above and below shoulder level, as well as continuous use of upper and lower extremities for stocking and sorting merchandises.

HISTORY OF PRESENT ILLNESS:

The patient, Danelia Miranda a 66 years old, right-handed dominant Hispanic female, involved in a specific injury of 09/02/2021 and cumulative injury, 09/06/2000 through 06/03/2022 to her neck, right shoulder, right elbow, right wrist/hand, low back, and bilateral knees, arose over the course of her twenty-two years employment with Walmart as a stocker and sorter.

Mechanism of Specific Injury, 09/02/2021 as related to this claim:

On or about 5:30 a.m. on September 2, 2021 while performing her usual and customary duties as a stocker unloading and lifting heavy boxes, Ms. Miranda stated that she felt a pull in her right

arm and shoulder. Ms. Miranda recalled that she reported to her shift supervisor, Alejandro and was not sent for medical attention initially. Ms. Miranda conveyed that she self-managed with over-the-counter medications for pain. With no improvement in her right shoulder, she was referred to her employer industrial clinic at Concentra on October 6, 2021 and was provided six sessions of therapy with no improvement. Ms. Miranda underwent MRI study and revealed a full rotator cuff tear of her right shoulder. She sought orthopedist, received cortisol injection with no benefits. She was later approved for requested right shoulder surgery with Dr. Ramy N. Elias. Due to her long history of uncontrolled diabetes, the authorized surgery was delayed.

Mechanism of Cumulative Injury, 09/06/2000 – 06/03/2022 as related to this claim:

Ms. Danelia Miranda worked full-time as a stocker/sorter for Walmart in Fontana on September 6, 2000 and continued to her last worked day on August 19, 2022. By way of history sometimes in the last five years of her employment at Walmart, Ms. Miranda stated that she developed cumulative onset of neck, low back, right elbow, right wrist/hand and bilateral knees pain from her daily continuous repetitive usual and customary job duties as a stocker, primarily from heavy lifting boxes, all day standing and repetitive constant usage of her right upper extremity for stocking merchandise on shelves. Ms. Miranda added sometimes in 2003; a box fell off a pallet and hit her neck. She also recalled another incident sometimes in 2010, when she slipped on wet soap floor and injured her knees. She received medical treatment through her employer industrial clinic at Concentra for both injuries and made improvement. In fear of losing her employment and financial necessity, Ms. Miranda conveyed that she self-managed with over-the-counter medications and analgesic cream to control her bodily symptoms. Ms. Miranda stated that she continued to work albeit in pain until August 19, 2022, when her treating physician placed her on temporary total disabled.

Due to frustrations and ongoing bodily symptoms, Ms. Miranda decided to retain legal representation with Barkhordarian Law Firm to assist her in this matter and was referred for further medical evaluation with Dr. Michele H. Van Dyke at Cornerstone Medical Group in San Bernardino on July 11, 2022. Ms. Miranda received a trial of conservative therapy with some benefits. To date, Ms. Miranda remains symptomatic in all her affected orthopedic body parts and presented today for her panel qualified medical reevaluation to further assist in this litigated industrial injury related to Walmart.

CURRENT WORK STATUS:

Ms. Danelia Miranda stated that she is still retained her employment at Walmart. Her last physical worked day was August 19, 2022. Ms. Miranda has not returned to work since with Walmart or any other employers. Ms. Miranda stated that she is continuing to receive State EDD Disability benefits. Lastly, Ms. Miranda denies of any new bodily injuries at the time of this evaluation took place.

PRESENT COMPLAINTS:

NECK

The patient continues to complain of pain in her neck. The pain is continuous in frequency. On a scale of 0 to 10 (where 0 is no pain and 10 is the worst pain), she rates the severity as a 5. She describes the pain as aching, sharp, burning, pressure and tension in character, with radiating toward bilateral shoulder blades and arms. The pain can be exacerbated to a level of 6 in intensity by repetitive turning/twisting and prolong bending forward and bending back.

RIGHT SHOULDER

The patient continues to complain of pain in her right shoulder. The pain is continuous in frequency. On a scale of 0 to 10 (where 0 is no pain and 10 is the worst pain), she rates the severity as a 7. He describes the pain as aching, pulling, sharp, burning, pin & needles, shooting, tingling, pressure and tension. The pain can be exacerbated to a level of 8 in intensity from repetitive lifting, pushing/pulling, flexion, abduction, overhead work and gripping motions.

RIGHT ELBOW

The patient continues to complain of pain in her right elbow. The pain is continuous in frequency. On a scale of 0 to 10 (where 0 is no pain and 10 is the worst pain), she rates the severity as a 7. She describes the pain as aching, pulling, sharp, burning, pin & needles, shooting, tingling, pressure and tension. The pain can be exacerbated to a level of 8 in intensity from repetitive lifting, pushing/pulling, flexion, abduction, overhead work and gripping motions.

