CONTINUATION
NAME SULPERO, Paul
712512 SOS 54012 Kayed to allry Popovich attn-
alare (ox 1)

CONTINUATION NAME Dulberg, Paul -13-12 here for results MKI O. I do not know why pt has centimed symptoms little Bergerd Hurys get worse I suggested getting a 3th Junior E Dr. Sott Sagerman 514/12 Per release reason Lonworded to Thomas Popouch PC/Hans Mark 3416 W Elm Street HENNIL 60059 Cell) there for Fel. I spoke a Dr. Sagerman of he Gerould Ilest pt on neuropathic 5-16-12 70um mod, Mr. Duller doland thenk the Strength w pair 100 that bear to only courts Doire PT anything of smalle caliber During the pair on right of the soon site weather will plant e near hers will add Capapentin for the 300mg QHS for week then BID coll 2 wes or sime of sole estalla 12 PC from pt - he did seme guidening p 2d ago and now his sxs are Ting-Per. 1- 1 gabapentais to 600 mg bid- Pt notified telution DC from pt- be is still noticing frequent The pain discomfact from the newse in sucks if neededly 11/21/2 Yermak IaiIm to SCA ITEM 07-0576231/8

CONTINUATION NAME Dulberg, Paul 8-10-11 Orene for New's - normal. es branch nan modean & whan news are no several To see hand suger as well 1-30-12 here vecause has thingust a he be re-evaluated ptill gette of fingling & lowner en spots diven when side of bird fittle fenge in a aggravate the pain & pers it off He is feline for disability for dise direct related to the Dan: I strenth grown (B) fronth digit abductor normal ad ductur c flexier of 5th digit of pair is ann geon is trouved ? bump on end. Emp wel v MRI foreour to Rlo neuroma Rlo diruptur of tender or nerve Fl. D" MRJ. 15 MIN SPENT O D ITEM 07-0576231/8290

