RE: *Edga Gonzalez v Joshua Saulgozis and State Farm Mutual Automobile Insurance Company, Case No: 2022CA001906, Circuit Court of the 18th Judicial Circuit in and for Seminole County, Florida*

Date of Crash: June 26, 2021

Date of Birth: *Edga Gonzalez:* February 6, 1956 [65 years old at time of crash]

**Background Facts:**

On June 26, 2021, at about 12:30 pm Edga Gonzalez was the restrained right front seat passenger in a 2008 Hyundai Elantra 4DR sedan, driven by her husband, Victor Gonzalez, that was traveling eastbound in the right through lane of SR 436, near SR 400, Altamonte Springs, Florida when it was struck from the rear by a 2005 Ford F-250 pickup, driven by Joshua Saulgozis, who fled the scene after the crash. The images below depict the police diagram and the subject Hyundai, post-collision:

A close-up of a blueprint

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**Police diagram, Ms. Gonzalez’s Hyundai is labeled “V2”**

**The back of a car

Description automatically generatedThe back of a car

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**Ms. Gonzalez’s Hyundai, post-collision**

No damage estimate was provided for the Hyundai for review. The provided photos showed damage to the rear bumper cover, rear trunk lid and the left rear lighting assembly. The Hyundai was not towed from the scene and Ms. Gonzalez testified it was deemed a total loss.

No damage estimate or photos of the Ford were provided for review. The police report indicated that both the area of initial impact and the most damaged area was the center front. The damage was described as functional with an estimate of $50.00 and it was further described as metal bending damage. Mr. Saulgozis told police that the damage was pre-existing. The Ford was not towed from the scene.

*Post-crash history*

Ms. Gonzalez was a restrained passenger (her spouse was driving). She felt a hard impact, her head went back and forth, struck the headrest three or four times breaking the clip breaking the clip she wore at the back of her head. She felt pain immediately in her head and neck, and the broken clip was stabbing her in the back.

The police responded. Ms. Gonzalez declined medical evaluation at the scene despite being in pain. After leaving the crash scene, she went straight home by which time she also had pain and numbness in her right arm and pain in her upper, middle, and lower back.

On July 7, 2021, 11 days after the crash, Ms. Gonzalez presented to Dr. Yamelys Sanabria (chiropractic) with complaints of pain in her thoracic spine, bilateral lumbar spine, bilateral shoulders, bilateral arms, bilateral cervical spine, antero-lateral headaches, and paresthesias in both hands. Dr. Sanabria diagnosed cervical and lumbar spine sprain, cervical radiculopathy, cervicalgia, thoracic and lumbar spine pain, bilateral shoulder pain, and headache. Dr. Sanabria initiated treatment modalities and ordered MRIs of the cervical and lumbar spine. Ms. Gonzalez underwent modalities through August 20, 2021.

On July 15, 2021, Ms. Gonzalez underwent the MRIs. The cervical MRI revealed: at C3-4, left paracentral disk herniation with annular tear impinging upon the thecal sac, mild left neural foramen stenosis; at C4-5, and 5-6, central disk herniations with annular tears impinging upon the thecal sac and abutting the spinal cord, mild bilateral neural foramen stenosis; at C6-7, central disk herniation impinging upon the thecal sac, mild bilateral neural foramen stenosis; and straightened lordotic curve of the cervical spine suspicious for ligamentous injury.

The lumbar spine MRI revealed: at L4-5, 2 mm anterolisthesis, anterior and posterior surgical fusion, moderate arthritic hypertrophy of the posterior bony elements resulting in mild circumferential spinal stenosis and mild bilateral neural foramen stenosis; at L3-4, 2 mm retrolisthesis, disk bulge and moderate arthritic hypertrophy of the apophyseal joints and ligamentum flavum resulting in moderate circumferential spinal stenosis and severe bilateral neural foramen stenosis; at L1-2 and 2-3, small disk bulges impinging upon the thecal sac.

On July 28, 2021, Ms. Gonzalez presented to Dr. Roderick Claybrooks (orthopedic surgery) with complaints of pain in her neck radiating to both shoulders/arms and fingers; and lower back pain radiating into the right leg, thigh/foot, and toes. Cervical and lumbar radiography demonstrated cervical kyphosis with anterolisthesis at C4-6; retrolisthesis at L4-5 and instrumented fusion at L4-5 (refer to prior history). Dr. Claybrooks noted nerve root compression on the MRI studies, diagnosed cervical stenosis and facet generated cervical and lumbar spine pain. He recommended surgical intervention for the neck pain (anterior cervical discectomy and fusion at C6-7), bilateral medial branch block injections at L2-5 (progressing to radiofrequency nerve ablations as indicated) and provided Ms. Gonzalez with a cervical and trunk stabilizing program.

On August 2, 2021, Dr. Sanabria referred Ms. Gonzalez for neurological evaluation due to persistent headache and associated dizziness.

On August 3, 2021, Ms. Gonzalez presented to Dr. Marc Sharfman (neurology) with severe right-sided/frontal headaches, cervical and lumbar radicular symptomatology, nausea, dizziness, loss of balance, unsteady gait, vertigo, changes in speech, confusion, light, and noise sensitivity. Dr. Sharfman diagnosed post-concussion syndrome/concussion, acute post-traumatic headache, traumatic vestibulopathy, vertigo, lumbosacral plexus injury, cervical spine nerve root injury; recommended neurodiagnostic testing, brain MRI/DTI, electromyography/nerve conduction velocity (EMG/NCV) studies of the bilateral upper and lower extremities and endorsed cognitive behavioral therapy.

On August 4, 2021, Ms. Gonzalez underwent an electroencephalogram (EEG) which revealed a study within normal limits; and neurocognitive testing which revealed a differential diagnosis of post-concussion syndrome.

