

December 1, 2022

Adj.  
Progressive Insurance

RE: Our Client: Jane Doe  
Your Insured:  
At-Fault Driver: Roberto Gomez  
Date of Loss: November 30, 2021  
Claim Number:

Dear \_\_\_\_\_:

As you know, I represent Jane Doe with regard to injuries she sustained in the collision of November 30, 2021. This letter and the enclosed documents are submitted for settlement purposes only (ER 408). The Washington Rules of Evidence prohibit use of this letter and the enclosures as evidence in any legal proceeding without our express consent. If settlement fails for any reason, this letter and its enclosures are to be returned to me without retention of copies.

I. **GENERAL CLIENT AND CASE INFORMATION**

Date of Birth: 01/01/1967  
Gender: Female  
Current Medical Specials: \$31,981.70  
Date of First Treatment: 11/30/2021

II. **ENCLOSURES**

We have enclosed the following documents in support of this demand:

- Exhibit 1: Washington Traffic Collision Report;
- Exhibit 2: Property Damage Estimate and Photos;
- Exhibit 3: Valley Medical Center and Clinics – Medical Records and Billing Statement;
- Exhibit 4: Associated Emergency Physicians – Billing Statement;
- Exhibit 5: Vantage Radiology and Diagnostic Services – Billing Statement;
- Exhibit 6: UW Medical Center and Clinics – Medical Records;
- Exhibit 7: UW Physicians – Billing Statement;
- Exhibit 8: ATI Physical Therapy – Medical Records and Billing Statement;
- Exhibit 9: Bonney Lake Chiropractic – Medical Records and Billing Statement.

**III. FACTS OF COLLISION AND LIABILITY**

On the morning of November 30, 2021, Jane Doe was traveling northbound on SR-167, near SR-516, in Kent, Washington, in lane one of three. A semi-truck driven by Roberto Gomez, was also traveling northbound, in lane two of three, when he veered into Ms. Doe’s lane of travel, struck the driver’s side of her vehicle, and causing her to rotate in front of his truck shoving her several feet down the roadway. Washington State Patrol responded to the scene and issued a report.

**IV. PROPERTY DAMAGE**

Ms. Doe’s 2015 Chrysler Sedan sustained \$8,210.52 in property damage as a result of the collision and was rendered a total loss.



**V. MEDICAL TREATMENT**

**SUMMARY OF INJURIES**

**ICD-10 CODE**

Closed head injury.....	S09.90XA
Subarachnoid bleed .....	I60.9
Traumatic subarachnoid hemorrhage .....	S06.5X0D
Post-traumatic headache.....	G44.309
Other headache syndrome .....	G44.89
Migraine with aura .....	G43.109
Migraine .....	G43.909
Post-traumatic stress disorder.....	F43.12
Thoracic strain.....	S29.019A
Strain of neck muscle .....	S16.1XXA
Chronic pain of right knee.....	M25.561, G89.29
Elevated blood pressure secondary to pain .....	R03.0
Thoracic pain.....	M54.6
MVC (motor vehicle collision) .....	V87.7XXA

## TREATMENT

### **Valley Medical Center and Clinics**

**Dates of Treatment: 11/30/21 – 06/07/22**

#### Hospital:

Immediately following the collision, Ms. Doe sought evaluation in the emergency department of Valley Medical Center and described a severe headache, blurred vision, and posterior neck pain. She was examined by Lisa Mergler, PA-C, who noted an elevated blood pressure reading, tenderness diffusely throughout the frontal and parietal regions of her skull, significant lower midsternal, epigastric, and bilateral upper quadrant tenderness, and moderate tenderness to midline cervical spine palpation.

She ordered a CT cervical spine scan, CT trauma chest/abdomen/pelvis scan with IV contrast which revealed a right rib fracture and hiatal hernia, and a CT head scan which identified sulcal hyperdensity in her bilateral occipital and left frontal regions suspicious for a subarachnoid hemorrhage. Ms. Doe was monitored in the emergency room for several hours, underwent a repeat head CT scan, was diagnosed with closed head injury and subarachnoid bleed, advised to remain off work through December 2, 2021, directed to follow-up with her primary doctor, and discharged in stable condition to her daughter to perform two-hour home checks and sleep monitoring.