RIGHT WRIST/HAND

The patient continues to complain of pain in her right wrist and hand. The pain is continuous in frequency. On a scale of 0 to 10 (where 0 is no pain and 10 is the worst pain), he rates the severity as a 5. She describes the pain as aching, pressure, tension, numbness and tingling in her pinky finger. The pain can be exacerbated to a level of 6 in intensity from repetitive lifting, pushing/pulling, bending, and gripping motions.

LOW BACK

The patient continues to complain of pain in her low back. On a scale of 0 to 10 (where 0 is no pain and 10 is the worst pain), she rates the severity as 5. The pain is continuous in frequency. She describes the pain as aching, sharp shooting, pressure and tension in character that is radiating to bilateral upper, knees, and lower legs. The pain can be exacerbated to a level of 6 in intensity by repetitive lifting/carrying, bending, stooping, turning/twisting, and prolonged sitting, walking, standing, or sitting.

KNEES

The patient continues to complain of equal pain in both knees. On a scale of 0 to 10 (where 0 is no pain and 10 is the worst pain), she rates the severity as a 5. The pain is continuous in frequency and associated with popping, grinding, swelling and locking. She describes the pain as aching, pressure and tension in character that is radiating to bilateral upper, knees, and lower legs. The pain can be exacerbated to a level of 7 in intensity by prolong standing, walking on even ground, climbing, repetitive squatting, kneeling, stooping, running, and jumping.

PAST RELEVANT MEDICAL HISTORY:

SERIOUS ILLNESSES

The patient reported hypertension, high cholesterol, and diabetes mellitus to serious illnesses. She is currently under monitor from her primary care physician for these illnesses.

CURRENT MEDICATIONS

The patient stated she is currently managing with prescribed medications for hypertension and diabetes, as well as over the counter Aleve for pain control as needed.

ALLERGIES

The patient is allergic to Lisinopril.

SURGERIES/HOSPITALIZATION

The patient reported NONE to any recent hospitalizations. She reported of two prior surgeries:

1. Sometimes in 2000, Ms. Miranda underwent hysterectomy procedure and denies further complications.
2. Sometimes in 1991, Ms. Miranda had a C-Section and denies further complications.

PREVIOUS WORK-RELATED ACCIDENTS/INJURIES

The patient reported of previous work-related injuries with Walmart:

1. Sometimes in 2010, Ms. Miranda stated that she slipped on soap floor and injured both knees at Walmart. She received medical treatment from Concentra and placed on a wheelchair for one month. She made improvement and return to regular duties later.
2. Sometimes in 2003, Ms. Miranda remembered that a box fell from the pallet onto her neck at Walmart. She also received medical treatment from Concentra and made improvement.

PREVIOUS AUTO / SPORT / PERSONAL ACCIDENTS/INJURIES

The patient reported NONE to previous automobile, sport or other personal injuries.

PERSONAL HOBBIES INTEREST / DAILY ROUTINE

The patient denies any personal hobbies. Currently, Ms. Miranda lives with her husband and children, and is mostly homebound. She stated that helps prepare meals for her family, and performs some necessity light house chores. She stated the pain limited her overall activities of daily living. She often watches after herself carefully and avoid heavy lifting whenever she can.

SOCIAL AND FAMILY HISTORY

FAMILY HISTORY

The patient reported that his family history is noncontributory to arthritis, sickle cell, asthma, thyroid and cancer. She reported that both her parents are deceased, father at 82 to stroke and mother at 80 to heart attack. She reported of three other siblings. Two brothers passed away at 70 and 50 to respiratory and heart attack. One sister passed away to Covid-19 at 71.

SOCIAL HISTORY

The patient is married and reported of five adult children with 4 girls and 1 boy with no known health issues. She denies abuse use of tobacco, alcohol and any other elicited drugs.

REVIEW OF SYSTEMS:

General:

The patient reported none.

Cardiovascular:

The patient reported none.

Respiratory:

The patient reported none.

Gastrointestinal:

The patient reported none.

Genitourinary:

The patient reported none.

Endocrine

The patient reported none.

ACTIVITIES OF DAILY LIVING

In the area of self-care hygiene, the pain in her neck, right elbow, right wrist, low back and knees interferes with bathing and dressing.

In the area of non-specialized hand activity, the pain in her neck, low back, right elbow, right wrist, and hand interferes with grasping, and lifting.

In the area of travel, the pain in her neck, back, right elbow, wrist/hand and knees interferes with driving, and riding.

In the area of physical activity, the pain in her low back, and knees interferes with standing, reclining, walking, and climbing stairs.

In the area of sleep, the pain in all her affected body parts interferes with nocturnal sleep pattern and restful sleep.

PAIN ASSESSMENT:

On the Visual Analogue Pain Scale, the patient reports the average pain ranging from 5 out of 10. The patient also reported 50% of her awake hours due to pain. Lastly, she reported that her pain level at its best is 4, at its worst is 7 out of possible 10, worst pain possible.