On August 5, 2021, Ms. Gonzalez underwent an MRI/DTI of the head/brain which revealed: scattered periventricular subcortical and deep white matter foci of increased T2/FLAIR weighted signal (largest in the left posterior frontal lobe prominent at the gray-white matter junction measuring 9 mm); 3 mm focus of decreased signal in the central pons; 3 mm focus of decreased signal in the left posterior temporal lobe consistent with diffuse axonal injury/trauma versus microangiopathic hypertensive etiology; partially empty sella. Diffusion tensor imaging (DTI) with fiber tracking and FA (fractional anisotropy) values of the corpus callosum are decreased in the anterior-inferior fiber tracts.

On August 5, and 12, 2021, Dr. Sharfman performed bilateral upper and lower extremity EMG/NCV studies. The upper extremity studies revealed a right median sensory nerve trauma; the lower extremity studies were normal. Dr. Sharfman recommended a right wrist brace, potential orthopedic evaluation of the right upper extremity; and continued chiropractic care.

On August 16, 2021, Ms. Gonzalez underwent Doppler ultrasound studies of the carotid arteries which revealed normal flow without evidence of atherosclerotic narrowing.

On August 17, 2021, Ms. Gonzalez underwent videonystagmography (VNG) testing with Dr. Sharfman which revealed positive Dix-Hallpike and positional testing consistent with trauma-related peripheral central pathology; caloric results consistent with trauma-related vestibulopathy in the right ear.

Dr. Sharfman recommended vestibular rehabilitation, comprehensive hearing evaluation and Canalith repositioning.

On October 4, 2021, and February 23, 2022, Ms. Gonzalez revisited Dr. Sharfman with persistent headaches and dizziness. Dr. Sharfman encouraged Ms. Gonzalez to pursue vestibular therapy and Botox injections. She was referred to pain management and placed at maximum medical improvement (MMI) with a permanent and partial impairment following the latter consult.

(Ms. Gonzalez underwent evaluation for vestibular therapy, on October 8, 2021, and on January 26, 2022, she re-established chiropractic care with Dr. Sanabria).

On May 16, 2022, Ms. Gonzalez returned to Dr. Sharfman with persistent headaches, neck pain and her whole body ached. She remained at MMI.

On December 14, 2022, and January 2, 2023, Ms. Gonzalez returned to Dr. Roderick and underwent cervical epidural steroid injections at C6-7.

Ms. Gonzalez underwent therapeutic modalities with Dr. Sanabria through November 15, 2023. Height: 5 ft, weight: 160 lbs.

*Pre-crash medical history*

Ms. Gonzalez was in a traffic crash in 2002; she sustained injuries to her lower back and had numbness in her leg. She received chiropractic treatment, [possibly] injection therapy, for approximately two years. Within around 5 years all symptoms were much improved, and the pain had reached a manageable level.

In 2015/16, Ms. Gonzalez developed nerve pain. In October 2017 she had surgery to her lower back (fusion at L4-5) due to spinal stenosis. She had minor residual nerve pain for which she took gabapentin.

Ms. Gonzalez was in another minor traffic crash (rear-end) between 2015 and 2019, without injury.

*Reconstruction:*

According to the police report it was daylight, clear and the roadway was dry. The speed limit on SR 436 was 40 mph.

Ms. Gonzalez, deposed on May 19, 2023, testified that she was a passenger in the Hyundai and her husband was driving. They were on the 436 and were slowing to a stop for a traffic light when the truck struck them in the rear. They were almost at a stop when the impact occurred, and it was without warning. She did not see or hear the Ford prior to the crash and only felt the impact. The impact was hard, her head went back and forth an unknown number of times striking the headrest, and her hairclip was broken into several pieces due to it. The impact pushed their Hyundai forward about 12 feet, which was a guess as she was not good at estimating distances. There were vehicles in front of them and they did not strike any of them. The Ford left the scene and was later located by police.

No deposition or other statement from Mr. Gonzalez was provided.

No deposition of Mr. Saulgozis was provided for review. He told police that he did not have any recollection of striking anyone’s vehicle and that he may have blacked out. The damage to his bumper was pre-existing from an earlier insurance claim and he had photos showing it.

No deposition of the witness, Ms. Metzger, was provided for review. She told police that she heard the crash, looked in her rearview mirror, and saw the subject Ford stationary in traffic. The Ford then left the scene and parked in a nearby parking lot. She provided the license plate information to the police and was told she could leave the area.

The police report, authored by Officer DeCastro, stated that both subject vehicles were in the eastbound right through lane of SR 436. The Hyundai slowed for traffic and the front bumper of the Ford struck the rear bumper of the Hyundai. The estimated speed of the Hyundai was 15 mph, and the estimated speed of the Ford was 20 mph. Mr. Saulgozis was contacted at his residence, and he stated he did not remember being in a crash. Black paint transfer was discovered on the Hyundai’s bumper that appeared to match the black paint of the subject Ford.

**Documents Reviewed:**

The following documents/files were provided and reviewed for the preparation of this report:

* 4 color photographs of Ms. Gonzalez’s Hyundai.
* Ms. Gonzalez’s deposition dated May 19, 2023.
* The Altamonte Springs Police Department crash report.
* Egda Gonzalez, deposition May 19, 2023
* Chiro Nomad, Dr. Sanabria
* SimonMed Imaging. Brain MRI
* Headache and Neurological Treatment Institute, Dr. Sharfman
* BioSpine Institute, Dr. Claybrooks
* Advanced Diagnostic Group, cervical/lumbar MRIs
* Professional Care Physical Therapy Rehabilitation, vestibular therapy