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HEALTH QUESTIONNAIRE ASSOCIATED NEUROLOGY, S.C. Handedness: 17 Right □ Lef Patient's Name: **REASON FOR VISIT** Right FOREARM **MEDICAL HISTORY** If you have had any of the following symptoms or diseases, please check (/) and indicate at what age. ☐ Bowel Polyps ☐ Crohn's/Colitis ☐ Tuberculosis Headaches ☐ Frequent Nosebleeds ☐ Sinus Pain ☐ Sore Throat Stools: Bloody Black Pale ☐ Herpes ☐ AIDS (HIV) ☐ Dizzy or ☐ Fainting Spells ☐ Decreased Hearing ☐ Teeth/Gum Pain/Bleeding ☐ Hemorrhoids ☐ Hernia ☐ Contact w/Blood or Body Fluids ☐ Chronic Cough ☐ Urine Infections (frequent) Ringing in Ear ☐ Blood Transfusions ☐ Falling Vision ☐ Eye Pain ☐ Hay Fever/Allergies Urination: ☐ Overnight > twice ☐ Sexual Problems ☐ Double or ☐ Blurred Vision ☐ Pneumonia/Pleurisy ☐ Painful ☐ Bloody ☐ No Control Males: ☐ Prostate ☐ PSA Test □ D ☐ Bronchitis/Emphysema e in Force/Flow ☐ Hoarseness Females: Please complete rest. ☐ Asthma/Wheezing ☐ Kìdn₁ ☐ Difficulty Swallowing 168 Menstrual Flow: ☐ Convulsions/Seizures ☐ Shortness of Breath: ☐ Venereal Disease/Genital Warts Age Started \_ ☐ Urethral Discharge ☐ Stroke ☐ Head Injury ☐ On Exertion ☐ Lying Flat □ Reg. □ Irreg. □ Pain/Cramps Chest Pain or Tightness ☐ Anemia ☐ Bruise Easily ☐ Tremor/Hands Shaking Days of Flow Muscle Weakness ☐ High Blood Pressure Cancer (Type) Length of Cycle Days ☐ Diabetes ☐ Excessive Thirst ☐ Heart Murmur 1st Date of Last Period\_ ☐ Irregular Pulse ☐ Palpitations ☐ Thyrold Disease Back Pain Number of: ☐ Foot Pain ☐ Cold Numb Feet ☐ High Cholesterol/Fat ☐ Arthritis/Rheumatism \_\_\_ Pregnancles \_\_\_\_ Abortions ☐ Swollen Ankles ☐ Blood Clots ☐ Bone Fracture/Joint Injury ☐ Difficulty Sleeping \_\_ Miscarriages \_\_\_\_ Live Births ☐ Memory Loss ☐ Phobias ☐ Gout ☐ Osteoporosis Calf Pain When Walking Pain/Bleeding During Sex ☐ Varicose Veins/Phlebitis ☐ Rashes ☐ Hives ☐ Difficulty Walking Birth Control Method \_\_\_\_ ☐ Eczema ☐ Psoriasis ☐ Loss of Appetite (recent) □ Difficulty Speaking If B.C. Pill, Name \_ ☐ Indigestion/Heartburn ☐ Nervousness ☐ Depression ☐ Imbalance ☐ Infertility History ☐ Moodiness ☐ Excessive Stress 🔼 Neck Pain 🛚 Facial Pain ☐ Persistent Nausea/Vomiting ☐ Flushing/Menopause ☐ Meningitis/Encephalitis Peptic Ulcer/Abdominal Pain ☐ Mental Illness ☐ Chicken Pox ☐ Polio ☐ Mumps Date of Last PAP Test ☐ Gall Bladder Trouble □ Weight Loss or □ Gain ☐ Abnormal ☐ Normal ☐ Measles ☐ German Measles Unusual Fatigue/Loss of Energy □ Jaundice/Hepatitis Date of Last Mammogram ☐ Change in Bowel Habits ☐ Lyme Disease ☐ Frequent Ear Infections ☐ Glaucoma ☐ Cataracts Diarrhea d Constination ☐ Rheumatic Fever ☐ Scarlet Fever □ Normal ☐ Abnormal HOSPITAL ADMISSIONS Indicate the year of hospitalization and the reason. Do not include normal pregnancies. ILLNESS OR OPERATION ILLNESS OR OPERATION ILLNESS OR OPERATION YEAR YEAR YEAR LEST ARM LERVE TRANS MEDICATIONS **DRUG ALLERGIES** NaproxiN List all that vou take include those you buy without a prescription. If any blood relative has suffered any of the following, please check below and indicate which relative. FAMILY HISTORY ☐ Glaucoma ☐ High Blood Pressure ☐ Epilepsy (Seizures) ☐ Anemia Diabetes ☐ Bleeds Easily ☐ High Cholesterol ☐ Migraine Headaches ☐ Clotting Disorder ☐ Thyroid Goiter ☐ Alcoholism ☐ Stroke ☐ Hay Fever ☐ Arthritis ☐ Genetic Disease ☐ Other Neurologic Disease ☐ Heart Disease ☐ Asthma ☐ Cancer (Type) \_\_\_\_ ☐ Mental Illness Cigarettes: \_/\_ Packs/Day for 2 Years Alcohol: Drinks/Week Coffee: 2 Cups/Day Regular Exercise: 
Yes 
No **HABITS** Street Drugs: Nove Years Ago Quit Smoking: \_ Cholesterol Sugar Other Blood Tests TESTS/EXAMS Chest X-Ray Cardiogram \_\_\_\_\_ Rectal\_ (Year of Last One) Dental Exam \_\_\_ T.B. Test \_\_\_ Eye Exam \_\_\_\_\_ Have you had any of ☐ MRI Scan of Head \_\_\_\_\_ ☐ Lumbar Puncture (Spinal Tap)\_\_\_\_\_ □ Angiogram these tests done? CT Scan of Head \_\_\_\_ ☐ MRI Scan of Neck \_ EEG (Brain Wave) \_\_\_\_\_ If so, please check ☐ MRI Scan of Lower Back \_\_\_\_\_ ☐ CT Scan of Neck □ EMG\_ and indicate year. CT Scan of Lower Back \_\_\_ ☐ Neck X-Rays ☐ Myelogram \_

MITCHELL S. GROBMAN, M.D. KAREN F. LEVIN, M.D.

