

May 13, 2015

Ms. Suzanne Young  
34 Athenia Drive  
Stoney Creek, ON  
L8J 1S6

Dear Ms. Young:


**Re:    Date of Loss:    November 26, 2012**  
**Our File No.:        14-855/AW**

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I attach for your convenience a report of Dr. Rathbone and Dr. Kumbhare dated May 13, 2013 in which it was recommended that occipital block injections be completed with respect to the diagnosis of occipital neuralgia. I would inquire as to whether these injections have taken place as the clinical notes and records of Dr. Rathbone do not mention same.

I would recommend that you speak with your family physician and Dr. Rathbone concerning this recommendation in the event that this treatment has not been undertaken, to determine whether such treatment should proceed.

Yours very truly,



Sonja A. Nuic  
S.A.N./s  
Encl.



St. Joseph's  
Healthcare Hamilton  
**Combined Neurology - Physiatry Clinic**



Dr. Michel Rathbone  
Department of Medicine - Division of Neurology  
McMaster University - JH  
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Dr. Dinesh Kumbhare  
Physical Medicine Rehabilitation  
240 James Street South, Hamilton, Ontario, L8P 3B3  
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Monday, May 13, 2013

Dr. Bruno Di Paolo  
Address: 77 Markland Hamilton L8P 2J8  
Phone: (905) 575-5173  
Fax: (905) 575-9896  
Re: Young, Suzanne  
OHIP: 6427 959 512 YW  
Address: 101-695 Plains Rd E Burlington  
Phone: (905) 333-2744  
DOB: 1964-10-11

Dear Dr. Di Paolo,

Thank you for asking me to see this 49 year-old right-handed woman in neurological consultation today. Thank you for your referral note.

**Problem:**

Post concussion syndrome

**Problem description:**

Ms. Young was seen for a follow-up today, accompanied by her sister. Her last appointment was March 21, 2013. She had a total abdominal hysterectomy on November 26, 2012 and woke up with a contusion over her left occipital region after the surgery. She developed headache, vertigo, nausea and vomiting, blurred vision, photophobia, cognitive difficulties, sleep problems, fatigue, and mood changes. These symptoms did not improve since last appointment.

She reported her headache is constant, sharp, around the entire top of the head, to the neck and behind the eyes. Her headache is affected by weather changes and humidity as well as light and emotions and is associated with nausea. She states that nothing has provides relief.

Dr. Robertson, neurotologist, saw her on April 25, 2013 and indicated uncompensated right vestibulopathy. She is anxious about her financial situation as she does not have money for the therapy sessions referred to her by Dr. Robertson.

Brain MRI on February 12, 2012 was unremarkable.

**Previous medical and surgical history:**

- Total abdominal hysterectomy
- Bronchial asthmatic
- Hypoglycemic

**Allergies:**

- Penicillin
- All nuts

**Current medications:**

- Ventolin 100mcg, four times a day
- Flovent 125mcg, twice a day
- Soflax 100mg, three times a day
- Tecta 40mg, twice a day
- Lorazepam 1mg, once a day
- Dilaudid 4mg, six times a day
- Prochlorperazine 10mg, three times a day

**Discontinued:**

- Naproxen
- Ativan

**Other specialists:**

Dr. Rodriguez

**Family history:**

- Crohn's disease, mother
- Colitis, mother
- Cancer, father
- Heart disease, father
- Triple bypass surgery, father
- Cancer, both sides

**Social history:**

Ms. Young is currently single with 1 child who is generally healthy. She has been off work due to surgery. She works as an executive administrator.

**Physical examination:**

Neurological examination within normal limits except for bilateral greater and lesser occipital neuralgia. She is emotionally labile.

**Problem formulation:**

Ms. Young developed multiple symptoms after surgery in November. Unfortunately, her symptoms did not improve over time. Regarding the persistent headache, her current medications, especially high dose Dilaudid, could have caused rebound headaches.

I suggest you, Dr. Di Paolo, to adjust her pain medications. We prescribed Cymbalta for her depressed mood and pain.

Regarding her occipital neuralgia, injection treatment is probably the best option. An ultrasound was ordered by Dr. Kumbhare in preparation for the injection. She will be seen again after the test.

**Further investigations:**

Ultrasound of upper cervical spine, especially for occipital nerves.

**Treatment:**

- Cymbalta 30mg, once a day

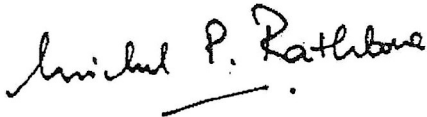
**Follow up:**

We will follow-up with Ms. Young in the Combined Neuro-Physiatry Clinic. An appointment is currently pending.

With best wishes,

Yours sincerely,

Joy Deng, Neurology Fellow, dictating for:



Michel P. Rathbone, M.B., Ch.B., PhD., FRCP (C)

Professor, Department of Medicine (Neurology, Neuroscience and Neuropharmacology)

McMaster University



Dinesh Kumbhare

FRCPC, PhysMed & Rehab - St. Joseph's Hospital

CC: Rodriguez, Amadeo R. - 905-573-4858