

MEDICOLEGAL REPORT

Prepared for the Courts

Claimant: Mr Sample Example
Address: Example Residence
Training Case
Portsmouth
Hampshire
PO8 9TY

Date of Birth: 19/12/1968
Date of Accident: 01/04/2008
Occupation: Chef

Date of Medical: 01/10/2008
Location of Medical: Westbury Park Clinic
Examining Doctor: Dr Geoff Hogg MBChB MRCP DCH DRCOG
MRCGP
General Practitioner

Instructor: Training Team
Instructor's Ref: Training Case

Agency Reference: 2222222

Expert Reference: 156742

PICAS-W

Statement of Instruction

I have been instructed to prepare this report in connection with injuries sustained in an accident on 01/04/2008.

Case Details

Mr Example attended alone.

Mr Example's GP records were used in compiling this report.

Mr Example's licence was used to confirm his ID.

Relevant Past Medical History

- ◆ Had a road traffic accident causing injury to his neck about 5 years ago. He had fully recovered after 3 months.

The Accident

The accident occurred in the morning. Mr Example occupied the driver's seat in a car. He was wearing a seatbelt. A head restraint was fitted. An airbag was fitted, but it did not deploy.

At the moment of impact, the claimant's car was stationary at traffic lights. The claimant's car was struck by another car at about 20 mph. The impact came from the rear. Its force was sufficient to cause moderate damage to the car. Mr Example was thrown forwards. He was able to get out of the vehicle unaided.

Initial Symptoms

Mr Example reports that he:

- ❖ Experienced mild shock which resolved within a day.
- ❖ Suffered severe neck pain which has improved and is now moderately severe.
- ❖ Suffered severe right shoulder pain which has improved and is now moderately severe.
- ❖ Suffered moderate low back pain which resolved after 4 weeks. It was due to a soft tissue injury sustained in the accident.
- ❖ Experienced moderate paraesthesia in the right arm and right hand which resolved after 2 weeks. It was due to a trapped nerve.

Later Symptoms

Mr Example reports that he:

- ❖ Developed moderate anxiety. It has improved and is now mild.

Initial Treatment

Mr Example did not receive any treatment at the scene of the accident. He then got a lift to casualty. Initial treatment comprised advice and analgesia.

Later Treatment

- ❖ Consulted his GP about his neck, right shoulder, right arm, right hand and back 3 days after the accident and received advice to stay active and advice to take painkillers. He re-consulted once and was given a sick note for a week.

Investigations

An x-ray of the neck showed no bony injury.

Effects of the Accident on the Claimant's Ability to Work

His main occupation is as a Chef for 50 hours per week.

Mr Example took 2 weeks off because of the accident.

He was restricted to light duties for 2 weeks.

He had to reduce his hours of work for 2 weeks.

He still experiences discomfort when working.

Effects of the Accident on the Claimant's Daily Life

Home Circumstances:

Mr Example lives with his wife. There are 2 children at home - the youngest is 3 years old, and the eldest is 6 years old.

Travel:

Mr Example has had anxiety when driving. It is currently mild.

He has had physical discomfort when driving. It is currently moderate.

He has had anxiety as a passenger. It is currently mild.

He has had physical discomfort as a passenger. It is currently moderate.

Daily Living:

Mr Example reports that since the accident:

- ❖ He was initially unable to do DIY. The problem is now moderately severe.
- ❖ He was unable to go to the gym. (He usually goes twice a week). The problem is now moderately severe.
- ❖ He was unable to properly enjoy a holiday to France.

Examination Findings

Dominant Hand:

Mr Example is right-handed.

General Appearance:

Mr Example looked very well. He appeared to move a little stiffly during the assessment.

Mental Health:

Based on the interview and my clinical observations, today:

- ◆ Mr Example was suffering from mild anxiety.
- ◆ He was not depressed.

Injuries, Wounds, Scars and Other Examination Findings:

- ◆ Neurological examination of the upper limbs was normal.