July 28, 2011

Mr. Hans Mast 3416 W. Elm Street McHenry, IL 60050

RE: Paul Dulberg

Dear Mr. Mast,

Mr. Dulberg was previously seen by my associate, Dr. Mitchell Grobman, in 2002 for left ulnar neuropathy, and had surgery and essentially became asymptomatic by 2007 and who had never had difficulty in his right arm. Approximately a month prior to the evaluation, he had been holding a branch for a neighbor when the chainsaw came up and cut his right forearm. He was taken to Northern Illinois Medical Center where they put in inner stitches in the muscle and outer stitches. He originally had very significant pain, but as the pain was getting better, he started noticing that he had numbness in his fifth digit in the inner aspect of his forearm. He had not been dropping things. It was mostly just a tingling and a numb feeling. He denies ever having any right-sided symptoms or rightsided injuries. His examination was significant for a healing scar in the right forearm and for decreased light touch, pinprick, and temperature sensation in the ulnar distribution of the right arm. His strength was normal. Given the distribution, it was felt that this was a branch neuropathy to the sensory nerves. I did have him undergo nerve conductions to make sure that the median and ulnar nerves were all without involvement and they were. I recommended that he see a hand surgeon as well just to be certain that there were no other treatment options for him; however, most likely this was just a sensory branch neuropathy that may improve or may result in permanent numbness in the distribution that he was showing numbness. Mr. Dulberg should followup if any additional symptoms develop or if he wished to try any neuropathic pain treatment if it became painful and not just numb.

Sincerely,

Karen F. Levin, M.D.

KFL/klm

## KAREN F. LEVIN, MD

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JIATED NEUROLOGY, S.C. Mitchell S. Grobman, M.D.

Karen F. Levin, M.D.

Phone (847) 549-0055 Fax (847) 549-0404

1900 Hollist	er Drive, Suite 250, Libertyville	Fax (847) 549-0055 Fax (847) 549-0404
Patient Name:	Dulberg	(847)546.3600
D.O.B.: 3/19/70		SS#
Phone #: Home: 847) 49	7-4250	Work:
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valproic acid	gabapentin	lupus anticoagulant
protein C	protein S	antithrombin III
CBC w/plts	folate	activated protein C resistance
thyroid profile	□ тѕн	anticardiolipin antibody
hepatic profile	☐ PTT	sedimentation rate
basic metabolic profile	☐ B12	ANA with reflex testing
glycohemoglobin	☐ RPR	comprehensive metabolic profile
immunofixation	homocysteine	Acetylcholine receptor antibodies
<b>*</b>	K.	
Mitchell S. Grobman, M.D. K	aren F. Levin, M.D.	$- \frac{\sqrt{-30^{-1}2}}{\text{Date}}$

**NEUROPHYSIOLOGY REPORT** 

Name: Dulberg, Paul

Test No.: 12-0305

Date of Exam: 13 Mar 12

Consulting Doctor: Scott Sagerman, M.D.

Motor	Nerve	Conduction:
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Nerve and Site	Latency	Amplitude	Segment	Latency Difference	Distance	Conduction Velocity
Median.R Wrist Elbow Ulnar.R	3.9 ms 8.3 ms	5.4 mV 3.1 mV	Wrist-Elbow	4.4 ms	240 mm	55 m/s
Wrist Below elbow Above elbow	3.0 ms 6.7 ms 8.4 ms	12.2 mV 11.4 mV 11.3 mV	Wrist-Below elbow Below elbow-Above elbow	3.7 ms 1.7 ms	220 mm 100 mm	59 m/s 59 m/s

#### F-Wave Studies:

Nerve	M-Latency	F-Latency
Median.R	3.9 ms	29.6 ms
Ulnar.R	3.3 ms	28.7 ms

#### **Sensory Nerve Conduction:**

Nerve and Site	Onset Latency	Peak Latency	Amplitude	Segment	Latency Difference	Distance	Conduction Velocity
Median.R Digit II (index finger) Ulnar.R	2.4 ms	3.2 ms	22 μV	Wrist-Digit II (index finger)	2.4 ms	130 mm	53 m/s
Digit V (little finger)	2.0 ms	2.7 ms	$28~\mu V$	Wrist-Digit V (little finger)	2.0 ms	110 mm	55 m/s.