GENERAL PHYSICAL EXAMINATION:

HEIGHT: 5 feet 0 inches tall WEIGHT: 158 pounds PULSE: 80
BLOOD PRESSURE: 122/90 mmHg w/ htn med. Right-handed, Hispanic female.

Grip strength in kilograms:
RIGHT (Dominant): 10 / 9 / 7

LEFT (Non-Dominant): 14 / 13 / 12

Visual Inspection: There is no muscle atrophy noted. Both upper and lower extremities appear symmetrical bilaterally.

Alert and Cooperative: Yes.

Observation: slow movements..

Is patient able to squat? No, due to guarded pain in her low back and knees.

Waddels' malingering signs: None detected. NEGATIVE of Waddel's signs tested below:

- Tenderness tests: superficial and diffuse tenderness and/or nonanatomic tenderness.
- Simulation tests: these are based on movements which produce pain, without actually causing that movement, such as axial loading and pain on simulated rotation.
- Distraction tests: positive tests are rechecked when the patient's attention is distracted, such as a straight leg raise test.
- Regional disturbances: regional weakness or sensory changes which deviate from accepted neuroanatomy.
- Overreaction: subjective signs regarding the patient's demeanor and reaction to testing.

CERVICAL SPINE:

Device Used: Goniometer

<u>Range of Motion:</u>	<u>Normal (degrees)</u>	<u>Measure #1</u>	<u>#2</u>	<u>#3</u>
Flexion	50	42	41	40
Extension	60	51	48	46
Right Rotation	80	70	68	65
Left Rotation	80	71	68	67
Right Lateral Bending	45	42	39	37
Left Lateral Bending	45	40	36	35

Palpation:

Examination of the cervical spine reveals 2+ out of possible 4+ palpable tightness over the sternocleidomastoid, upper trapezius, splenius, levator scapulae, C1, C2, C3, C4, C5, C6 and C7 spinous processes, as well as C1, C2, C3, C4, C5, C6 and C7 transverse processes, bilaterally.

Orthopaedic Tests:

Compression (nerve root involvement) test is POSITIVE bilaterally. Cervical Distraction (radicular pain) test is POSITIVE bilaterally.

RIGHT SHOULDER: Device Used: Goniometer.

<u>Range of motion:</u>	<u>Normal (degrees)</u>	<u>Right Measured</u>			<u>Left Measured</u>		
		<u>#1</u>	<u>#2</u>	<u>#3</u>	<u>#1</u>	<u>#2</u>	<u>#3</u>
Flexion	180	112	110	110	180	180	180
Extension	50	30	30	30	50	50	50
Abduction	180	110	109	108	180	180	180
Adduction	50	30	30	28	50	50	50
Internal Rotation	90	60	59	58	90	90	90
External Rotation	90	51	50	50	90	90	90

Palpation:

Examination of right shoulder reveal 2+ out of possible 4+ palpable myospasm over the deltoid anterior/posterior/lateral, supraspinatus, infraspinatus, teres minor, subscapularis, and the acromioclavicular joint.

Orthopaedic Tests:

Impingement Test (Impingement or rotator cuff disorder), Codman Drop Arm (Rotator Cuff Tear) are POSITIVE on the right, Speed's (Bicipital tendon) and, Yeargason's Sign (bicep tendon) are POSITIVE on the right.

Myotomes Tests:

C5 (Deltoid) 4/5 right, 5/5 left, C6 (Biceps, Wrist Extensors) 4/5 right, 5/5 left, C7 (Triceps, Wrist Flexors) 4/5 right, 5/5 left.

4=good; complete ROM against gravity with some resistance.

5=normal; full ROM against gravity & full resistance (5 seconds).

RIGHT ELBOW

Device Used: Goniometer

<u>Range of motion:</u>	<u>Normal (degrees)</u>	<u>Right Measured</u>			<u>Left Measured</u>		
		#1	#2	#3	#1	#2	#3
Flexion	140	120	120	120	140	140	140
Extension	0	0	0	0	0	0	0
Pronation	80	61	60	58	80	80	80
Supination	80	61	60	59	80	80	80

Palpation:

Examination of right elbow reveals 2+ out of possible 4+ palpable myospasm and tenderness over the supinator, lateral epicondyle, ulnar and radial collateral ligaments.

Orthopaedic Tests:

Cozen's Test (lateral epicondylitis) and Tinel's (at the elbow for ulnar neuropathy) is POSITIVE on the right.

Myotomes Tests:

C5 (Deltoid) 4/5 right, 5/5 left, C6 (Biceps, Wrist Extensors) 4/5 right, 5/5 left, C7 (Triceps, Wrist Flexors) 4/5 right, 5/5 left.

4=good; complete ROM against gravity with *some* resistance.

5=normal; full ROM against gravity & *full* resistance (5 seconds).