Examination of the Neck:

- ◆ Forward flexion was full, but appeared to cause pain. Tenderness of the lower cervical spine and right trapezius muscle was noted.
- ◆ Extension was full, but appeared to cause pain.
- ◆ Right rotation was full and appeared to be painless.
- ◆ Left rotation was full, but appeared to cause discomfort.
- ◆ Right lateral flexion was full and appeared to be painless.
- ◆ Left lateral flexion was full, but appeared to cause pain.

Examination of the Upper Limbs:

- ◆ Right hand on head was full, but appeared to cause pain.
- ◆ Left hand on head was normal.
- ◆ Right hand between shoulders was full, but appeared to cause pain.
- ◆ Left hand between shoulders was normal.
- ◆ Right elbow movement was normal.
- ◆ Left elbow movement was normal.
- ◆ Right wrist movement was normal.
- ◆ Left wrist movement was normal.
- ◆ Right hand grip was normal.
- ◆ Left hand grip was normal.

Examination of the Back:

- ◆ Examination of the back was normal.

Examination of the Lower Limbs:

- ◆ Examination of the lower limbs was normal.

Opinion

Summary Impression:

- ◆ I was able to obtain a very good history.
- ◆ His injuries were entirely consistent with the account of the accident.
- ◆ The claimant's treatment has been appropriate.
- ◆ His time off work has been appropriate.
- ◆ The claimed problems in Mr Example's home life are consistent and reasonable.

Job Prospects:

Mr Example is currently mildly restricted at work.

His ability to work is likely to return to normal over the next 6 months.

In the long term, his employment prospects are likely to be unaffected.

Prognosis

I have carefully weighed all the available evidence from Mr Example's account, the available medical records, my examination findings and my observations during the assessment.

- ❖ The neck pain is due to a whiplash injury. It is currently causing moderately severe disability. I recommend referral to a physiotherapist for further assessment and treatment. 6 sessions would be appropriate. I anticipate that with appropriate management, the neck pain will resolve over the next 6 months. There will be no long-term sequelae.
- ❖ The right shoulder pain is due to a soft tissue injury sustained in the accident. It is currently causing moderately severe disability. I recommend referral to a physiotherapist for further assessment and treatment. 6 sessions would be appropriate. I anticipate that with appropriate management, the right shoulder pain will resolve over the next 6 months. There will be no long-term sequelae.
- ❖ The anxiety is due to the stress of the accident. It is currently causing mild disability. Additional treatment is not required to aid his recovery. I anticipate that it will resolve over the next 3 months. There will be no long-term sequelae.

Travel:

Mr Example's travel anxiety is likely to resolve over the next 3 months.

His travel discomfort is likely to resolve over the next 6 months.

Duty of an Expert

- ◆ I understand my duty is to the Court, and I have complied with that.
- ◆ I understand my duty to the Court is to help the Court on matters within my expertise.
- ◆ I understand that this duty over-rides any obligations to those by whom I have been instructed or by whom I have been paid.
- ◆ I confirm that insofar as the facts stated in my report are within my own knowledge, I have made clear which they are and I believe them to be true, and that the opinions I have expressed represent my true and complete professional opinion.

Dr Geoff Hogg MBChB MRCP DCH DRCOG MRCGP

01/10/08

This report has been securely electronically signed by the author using multi-level passwords and 128 bit encryption. The electronic signature is compliant with the Electronic Communications Act 2000 and is admissible in court.

Analysis of Medical Records

General Practitioner Records

04/04/08 Road traffic accident causing injury to neck and right shoulder. Seen 3 days after accident. Pain and restricted movements neck and right shoulder. Tingling in right hand - no objective neurological findings. Advised ibuprofen and given simple stretching exercises. Re-consulted 11/04/08 - symptoms a little easier - sick note issued. No further related consultations recorded.

Records Summary:

The records were reviewed on 01/10/08.

The GP records from 03/10/02 to 13/08/08 were available.

The GP records were complete. They were legible.

Taken together, the available records do not cause me to change my opinion or prognosis.