Needle EMG Examination:	S	pontane	ous and	l Voliti	ional Act	ivite
Muscle Flexor carpi radialis. R Flexor carpi ulnaris. R Extensor indicis proprius. R 1st dorsal interosseous. R Abductor digiti minimi (manus). R Abductor pollicis brevis. R	Fibs None None None None None	+Waves None None None None None None None	Fase's None None None None None None None	Poly None None None None None None None	Amp Amp Normal Normal Normal Normal Normal Normal Normal	Dur Dur Normal Normal Normal Normal Normal Normal

<u>Interpretation:</u> NCV: Motor: Right median and ulnar motor responses are within normal limits. F-wave: Right median and ulnar f-waves are within normal limits. Sensory: Right median and ulnar responses are within normal limits.

EMG: No denervation potentials are seen.

<u>Conclusions:</u> No electrophysiologic evidence of focal or diffuse peripheral neuropathy.

Karen F. Levin, M.D.



PATIENT: DULBERG, PAUL

MRN:

1585839

DOB:

03/19/1970

PHYSICIAN: LEVIN, MD, KAREN

**EXAM:** MR FOREARM W/ AND

W/O 73220

DOS: 02/03/2012

EXAMINATION: MRI examination of the right forearm without and with intravenous contrast infusion...

CLINICAL HISTORY: History of right forearm trauma with a chainsaw. Possible neuroma, nerve impingement or injury in the forearm. Possible tendon disruption. It appears that the patient had some difficulty holding still during image acquisition. There is motion artifact on this examination. Weakness in the fourth and fifth fingers. Pain in the forearm and hand.

TECHNIQUE: Multiplanar T1 and T2-weighted spin-echo pulse sequences and STIR sequence. Post-infusion multiplanar T1-weighted sequences were performed. A skin marker was taped to the point of maximal symptoms.

Contrast: 15 cc of gadolinium was infused.

FINDINGS: There is no bone abnormality seen. The bone marrow signal characteristics are normal.

There is no cystic or solid mass appreciated. The visualized muscles have normal signal characteristics.

There is no abnormal soft tissue infiltration or induration. Specifically, in the area of the skin marker which is marking the point of maximal symptoms, there is no soft tissue abnormality appreciated.

There is no abnormality identified along the course of the ulnar nerve in the forearm.

IMPRESSION: There is no forearm abnormality appreciated. This does not exclude the possibility of an ulnar nerve impingement or injury but there is no gross mass or abnormal infiltration along the expected course of the ulnar nerve. No obvious tendon or muscle abnormality appreciated at this time.

Thank you for referring your patient to Open Advanced MRI. If you have any questions, Dr. Levin, please feel free to contact me at my direct line which is: 630.885.2100.

720 Rollins Road Round Lake Beach, IL 60073 Phone: 847-546-3600 Fax: 847-546-3633 www.openadvancedmri.com





DULBERG, PAUL MR FOREARM W/ AND W/O 73220 02/03/2012

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Page 2 of 2

Thank you for referring your patient to Open Advanced MRI of Round Lake.

Electronically Signed By: THOMAS A. PREDEY MD

To the referring or consulting physician: If you would like to discuss this case in more detail or have any questions, please feel free to contact the author of this report:

Dr. lan Fisher (847) 414-5055, Dr. Jay Korach (847) 691-7673

MITCHELL S. GROBMAN, M.D. KAREN F. LEVIN, M.D.