RIGHT WRIST/HAND

Device Used: Goniometer

<u>Range of motion:</u>	<u>Normal (degrees)</u>	<u>Right Measured</u>			<u>Left Measured</u>		
		#1	#2	#3	#1	#2	#3
Dorsiflexion	60	50	50	49	60	60	60
Palmar Flexion	60	50	50	50	60	60	60
Radial Deviation	20	15	15	15	20	20	20
Ulnar Deviation	30	21	20	20	30	30	30

Palpation:

Examination of right wrist/hand reveals 2+ out of 4+ possible palpable tightness over the extensor retinaculum, flexor retinaculum, flexor digitorum, palmaris longus, adductor/abductor pollicis, radiocarpal joint and carpal bones.

Orthopaedic Tests:

Phalen's sign (CTS), Tinel's sign (CTS), Compression Test (CTS) are POSITIVE on the right, and Finkelstein's test (suggest tenosynovitis) is POSITIVE on the right. Scaphoid shift Watson test (scapho-lunate instability) is negative bilaterally.

Neurovascular:

Neurovascular status is intact with good capillary refill, less than 2 seconds in all digits.

Myotomes Tests:

C6 (Biceps, Wrist Extensors) 4/5 right, 5/5 left, C7 (Triceps, Wrist Flexors) 4/5 right, 5/5 left, C8 (Finger Flexors) 4/5 right, 5/5 left.

Sensory:

C5 through C8 dermatomal distributions are slightly DECREASED on the right comparing to unremarkable left.

Reflexes: Deep tendon reflexes of the biceps (C5) and Brachioradialis (C6) are 2+ bilaterally. 2+=Normal; 1+=Diminished.

LUMBAR SPINE

Device Used: Goniometer

Range of motion:	Normal (degrees)	Measure #1	#2	#3
Flexion	60	41	40	38
Extension	25	15	15	15
Right Lateral Flexion	25	21	20	19
Left Lateral Flexion	25	20	19	18

Palpation: Examination of the low back reveals 2+ out of possible 4+ palpable myospasm over the lumbar paraspinals, iliac crest, PSIS, spinous processes 1, 2, 3, 4, and 5, and transverse processes 1, 2, 3, 4, and 5, gluteus, piriformis musculatures bilaterally.

Orthopaedic Tests: SLR (Straight Leg Raise Test) is POSITIVE with greater severity on the right than left, and Kemp's Test is POSITIVE with greater severity on the right than left, Heel Walk (L4-L5) & Toe Walk (S1) are POSITIVE with greater severity on the right than left.

Sensory Tests: L1 through S1 dermatomal distributions are slightly DECREASED on the right comparing to left.

Motor: L2-L3 (Hip Flexors) grade 4/5 right, 5/5 left.
L4-L5 (Hip Extensors) grade 4/5 right, 5/5 left.

4=good; complete ROM against gravity with some resistance.
5=normal; full ROM against gravity & full resistance (5 seconds).

KNEES

Device Used: Goniometer

<u>Range of motion:</u>	<u>Normal (degrees)</u>	<u>Right Measured</u>			<u>Left Measured</u>		
		<u>(degrees)</u>			<u>(degrees)</u>		
		#1	#2	#3	#1	#2	#3
Flexion	140	135	135	132	135	134	132
Extension	0	0	0	0	0	0	0

Orthopaedic Tests:

McMurray (meniscal tear) is POSITIVE bilaterally and Lachman's (ACL pathology) 30 degrees is negative bilaterally.

Valgus Stress Test (medial, lateral instability) and Anterior Drawer (anterior instability) tests are POSITIVE bilaterally.

Motor:

L3-L4 (Knee Extensors) grade 4/5 right, 4/5 left and L5-S1 (Knee Flexors) grade 5/5 right, 5/5 left.

4=good; complete ROM against gravity with some resistance.
5=normal; full ROM against gravity & full resistance (5 seconds).

Motor:

L4-L5 (Ankle Extensors) grade 4/5 bilaterally, S1-S2 (Ankle Flexors) grade 5/5 bilaterally, L4 (Inversion) grade 5/5 bilaterally, L5-S1 (Eversion) grade 4/5 bilaterally.

4=good; complete ROM against gravity with some resistance.
5=normal; full ROM against gravity & full resistance (5 seconds).

REVIEW OF DIAGNOSTIC STUDIES:

MRI OF THE RIGHT SHOULDER dated 11/15/2021 from Simon Med Imaging with radiologist, Jennifer Lin, MD interpreted and rendered with the following IMPRESSION: 1. Complete full thickness tear of the supraspinatus with 0.9 cm of retraction of the torn tendon. 2. Moderate infraspinatus and subscapularis tendinosis without evidence of tear. Mild tendinosis of the intra-articular portion of the long biceps tendon. 4. No labral tear.

X-ray of the Cervical Spine, 5 views dated 12/17/2021 from Concentra with radiologist, Jon fish, MD interpreted and rendered with the following findings and IMPRESSION: negative cervical spine examination. There is a mild hyperostosis at the anterior aspects of multiple interspaces, notably C2-3, 4-5, and 6-7.