On December 30, 2021, Ms. Doe underwent an MRI brain, with and without contrast, which confirmed:

1. Evolving subarachnoid hemorrhage within the front and occipital lobes when compared to head CT from November 30, 2021, now demonstrating sub-acute features;
2. Scattered rounded foci of T2/FLAIR signal hyperintensity throughout the hemispheric white matter, may represent sequela of vascular headaches/migraines or chronic small vessel ischemia.

#### Neurosurgery:

On January 4, 2022, Ms. Doe consulted with neurologist, Dr. Peter Balousek, and discussed hitting her head on her driver's side window on impact with an immediate headache, ongoing daily headaches, pain in her neck and mid-back, feeling off balance, and insomnia. Dr. Balousek examined her and discovered decreased range of neck motion in all directions, mid-thoracic region tenderness, and difficulty with tandem gait.

He reviewed her brain CT scan and brain MRI, diagnosed her with traumatic subarachnoid hemorrhage, post-traumatic headache, and thoracic back pain/strain, obtained cervical x-rays, referred her to physical therapy, and advised her to follow-up in six weeks. Ms. Doe followed up with Dr. Balousek on March 2, 2022, with thoracic spasms and headaches and was referred to physical and massage therapy. She returned to the clinic on June 7, 2022, and noted intermittent headaches and anxiety while driving. Dr. Balousek examined her, diagnosed her with post-traumatic stress disorder, and recommended consideration of EMDR therapy for her trauma symptoms.

**UW Medical Center and Clinics**

**Dates of Treatment: 12/17/21 – 09/08/22**

On December 17, 2021, Ms. Doe presented to Dr. Christopher Coppeans of UW Medicine Primary Care. She noted continued headaches, waking with a headache and going to bed with a headache, right-sided neck pain and popping, mid-back pain worse with movement, and anxiety while driving. Dr. Coppeans examined her and discovered elevated blood pressure, pain with neck rotation and flexion, right-sided muscle spasm, thoracic back pain on palpation, extension, and rotation, and thoracic paraspinal spasm. Ms. Doe was diagnosed with other headache syndrome, strain of neck muscle and thoracic region, and elevated blood pressure reading secondary to pain, prescribed Cyclobenzaprine, and referred for a brain MRI.

Dr. Coppeans, and his medical associates, continued to oversee Ms. Doe’s primary care over the next ten months with treatment including prescriptions for Diclofenac, Cyclobenzaprine, Sumatriptan, and Losartan, right knee x-rays, treatment advice, and additional diagnoses of chronic pain of right knee and migraine with aura. On her final, of seven visits, evaluation with Dr. Coppeans on September 8, 2022, Ms. Doe’s Sumatriptan for her headaches was refilled, at a higher dose, and she was encouraged to return to the clinic as necessary.

**ATI Physical Therapy**

**Dates of Treatment: 01/14/22 – 03/07/22**

Ms. Doe began physical therapy on January 14, 2022, with Jacqueline Cabuhat, PT, of ATI Physical Therapy. She reported constant headaches, difficulty remembering things, anxiety while driving, pain in her neck and mid-back, and limitations with household chores, driving, sleeping, reading, and sustained sitting. Ms. Cabuhat examined her, noted restricted cervical flexion, extension, and rotation, bilateral decreased range of shoulder motion, and decreased strength with pain, and recommended a return to therapy twice weekly. While in therapy over the next two months, Ms. Doe was treated with manual therapy, therapeutic exercise, neuromuscular re-education, and home exercise instruction. Following six visits, she ceased care on March 7, 2022.

**Bonney Lake Chiropractic**

**Dates of Treatment: 03/10/22 – 04/12/22**

On March 10, 2022, Ms. Doe initiated massage therapy with headaches, nervousness, stiffness, and pain in her neck, shoulders, upper back, and mid-back. Her objective findings included cervical, scalene, trapezius, rhomboid, levator scapula, QL, and supraspinatus hypertonicities and she was treated with three medical massages through April 12, 2022.