# NEUROPHYSIOLOGY REPORT

Name: Dulberg, Paul

Test No.: 11-0802

Date of Exam: 10 Aug 11

### **Motor Nerve Conduction:**

Nerve and Site	Latency	Amplitude	Segment	Latency Difference	Distance	Conduction Velocity
Median.R Wrist Elbow	3.9 ms 8.8 ms	9.1 mV 6.1 mV	Wrist-Elbow	4.9 ms	255 mm	52 m/s
Ulnar.R Wrist Below elbow Above elbow	2.9 ms 6.2 ms 7.7 ms	10.7 mV 10.1 mV 9.5 mV	Wrist-Below elbow Below elbow-Above elbow	3.3 ms 1.5 ms	180 mm 100 mm	55 m/s 67 m/s

#### F-Wave Studies:

Nerve	M-Latency	F-Latency
Median.R	3.8 ms	30.9 ms
Ulnar.R	2.9 ms	$27.3  \mathrm{ms}$

#### **Sensory Nerve Conduction:**

Nerve and Site	Onset Latency	Peak Latency	Amplitude	Segment	Latency Difference	Distance	Conduction Velocity
Median.R Digit II (index fing Ulnar.R	2.3 ms	2.9 ms	22 μV	Wrist-Digit II (index finger)	2.3 ms	130 mm	57 m/s
Digit V (little fing	2.0 ms	2.6 ms	$28\mu V$	Wrist-Digit V (little finger)	2.0 ms	110 mm	55 m/s

Interpretation: NCV: Motor: Right median and ulnar motor responses are within normal limits. F-wave: Right median and ulnar f-waves are within normal limits. Sensory: Right median and ulnar responses are within normal limits.

Conclusions: No electrophysiologic evidence of diffuse neuropathy.

Karen F. Levin, M.D.

CONTINUATION NAME Dulberg, Paul 8-10-11 here for Nov's - normal. This is branch new enguy man modian & whan news are n Elbely were emprese somew of next several munths somewh his therapest arted that he be re-evaluated. still althre numbers
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aggravates the pain & sets it of all day He is feling for disability for dise direct I wanted to make obline related to the Dein: Istenth extens (8) forth digit abductor normal ad ductur c flexies of 5th digit of pour is any gear is troused i bump or end. Emp wel v MPT foreour to Rto neuroma Rlo diruptur of tenden or nerve FU P MRJ. 15 MM SPENTO ITEM 07-0576231/8290