REVIEW OF MEDICAL RECORDS:

The following relevant records received from the defendant at Testan Law that were served to opposing party for discovery and submitted to our office for review. Total reviewed of relevant records received and certified of 89 pages. I had opportunity to review these all submitted records and would like to cite the most important facts in connection with this litigated workers' compensation claim as follows:

Defense's Advocacy Letter dated July 15, 2023 from Testan Law with Matthew Chue, Esq. addressed to this office and updated background of the claim involving Danelia Miranda versus Walmart specific injury of 09/02/2021 to the right shoulder and alleging cumulative injury from 09/06/2000 through 06/03/2022 to neck, back, right elbow, right wrist/hand and bilateral knees. This office is requested to conduct a thorough QME reexamination and address all disputed issues pertaining to Ms. Miranda's orthopedic medical issues. Copy of letter and said relevant records were also served to applicant's office and claims adjuster at Sedgwick CMS.

Permanent and Stationary Report in the field of dentistry by means of telehealth dated 10/11/2022 from The Dental Trauma Center by David Schames, DDS reevaluated Ms. Miranda for bruxism in response to her orthopedic pain and industrial related stressors. Dr. Schames diagnosed with aggravated bruxism, myalgia of the facial muscles of mastication, trigeminal nerve pain, capsulitis of right TMJ, aggravated inflammation of the gums. Pain impairment: Dr. Schames issued a 2% impairment of the whole person. Future medical care: Ms. Miranda will require any dental treatment that has arisen, or may rise in the future, as a consequence of the Xerostomia, acidic salivary environment, or for the destructive consequences of her bruxism.

Panel QME in Dentistry dated 05/05/2023 from Abri Dental by David Abri, DDS evaluated Danelia Miranda for her dental related issue on April 11, 2023. Dr. Abri diagnosed with bruxism/parafunctional habit-industrial related, myofascial pain of the facial musculature-industrial related, myalgia-industrial related, periodontal disease (not industrially related). Future medical treatment: fabrication of an orthotic device, night guard to be worn at night to help with myofascial pain, upper and lower denture to stabilize her bite. Permanent and stationary: patient is not MMI.

Panel QME in the specialty of internal medicine dated 06/05/2023 by Archis Desai, MD evaluated Daniela Miranda for her diabetes and high blood pressure. R. Desai diagnosed Ms. Miranda with diabetes mellitus II and hypertension. Causation: Dr. Desai opined that the applicant's HTN and DM-II are non-industrial in nature. The patient was diagnosed with HTN and DM-II before 2000, which was when she started with Walmart. Apportionment: non-industrial related.

CLINICAL DIAGNOSES IMPRESSION & ASSESSMENT:

1. Cervical Radiculitis, non-verifiable.
2. Right Shoulder Rotator Cuff Tendinitis, a full thickness supraspinatus tendon tear, MRI 11/15/2021.
3. Right Elbow Epicondylitis, medial and lateral.
4. Right Wrist/Hand Tenosynovitis with probable carpal tunnel syndrome, non-verifiable.
5. Lumbar Radiculitis, non-verifiable.
6. Bilateral Knee Bursitis, rule out meniscal derangement.

APPORTIONMENT AND CAUSATION:

My opinion regarding industrial causation remains unchanged with respect to my previous initial evaluation on September 27, 2022 with Ms. Danelia Miranda. To reiterate with regard to specific injury of September 2, 2021, the claim accepted by the defendant for the right shoulder. With regard to cumulative injury, 09/06/2000 - 06/03/2022, it is my medical opinion remained with reasonable medical degree of certainty that Ms. Miranda's neck, low back, right elbow, right wrist/hand and bilateral knees were industrial causation as a result from her repetitive job duties as a stocker and sorter arose over the course of his twenty-two years employment at Walmart, Fontana. On the other hand, it is worth noted that Ms. Miranda's advance age at 66, as well as x-ray and MRI imaging studies revealed joint degenerative diseases. Therefore, the issue of apportionment is warranted in this case and will appropriately be addressed as follows:

With regard to the right shoulder and based upon reasonable medical probability, I apportion ninety percent (90%) of the permanent impairment industrial related to specific injury of 09/02/2021 at Walmart. The remaining ten percent (10%) is non-industrial related to Walmart and factored to naturally occurring degenerative process at advance age of 66.

With regard to the right elbow, right wrist/hand, low back and based upon reasonable medical probability, I apportion ninety percent (90%) of the permanent impairment industrial related to cumulative injury at Walmart. The remaining ten percent (10%) is non-industrial related to Walmart and factored to naturally occurring degenerative process at advance age of 66.

With regard to the neck and based upon reasonable medical probability, I apportion ninety percent (90%) of the permanent impairment industrial related to Walmart with 40% is factored to prior specific injury in 2003 when a box fell from the pallet onto Ms. Miranda's neck, and 50% to cumulative injury at Walmart. The remaining ten percent (10%) is non-industrial related to Walmart and factored to naturally occurring degenerative process at advance age of 66.