**VI. SPECIAL DAMAGES**

**CURRENT MEDICAL EXPENSES**

Jane Doe has incurred medical expenses for treatment of the injuries sustained in this collision. The total incurred medical expenses are as follows:

Valley Medical Center and Clinics	\$22,040.40
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Associated Emergency Physicians	\$1,142.00
Vantage Radiology and Diagnostic Services	\$1,444.00
UW Physicians	\$1,942.00
ATI Physical Therapy	\$4,723.30
Bonney Lake Chiropractic	\$690.00
<b>TOTAL:</b>	<b>\$31,981.70</b>

**MILEAGE EXPENSES**

Jane Doe has incurred mileage expenses for treatment of the injuries sustained in this collision. The total incurred mileage expenses for medical treatment transportation is as follows:

Valley Medical Center and Clinics	5 visits x 21.6 RT = 108.0 miles x .17	\$18.36
UW Medical Center and Clinics	7 visits x 39.8 RT = 278.6 miles x .17	\$47.36
ATI Physical Therapy	6 visits x 42.8 RT = 256.8 miles x .17	\$43.66
Bonney Lake Chiropractic	4 visits x 4.4 RT = 17.6 miles x .17	\$2.99
<b>TOTAL:</b>		<b>\$112.37</b>

**VII. SPECIAL DAMAGES SUMMARY**

Current Medical Specials	\$31,981.70
Mileage Expenses	\$112.37
<b>TOTAL:</b>	<b>\$32,094.07</b>

**VIII. DUTIES UNDER DURESS & LOSS OF ENJOYMENT OF LIFE**

Jane Doe continues to have good and bad days due to flare ups of pain. Such unexpected halting pain robs her of the enjoyment of life she had prior to the collision of November 30, 2021. Caring for her daily activities, many times can only be accomplished under duress. The once normal and commonplace activities before the collision are now attempted with concerns of exacerbating her injuries. The determination of Ms. Doe’s functions in caring for her daily activities is the intensity and frequency of the painful flare ups. Having to go through life with constant awareness that anything she may do, would inflame this injury, deprives her of the pleasure of life she once enjoyed.

**IX. GENERAL DAMAGES**

Jane Doe is entitled to recover damages for all personal injuries caused by this collision, including damages for emotional distress and economic damages. The guiding principle of tort law is to make the injured party as whole as possible through pecuniary compensation. **INSERT CASE LAW**. She is entitled to recover the reasonable value of necessary medical care, treatment and service rendered before trial. Travel expenses reasonably necessary to secure proper treatment are compensable. **INSERT CASE LAW**.

Recovery for pain and suffering compensates for the physical and mental discomfort caused by the injury. **INSERT CASE LAW**. The amount is determined by the discretion of the jury. **INSERT CASE LAW**. Lay witness testimony of purely subjective symptoms still existing at trial allows for a jury

instruction and consideration of future damages for all categories of general damages. **INSERT CASE LAW**

Negligently inflicted mental distress is compensable. **INSERT CASE LAW**. So is distress about the fear of the future consequences of an injury. **INSERT CASE LAW**. Loss of ability to enjoy life is a proper element of damages, and if there are special artistic or athletic skills, separate or added distress compensation is appropriate.

Prior to the collision, Ms. Doe enjoyed regular workouts, including weightlifting, cardio, and high impact classes, at the gym three times a week and running her own cleaning business. Due to her injuries, she was forced to stop working out for several months. At work, Ms. Doe took several days off as her pain caused her to be unable to complete her job duties. She experienced significant anxiety and fear when driving, especially near semi-trucks, avoided driving whenever possible, and had difficulty getting to sleep and staying asleep secondary to her high pain levels and ruminating about the collision. To date, Ms. Doe continues to experience nervousness while driving near semi-trucks. In sum, she is an individual who, through no fault of her own, has suffered painful injuries and impacts to her life that justify full and fair compensation.

#### X. **SETTLEMENT PROPOSAL**

In light of the clear liability in this case and the injuries clearly proximately caused, as well as the damages documented herein, we make a reasonable and fair demand in the total amount of \$\_\_\_\_\_ in full and final settlement of Ms. Doe's claim. If your insured's policy limits are lower than our stated demand, please consider this a demand for policy limits.

Thank you and I look forward to hearing from you.

Sincerely,

Dave Springer  
Attorney at Law

DS/tm  
Encl.