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,	,HEALTH C	QUESTIONNAIRE	ASSOCIATED NEUROLOGY, S.C
Patient's Name:	eperg, Paul	Date:	Handedness: A Right Ci Le
REASON FOR VISIT	Chainsaw To	Right FOREARM	AGE: 4/
		- Police File	AGE. //
MEDICAL HISTORY	If you have had any of the following s	ymptoms or diseases, please check (✓) an	d la dia da ada ada ada ada ada ada ada ada
Phleadaches	☐ Frequent Nosebleeds	☐ Bowel Polyps ☐ Crohn's/Colitis	
☐ Dizzy or ☐ Fainting Spells	☐ Sinus Pain ☐ Sore Throat	Stools: Bloody Black Pale	☐ Tuberculosis
☐ Decreased Hearing	☐ Teeth/Gum Pain/Bleeding	☐ Hemorrholds ☐ Hernia	☐ Herpes ☐ AIDS (HIV)
☐ Ringing in Ear	☐ Chronic Cough	☐ Urine Infections (frequent)	☐ Contact w/Blood or Body Fluids
☐ Failing Vision ☐ Eye Pain	☐ Hay Fever/Allergies	Urination:  Overnight > twice	☐ Blood Transfusions
☐ Double or ☐ Blurred Vision	☐ Pneumonia/Pleurisy	☐ Painful ☐ Bloody ☐ No Contro	Sexual Problems
☐ Hoarseness	☐ Bronchitis/Emphysema	D e in Force/Flow	manger El restate El OA lest
☐ Difficulty Swallowing	☐ Asthma/Wheezing	☐ Kidn₁ 1es	Females: Please complete rest.
☐ Convulsions/Seizures	☐ Shortness of Breath:	☐ Venereal Disease/Genital Warts	Menstrual Flow:
☐ Stroke ☐ Head Injury	☐ On Exertion ☐ Lying Flat	☐ Urethral Discharge	Age Started
☐ Tremor/Hands Shaking	☐ Chest Pain or Tightness	☐ Anemia ☐ Brutse Easily	☐ Reg. ☐ Irreg. ☐ Pain/Cramps
⊠ Muscle Weakness	☐ High Blood Pressure	☐ Cancer (Type)	Days of Flow
√ Numbness/Tingling Sensations	☐ Heart Murmur	☐ Diabetes ☐ Excessive Thirst	Length of Cycle Days
☐ Back Pain	☐ Irregular Pulse ☐ Palpitations	☐ Thyroid Disease	1st Date of Last Period
☐ Foot Pain ☐ Cold Numb Feet	☐ High Cholesterol/Fat	☐ Arthritis/Rheumatism	Number of:
☐ Difficulty Steeping	☐ Swollen Ankles ☐ Blood Clots	☐ Bone Fracture/Joint Injury	Pregnancies Abortions
☐ Memory Loss ☐ Phobias	☐ Calf Pain When Walking	☐ Gout ☐ Osteoporosis	Miscarriages Live Births
☐ Difficulty Walking	☐ Varicose Veins/Phlebitis	☐ Rashes ☐ Hives	☐ Pain/Bleeding During Sex
☐ Difficulty Speaking	☐ Loss of Appetite (recent)	☐ Eczema ☐ Psoriasis	Birth Control Method
☐ Imbalance	☐ Indigestion/Heartburn	☐ Nervousness ☐ Depression	If B.C. Pill, Name
🛮 Neck Pain 🛚 Facial Pain	☐ Persistent Nausea/Vomiting	☐ Moodiness ☐ Excessive Stress	☐ Infertility History
☐ Meningitis/Encephalitis	☐ Peptic Ulcer/Abdominal Pain	☐ Mental Illness	☐ Flushing/Menopause
☐ Weight Loss or ☐ Gain	☐ Gall Bladder Trouble	☐ Chicken Pox ☐ Polio ☐ Mumps	Date of Last PAP Test
☐ Unusual Fatigue/Loss of Energy	☐ Jaundice/Hepatitis	☐ Measles ☐ German Measles	☐ Norma! ☐ Abnormal
☐ Frequent Ear Infections	☐ Change in Bowel Habits	☐ Lyme Disease	Date of Last Mammogram
☐ Glaucoma ☐ Cataracts	→ Diarrhea	☐ Rheumatic Fever ☐ Scarlet Feve	
HOSPITAL ADMISSIONS	Indicate the year of hospitalization and	d the reason. Do not include normal pregna	ancies.
YEAR ILLNESS OR OPE	ERATION YEAR ILLN	IESS OR OPERATION YEAR	ILLNESS OR OPERATION
	E TRANS	·	
MEDICATIONS			
List all that Naproxin	<u>J</u>		DRUG ALLERGIES
you take			Mone
include those vou buv			10010
without a			
prescription.			
FAMILY HISTORY	f <u>any blood relative</u> has suffered any o	f the following, please check below and inc	dicate which relative.
☐ Epilepsy (Seizures)	☐ Glaucoma ☐ Anemia	☐ High Blood Pressure	
☐ Migraine Headaches	☐ Diabetes ☐ Bleeds Easily	☐ High Cholesterol	
☐ Stroke	☐ Thyroid Goiter ☐ Clotting Disorde		
☐ Other Neurologic Disease	☐ Hay Fever ☐ Arthritis	☐ Genetic Disease	
☐ Mental Illness	☐ Asthma ☐ Heart Disease	☐ Cancer (Type)	
HABITS Cigarettes: / P	acks/Day for <u>Fo</u> Years Alcohol:	Drinks/Week Coffee: _2 Cups/Day	Regular Exercise: ☐ Yes ⊠No
Quit Smoking:	Years AgoStreet Dru	ugs: None	
TESTS/EXAMS Choleste	rolSug	arOth	er Blood Tests
Year of Last One) Rectal_	Che	•	diogram
			ntal Exam
			umbar Puncture (Spinal Tap) EG (Brain Wave)
if so, please check ☐ CT Soa	an of Neck 🔲 Mi		MG
and indicate year.   □CT Sca			lyelogram