With regard to bilateral knee and based upon reasonable medical probability, I apportion ninety percent (90%) of the permanent impairment industrial related to Walmart with 40% is factored to prior specific injury in 2010 when Ms. Miranda tripped and fell on soap floor at Walmart, and 50% to cumulative injury at Walmart. The remaining ten percent (10%) is non-industrial related to Walmart and factored to naturally occurring degenerative process at advance age of 66.

TREATMENT/DISCUSSION:

I am pleased to reexamine Ms. Miranda today and continue to find her to be franked, cooperative, credible and consistent in her responses, as well as demonstrated her true anatomic and physiologic restrictions predominantly in all her affected orthopedic parts, primarily the right rupture rotator cuff shoulder. At this juncture in my medical opinion, Ms. Miranda is reasonably achieved maximum medical improvement and is considered at permanent and stationary. However, future medical care is indicated. Ms. Miranda is recommended to continuing access to reasonable medical treatments including: analgesics and oral anti-inflammatory medications for pain control, additional conservative therapy in form of chiropractic, physical therapy and acupuncture within the MTUS Guidelines for periodic flare-ups, update medically necessary diagnostic studies, as well as pain management for cervical and lumbar spine, and follow up with orthopedist for her right shoulder should Ms. Miranda opt to pursue with previously authorized surgery. As for her other associated complaints of psyche, diabetes, hypertension, and dental related to this claim, I respectfully defer to the appropriate panel in the areas of psychiatry, internal medicine and dentistry.

FUTURE MEDICAL CARE:

Ms. Miranda is reasonably achieved maximum medical improvement at this time. Future medical care is warranted in this case. Ms. Miranda is recommended to continuing access to reasonable medical treatments including: analgesics and oral anti-inflammatory medications for pain control, additional conservative therapy in form of chiropractic, physical therapy and acupuncture within the MTUS Guidelines for expected periodic flare-ups, update medically necessary diagnostic studies, as well as pain management for cervical and lumbar spine, and follow up with orthopedist for her right shoulder should Ms. Miranda opt to pursue with previously authorized surgery. As for her other associated complaints of psyche, diabetes, hypertension, and dental related to this claim, I respectfully defer to the appropriate panel in the areas of psychiatry, internal medicine and dentistry.

DISABILITY AND WORK RESTRICTIONS:

It is my medical opinion that Ms. Danelia Miranda is not capable of returning to work as a stocker for Walmart. In efforts to protect and further injury to the underlying condition, it is my medical opinion that Ms. Miranda is precluded from heavy lifting or carrying over 5 pounds, repetitive bending, stooping, squatting, grasping, overhead reaching or pulling and limit use of her upper and lower extremities, as well as prolong walk more than one hour. She is encouraged to wear wrist, lumbar and knee supports should she engages in any strenuous activities. Ms. Miranda is now considered permanent partial disabled.

AMA RATING IMPAIRMENT:

Ms. Danelia Miranda will be rated according to the *AMA Guides to the Evaluation of Permanent Impairment, Fifth Edition*, in my medical opinion is most appropriate and accurately reflected the patient's true level of impairment.

Cervical Spine:

Ms. Miranda's objective findings presented with muscle guarding, along with nonverifiable radicular complaints in the cervical spine. She is best rated according to the DRE (Diagnosis Related Estimate) method. According to table 15-5 on page 392, she is qualified for DRE Cervical Category II and yielded a **6% whole person impairment**.

Lumbar Spine:

Ms. Miranda's objective findings presented with muscle guarding, along with nonverifiable radicular complaints in the lumbar spine. She is best rated according to the DRE (Diagnosis Related Estimate) method. According to table 15-3 on page 384, she is qualified for DRE Lumbar Category II and yielded a **6% whole person impairment**.

Right Shoulder:

Using Figure 16-40 on page 476, Figure 16-43 on page 477, and Figure 16-46 on page 479, Ms. Miranda has maximal measurements in: I-flexion 112 = 5% + I-extension 30 = 1% + I-abduction 110 = 3% + I-adduction 30 = 1% + I-internal rotation 60 = 2% + I-external rotation 51 = 1%=====> 13% upper extremity impairment due to loss of range of motion of the right shoulder. Using Table 16-3 on page 439 to convert to whole person impairment yielded a **8% WPI in the right shoulder**. (I=Impairment)

Right Elbow:

Using Figure 16-34 on page 472, Figure 16-37 on page 474, Ms. Miranda has a maximal measurement in: I-Flexion of 120 degree = 1% + I-Extension of 0 degree = 0% + I-Pronation of 61 = 1% + I-Supination of 61 = 1%====> 3% upper extremity impairment due to loss of range of motion of the left elbow. (I=Impairment) Using Table 16-3 on page 439 to convert to whole person impairment yielded a **2% WPI in the right elbow**. (I=Impairment)

Right Wrist:

Using Figure 16-28 on page 467, Figure 16-31 on page 469, Ms. Miranda has a maximal measurement in: I-flexion 50 = 2% + I-extension 50 = 2% + I-radial deviation 15 = 1% + I-ulnar deviation 21 = 2%=====> 7% upper extremity impairment due to loss of range of motion of the right wrist. (I=Impairment). Using Table 16-3 on page 439 to convert 7% upper extremity impairment to **whole person impairment** yielded a **4% WPI in the right wrist**.

