Ms. Jones was seated, sitting straight, with both feet on the floor and facing (forward) towards the front of the cab (north). She saw the defendant’s cab approaching, screamed, and braced. On impact she was thrown forward and back. Immediately she developed a pain in her head (as if it were being pumped with air); she felt very hot and weak and had a twinge in her left lower back. Ms. Jones got up from her seat and began to feel dizzy.

EMS responded and assisted Ms. Jones to walk to the ambulance. She was then transported to the Franciscan Health Olympia Fields ED where she reported diffuse headache and low back pain. Ms. Jones underwent a CT scan of the head/brain which was negative for acute intracranial process, and an X-ray of the lumbar spine which was negative for acute osseous abnormality. She was diagnosed with low back pain, headache, prescribed Naproxen and Flexeril; and released home to primary care follow up within 1-2 days.

On October 13 (the day after the incident) and October 19, 2020, Ms. Jones presented to Dr. Elizabeth Engman (internal medicine) with post-trauma anxiety (nightmares, poor sleep), lower back pain, and headaches/nausea. She also reported an episode of sharp pain in her left shoulder. Dr. Engman diagnosed acute bilateral low back pain, tension-type headache, prescribed butalbital 50 mg-acetaminophen 300 mg-caffeine 40 mg-codeine 30 mg and referred Ms. Jones to physical therapy and a collaborative behavioral health program with psychiatry.

On October 20, 2020, 8 days after the crash, Ms. Jones commenced physical therapy for the headaches and lower back pain. She treated through December 17, 2020, when she was released to an independent home exercise program.

On December 21, 2020, Ms. Jones returned to Dr. Engman. She noted Ms. Jones had been attending a collaborative health program for post-traumatic stress disorder (PTSD) and had started taking Sertraline 25 mg daily. She was encouraged to continue with the program, increase the Sertraline to 50 mg, and to continue physical therapy for the lower back. Additionally, Dr. Engman prescribed Flexeril 10 mg for muscle spasms.

On January 25, 2021, Ms. Jones underwent an MRI of the lumbar spine which revealed: at L3-4, subtle bilobed protrusion contacting the ventral thecal sac with minimal bilateral foraminal stenosis; at L4-5, a diffuse annular disk bulge with facet arthropathy contacting the ventral thecal sac and producing mild to moderate bilateral foraminal stenosis; at L5-S1, central protrusion with minimal facet arthropathy effacing the ventral thecal sac (slightly deformed centrally) with mild bilateral foraminal stenosis.

On January 27, 2021, Ms. Jones recommenced physical therapy and underwent treatment for lumbar radiculopathy through June 3, 2022.

On February 2, 2021, Ms. Jones returned to Dr. Engman following an episode of severe back spasms a few weeks prior (prompting an evaluation with physiatry and lumbar spine MRI). She also had persistent flash backs, disrupted sleep and anxiety related to the subject incident.

On February 17, 2021, Ms. Jones attempted to undergo a left L4-5 zygapophysial joint injection with Dr. Maria Reese (physical medicine and rehabilitation), but she was unable to tolerate the procedure.

On April 6, June 1, August 2, 2021, Ms. Jones returned for evaluation with Dr. Engman. She reported frequent headaches lasting for as long as three days, and persistent anxiety despite medication. She was referred for psychological evaluation. Height: 5 ft 6 inches, weight: 198 lbs.

*Pre-crash medical history*

Ms. Jones sought treatment at Northwestern Medicine with Dr. Elizabeth Engman (internal medicine) for migraine headaches which started around 2015 and occurred approximately twice a month. She was prescribed Sumatriptan to take as needed but believed her headaches were manageable without medication in the year leading up to the subject incident.

*Medical and other records reviewed for history*

Denise Jones, deposition: June 5, 2023

Northwestern Internal Medicine (prior/post)

Franciscan Health Olympia Fields ED

Homer Glen Imaging, MRI

NovaCare Rehabilitation

Shirley Ryan Ability Lab, Dr. Reese

Rush Physical Therapy