ASE JIATED NEUROLOGY, S.C. ROUND CORRESE Mitchell S. Grobman, M.D. Karen F. Levin, M.D. Phone (847) 549-0055

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Tax (847) 549-0404

Mee: Du Du Serg (847) 540-0404

Patient Name: Tau	Dulberg	(847)546.3Co0
D.O.B.: 3/19/70	<i>d</i>	SS#
Phone #: Home: 847) 49	7-4250	W
Send additional copy of report to:	729-5	Work:
Diagnosis	1/2 trauma R/a	nurvina or nevire or
Brain	With Contrast	tenidon disruption
C-Spine		OUSTUP TOV)
T-Spine	Without Contrast	
LS-Spine	anesthesiology adminis	eter sedation is medically
MRA Trimonia	\ M NOD 7	
Intracranial	1 12 WEST ROBER	est (R) non joint 285
Ultrasound		☐ X-Ray
□ ст		
☐ Echo ☐ TEE ☐ 24 Hour Hole	ter  Tilt Table To be	With Contrast Without Contrast
part,		read by Dr
Labs	m(s) chloral hydrate if necessary	Other
carbamazepine	phenytoin	phenobarbital
valproic acid	gabapentin	lupus anticoagulant
protein C	protein S	antithrombin III
CBC w/plts	folate	activated protein C resistance
thyroid profile	□ тѕн	anticardiolipin antibody
hepatic profile	☐ PTT	sedimentation rate
basic metabolic profile	☐ B12	ANA with reflex testing
glycohemoglobin	☐ RPR	comprehensive metabolic profile
immunofixation	homocysteine	Acetylcholine receptor antibodies
	2	
Mitchell S. Grobman, M.D. Kar	en F. Levin, M.D.	Date /-80-/2

# NEUROPHYSIOLOGY REPORT

Name: Dulberg, Paul

Test No.: 11-0802

Date of Exam: 10 Aug 11

Motor Nerve	Conduction:
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Nerve and Site	Latency	Amplitude	Segment	Latency Difference	Distance	Conduction
Median.R Wrist Elbow Ulnar.R	3.9 ms 8.8 ms	9.1 mV 6.1 mV	Wrist-Elbow	4.9 ms	255 mm	Velocity  52 m/s
Wrist Below elbow Above elbow	2.9 ms 6.2 ms 7.7 ms	10.7 mV 10.1 mV 9.5 mV	Wrist-Below elbow Below elbow-Above elbow	3.3 ms 1.5 ms	180 mm 100 mm	55 m/s 67 m/s

#### F-Wave Studies:

Nerve Median.R Ulnar.R	M-Latency 3.8 ms 2.9 ms	F-Latency 30.9 ms 27.3 ms
	2.5 1118	2/.3 ms

## **Sensory Nerve Conduction:**

Nerve and Site  Median R	Onset Latency	Peak Latency	Amplitude	Segment	Latency Difference	Distance	Conduction Velocity
Digit II (index fing Ulnar,R	$2.3~\mathrm{ms}$	$2.9~\mathrm{ms}$	22 μV	Wrist-Digit ∏ (index finger)	2.3 ms	130 mm	57 m/s
Digit V (little fing	2.0 ms	2.6 ms	$28~\mu\text{V}$	Wrist-Digit V (little finger)	2.0 ms	110 mm	55 m/s

<u>Interpretation:</u> NCV: Motor: Right median and ulnar motor responses are within normal limits. F-wave: Right median and ulnar f-waves are within normal limits. Sensory: Right median and ulnar responses are within normal limits.

Conclusions: No electrophysiologic evidence of diffuse neuropathy.

Karen F. Levin, M.D.