Knees: After assessing other methods, applying manual muscle testing method using Table 17-8 on page 532 in my opinion is most appropriate and accurately reflected the patient's true level of impairment.

Right Knee: Using Table 17-7 on page 531 and Table 17-8 on page 532, Ms. Miranda's knee flexion muscle strength is measured a grade 5/5, yielded a 0% lower extremity impairment.

Using Table 17-7 on page 531 and Table 17-8 on page 532, Ms. Miranda's knee extension muscle strength is measured a grade 4/5 yielded a 12% lower extremity impairment.

Using Table 17-3 on page 527 to convert from lower extremity to Whole Person Impairment, **right knee** has combined 12% LEI to **5% WPI (whole person impairment)**.

Left Knee: Using Table 17-7 on page 531 and Table 17-8 on page 532, Ms. Miranda's knee flexion muscle strength is measured a grade 5/5, yielded a 0% lower extremity impairment.

Using Table 17-7 on page 531 and Table 17-8 on page 532, Ms. Miranda's knee extension muscle strength is measured a grade 4/5 yielded a 12% lower extremity impairment.

Using Table 17-3 on page 527 to convert from lower extremity to Whole Person Impairment, **left knee** has combined 12% LEI to **5% WPI (whole person impairment)**.

Pain:

According to Chapter 18 of the AMA Guides, Ms. Miranda is given a **2% pain-related impairment** rating for her subjective pain level that interfered with her activities of daily living. It is my medical opinion that the burden of Ms. Miranda's condition does warrant her that.

VOCATIONAL REHABILITATION:

In my medical opinion, Ms. Danelia Miranda is not capable of returning to her previous occupation as a stocker at Walmart. Should she is not able to find new employment with prescribed work restrictions; she is medically qualified to receive a vocational rehabilitation voucher to retrain into a more suitable vocation.

REASONS FOR OPINION:

I derived the above opinions from the oral medical history as related by the patient, available medical records, employment and medical histories, diagnostic studies, credibility of the patient, examination findings, and clinical experience treating and evaluating injured patients with the same or similar conditions.

I trust this information is sufficient and justified for your needs. If I can be of further help, please feel free to contact our office.

AFFIDAVIT OF COMPLIANCE:

This medical report was hand-drafted and/or dictated by me and typed by me. This report expresses my professional findings, opinions and conclusions on matters discussed.

I declare under penalty of perjury that the information contained in this report and its attachments, if any, is true and correct to the best of my knowledge and belief, except to information that I have indicated I received from others. As to that information, I declare under penalty of perjury that the information accurately describes the information provided to me and, except as noted herein, that I believe to be true.

Under the newly mandated effective April 1, 2021 Medical-Legal Fee Schedule, this report is coded as an ML201-95 Comprehensive Medical-Legal Evaluation.

TITLE 8 CCR 9793(n) DECLARATION OF ATTESTATION

This office attest and verify under penalty of perjury of the total number of pages of relevant records reviewed by the physician as part of the medical-legal evaluation and preparation of the report consisted of 89 pages provided from the defendant at Testan Law on August 17, 2023.

I have not violated Labor Code Section 139.3 and the contents of the report and bill are true and correct to the best of my knowledge. This statement is made under penalty of perjury.

Date signed report, this 24th day of August, 2023, at Fontana, San Bernardino County of California.

Sincerely,



Phu Q. La, D.C., Q.M.E.
Qualified Medical Evaluator,
State of California



Physician's Return-to-Work & Voucher Report

For injuries occurring on or after January 1, 2013

☒ The Employee is P&S from all conditions and the injury has caused permanent partial disability

Employee Last Name MIRANDA	Employee First Name DANELIA	MI _____	Date of Injury 09/02/2021
Claims Administrator: SEDGWICK CMS	Claims Representative REGINA WOODSON	_____	
Employer name: WALMART	Employer Street Address: _____	_____	
Employer City: FONTANA	State CA	Zip Code _____	Claim No. 9728860

☐ The Employee can return to regular work

☒ The Employee can work with restrictions: 1-2 hours 2-4 hours 4-6 hours 6-8 hours None

Stand	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bend	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Twist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reach	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crawl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reach	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(R/L) Bilat Hand(s) (circle): Grasp	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(R/L) Bilat Hand(s) (circle): Push/Pull	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Lift/Carry Restrictions: May not lift/carry at a height of 2 FEET more than 5 lbs. for more than 4 hours per day.

Other Restrictions:

MUST WEAR WRIST, BACK AND KNEES SUPPORTS WHEN ON DUTY.

If a Job Description has been provided, please complete: Job Description provided of: ☐ Regular ☐ Modified ☐ Alternative Work

Job Title: _____ Work Location: _____

Are the Work Duties compatible with the activity restrictions set forth in the provided job description? ☐ Yes ☐ No, explain below

Physician's Name PHU Q. LA, D.C., Q.M.E. Role of Doctor (PTP, QME, AME)

Physician's Signature Date 08/22/2023

PROOF OF SERVICE BY MAIL

In Accordance with code Civ. Proc.

STATE OF CALIFORNIA, COUNTY OF SAN BERNARDINO

The undersigned declares:

I am a citizen of the United States of America and am employed in the aforesaid county, in the state of California.

I am over the age of 18 years and not a party to the within action; my business address is: 8237 Sierra Avenue Fontana, California 92335.

On the date indicated, I served the attached reports/forms to the marked parties in this action by placing a true copy thereof, enclosed in a sealed envelope, addressed as follows:

PANEL QME MED-LEGAL MMI REPORT

RE: **DANELIA MIRANDA vs. WALMART**

SEDGWICK Claim: **C1988787; 9728860**

WCAB/EAMS: **ADJ16268047; ADJ16267593 VNO**

Ms. Regina Woodson

SEDGWICK CMS

P.O. Box 14731

Lexington, KY 40512

Matthew Chue, Esq.

Testan Law

31330 Oak Crest Drive

Westlake Village, CA 91361

Anthony Cho, Esq.

Barkhordarian Law Firm

6047 Bristol Parkway

Culver City, CA 90230

Workers' Compensation Appeal Board

6150 Van Nuys Blvd., Suite 110

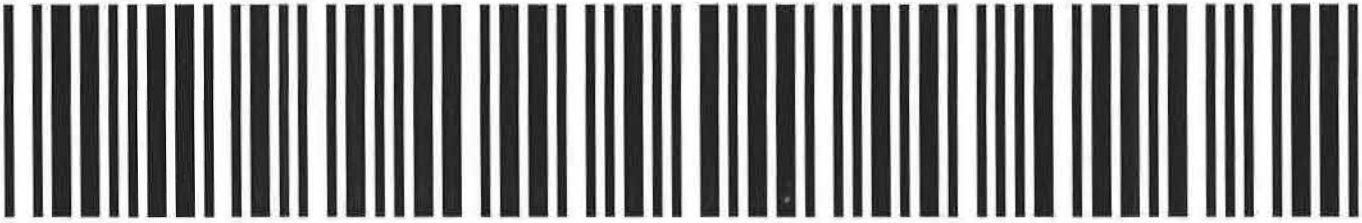
Van Nuys, CA 91401

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration was executed on 08/24/2023 in the City of Fontana, County of San Bernardino, and the State of California.

Print Name: Brenda Pham

Signature: 

DOCUMENT SEPARATOR SHEET



Product Delivery Unit

ADJ



Document Type

MED-LEGAL REPORT



Document Title

QME REPORT



Document Date

08/22/2023

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Author

PHU Q LA DC QME

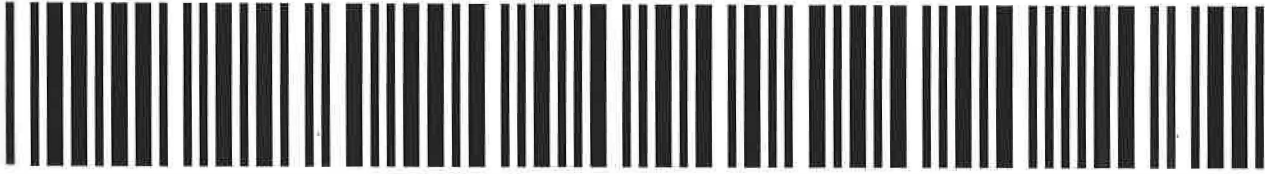
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STATE OF CALIFORNIA
DWC DISTRICT OFFICE

DOCUMENT COVER SHEET



Is this a new case? Yes ☐ No ☒ Companion Cases Exist ☒ Walkthrough Yes ☐ No ☒

More than 15 Companion Cases ☐

08/22/2023

Date:(MM/DD/YYYY)

SSN: 622072074

ADJ16268047

Case Number 1

☒ Specific Injury

09/02/2021

☐ Cumulative Injury

(Start Date: MM/DD/YYYY)

(End Date: MM/DD/YYYY)

(If Specific Injury, use the start date as the specific date of injury)

Body Part 1:



Body Part 3:



Body Part 2:



Body Part 4:



Other Body Parts:



Please check unit to be filed on (check only one box)



ADJ



DEU



SIF



UEF



INT



RSU

Companion Cases

ADJ16267593

Case Number 2

☐ Specific Injury

09/06/2000

06/02/2022

☒ Cumulative Injury

(Start Date: MM/DD/YYYY)

(End Date: MM/DD/YYYY)

(If Specific Injury, use the start date as the specific date of injury)

Body Part 1:



Body Part 3:



Body Part 2:



Body Part 4:



Other Body Parts:

