

THE STATE OF SOUTH CAROLINA
In The Court of Appeals

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SC Court of Appeals

APPEAL FROM LEXINGTON COUNTY
Court of Common Pleas

Walton J McLeod IV, Circuit Court

Judge

Lower Court Case No. 2020-CP-32-01461
Appellate Case No. 2022-000263

William Klotz,

Appellant,

v.

General Joe VanLier,

Respondent,

RECORD ON APPEAL

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1 your jury room and I want y'all to select a foreperson to
2 serve as the foreperson for this jury and then write a
3 note. The bailiff will give it to me. Let me know who
4 the foreperson is, the jury number of the foreperson, and
5 I'll have additional instructions for you after that.

6 When you're out of the courtroom, when you're in the
7 jury room or when y'all are walking to lunch or walking
8 to your cars, please don't discuss the case with one
9 another. Please don't discuss any opinions about any of
10 the parties involved in the case or anything having to do
11 with the case whatsoever. Your sole purpose when we
12 start the trial is to listen to the testimony you hear
13 from the witness stand or any exhibits that are admitted
14 into the evidence record, but you won't be able to
15 discuss this case in any way until after we've completed
16 the case, I've charged you on the law, and at that time
17 I'll tell you when it's the appropriate time to begin
18 discussing the case in deliberations. You can talk about
19 the weather, or the Super Bowl or anything of that
20 matter, but nothing to do with this case in any way. The
21 bailiff will now take you down to your jury room and I'll
22 look for a note from y'all once you select a
23 foreperson.

24 (Whereupon, the jury entered the jury room at 10:55
25 a.m.)

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1 THE COURT: Mr. Klotz or Mr. Lybrand, anything
2 regarding jury selection at this time?

3 MR. LYBRAND: Yes, sir, Your Honor.

4 THE COURT: You do have something?

5 MR. LYBRAND: Yes, sir.

6 THE COURT: Could you approach please. Come up, Mr.
7 Klotz.

8 MR. LYBRAND: Your Honor, we would challenge the
9 plaintiff striking juror number 11, Austin Gaffney. He's
10 the only African-American person on the jury panel. I
11 don't know why he was stricken other than the plaintiff
12 has to give some racial neutral reason.

13 THE COURT: Okay. Well, let me get them out of here
14 unless we can address it quietly on the record, but they
15 might be able to hear us, so I'll have the remaining
16 panel step out but remain in the hallway.

17 Ladies and gentlemen, the remaining jury panel, if
18 y'all could just step out of the courtroom and just wait
19 in the hall area and I'll get you back in here
20 momentarily, okay? We'll talk about this after they
21 leave.

22 (Whereupon, the remaining jury venire exited the
23 courtroom at 10:55 a.m.)

24 THE COURT: Mr. Lybrand, I think the courtroom is
25 empty. Yes, it is.

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1 MR. LYBRAND: Your Honor, may it please the Court.
2 As far as the jury selection is concerned, I would note
3 for the record that the strike list of the initial 20
4 contains only one African-American potential juror, that
5 being juror number 11 which was the plaintiff's second
6 strike. We would challenge the plaintiff for giving a
7 racial neutral reason why that strike was exercised.

8 THE COURT: Mr. Klotz.

9 MR. KLOTZ: Well, I point out that Mr. Lybrand has
10 struck the one Hispanic potential juror Joel Armenta,
11 number 7. His reason for striking is not really because
12 of racial discrimination on my part, it's because he
13 wants it to be in favor of a racial choice regarding his
14 client.

15 MR. LYBRAND: I --

16 THE COURT: Hold on, Mr. Lybrand. Now, he's
17 asserted that you have, it's called a Batson motion
18 which you may have researched before, Mr. Klotz, but
19 basically I need to know if you have any reason that you
20 struck juror number 66, that would be number 11 on the
21 strike sheet. Did you have a racially neutral reason?

22 MR. KLOTZ: He's a male. I tended to strike the
23 male jurors as probably being more conservative. I spoke
24 to maybe a dozen attorneys before this case and they all
25 said that the Lexington juries are notorious as being

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1 highly conservative so I tried to steer away from the
2 conservative males.

3 THE COURT: Do you have any other, you thought juror
4 number 66 might be conservative; is that correct?

5 MR. KLOTZ: Conservative male. I looked at him as a
6 potential conservative male.

7 THE COURT: Mr. Lybrand.

8 MR. LYBRAND: Your Honor, the problem is, there were
9 other males and the only reason I hear from the plaintiff
10 is that he was striking males. He did not strike a white
11 male, but opted instead as between striking a white male
12 and there's a number of those on the jury versus an
13 African-American male, he chose to strike an
14 African-American male. So I don't think that's racially
15 neutral when faced with the choice of on gender of an
16 African-American male versus a Caucasian male, he chooses
17 to leave a Caucasian male on the jury so I don't think
18 he's provided a racial neutral reason.

19 MR. KLOTZ: Well, Mr. Lybrand --

20 THE COURT: Hold on. I would like you to let
21 Mr. Lybrand finish. One thing we need get ready for this
22 week is there will be times when someone is speaking and
23 you may not agree with what they're saying and that's
24 okay, but you need to allow them to finish and you will
25 be allowed to respond in full.

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1 MR. LYBRAND: The only other comment I would make,
2 Your Honor, is Mr. Klotz's initial reason which referred
3 to a Hispanic potential juror. There's no Hispanic
4 parties to this case so there would be no reason for him
5 to - that strike would be irrelevant.

6 THE COURT: Mr. Klotz, you also brought up one of
7 Mr. Lybrand's strikes.

8 MR. KLOTZ: That's correct. A Hispanic choice would
9 be less likely to be a white supremacist conservative and
10 on that point I think it's not an appropriate strike for
11 Mr. Lybrand and Mr. Lybrand was not correct in saying
12 that I didn't select any other males. All of my choices,
13 I guess, were male.

14 MR. LYBRAND: Your Honor, just so the record is
15 clear, my point is this, the plaintiff has said in
16 response to the Batson Challenge that he viewed males
17 more conservative than females. Our point is that he
18 allowed white males to serve as a juror and did not
19 strike a white male when he could have done so but struck
20 instead the only African-American male who was on the
21 strike sheet.

22 THE COURT: All right.

23 MR. KLOTZ: That's coincident. I believe in my voir
24 dire I requested a balanced non discriminatory selection
25 for the jury.

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1 THE COURT: Right. I understand that, but and yet
2 you struck the only African-American on the list.

3 MR. KLOTZ: There's only one.

4 THE COURT: Right.

5 MR. KLOTZ: But I just did it randomly looking at
6 males. I didn't look at the race. I only looked at the
7 male categories.

8 THE COURT: I'll be right back.

9 BAILIFF: Your Honor, may I approach?

10 THE COURT: I didn't want them brought back up yet.
11 I'm sorry. I have a hearing that came up. I can hold
12 onto this.

13 BAILIFF: I'll keep them back down there.

14 THE COURT: Keep them separated from the public.

15 Mr. Klotz, did you take any other notes during the
16 jury qualification on the jurors, particularly juror 66?

17 MR. KLOTZ: No. I didn't take any other notes.

18 THE COURT: Okay. And you indicated, if I'm
19 correct, that you did or you did not look at his --

20 MR. KLOTZ: I did not take any notes during
21 selection.

22 THE COURT: You didn't take a look at his race on
23 the strike sheet?

24 MR. KLOTZ: No. I was only looking for males to
25 strike.

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1 THE COURT: And, okay.

2 MR. LYBRAND: Your Honor, the only thing I would
3 point out, if my calculations and observations are
4 correct, given male, there were five white males who were
5 not stricken by the plaintiff so the --

6 MR. KLOTZ: I didn't look at white.

7 THE COURT: Okay. You were saying.

8 MR. LYBRAND: So the question is, is this a pretext
9 for striking an African-American male because if male is
10 the only requirement, the plaintiff skipped over males,
11 white males on the strike list and left five white males
12 on there. So I just want this for the record, Your
13 Honor. I just want my position noted for the record,
14 Your Honor.

15 THE COURT: I think it is. I want to make sure we
16 don't have dueling Batson Motions because you made one,
17 he discussed one. I mean, you agree with that?

18 MR. LYBRAND: Well, I haven't heard a motion by the
19 plaintiff.

20 THE COURT: His reply essentially was kind of, to
21 you, was almost a motion in itself even though he didn't
22 make it.

23 MR. LYBRAND: Well, if he wishes to make that a
24 motion, for the record I would ask him to do so and I can
25 respond to that just so the record is clear.

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1 THE COURT: Do you wish to make a Batson Motion
2 against Mr. Lybrand?

3 MR. KLOTZ: This would be a formal motion?

4 THE COURT: Well, you mentioned him striking another
5 member of this jury panel.

6 MR. KLOTZ: That's right. The Hispanic member was
7 struck.

8 THE COURT: Okay. Anything else you want to say
9 about that?

10 MR. KLOTZ: Well, it's an incongruity when
11 Mr. Lybrand objects to a black potential juror being
12 struck, but he himself has struck an Hispanic juror.

13 THE COURT: Mr. Lybrand.

14 MR. LYBRAND: The only thing I would respond to,
15 Your Honor, when Mr. Klotz talks about incongruity, there
16 is no Hispanic party to this case. There is no Hispanic
17 plaintiff, no Hispanic defendant and no Hispanic
18 witnesses, so it's a red herring to say I struck an
19 Hispanic juror for racially neutral reasons because
20 that's irrelevant. There is no Hispanic person of
21 Hispanic origin as a party to the case or as a witness to
22 the case.

23 THE COURT: Any other neutral reason?

24 MR. LYBRAND: No, sir. Your Honor, let me just add
25 this because I did take notes. I did strike juror number

1 7 because juror number 7 in addition apparently being
2 Hispanic is an auto mechanic and we've got an issue in
3 this case about a defect, sudden and unexpected defect in
4 a motor vehicle. One, as a lawyer one never knows how a
5 mechanic may see one side of that issue or the other so
6 out of an abundance of caution that's a racially neutral
7 reason for striking number 7 also.

8 THE COURT: All right.

9 MR. LYBRAND: Your Honor, if it helps the Court out,
10 I'll withdraw my motion. I want to make sure the Court's
11 time is used efficiently and what have you and I'll
12 withdraw the motion so we can proceed to getting this
13 matter going on the merits.

14 THE COURT: Very well. All right. The record will
15 reflect that the defendant has withdrawn his Batson
16 Motion. The record will also reflect that counsel did
17 provide a neutral basis for striking juror number 7 based
18 upon his notes acquired during jury qualification so
19 anything in terms of a Batson Motion for the plaintiff is
20 denied. Okay. Anything else before I tell you who the
21 jury foreperson is? All right. It looks like our
22 forelady is juror number 19, Amanda Bolin. I'll make
23 this note a Court Exhibit. Okay. If there are no other
24 post selection motions, I'll bring the panel back in and
25 let them go.

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1 (Whereupon, Court's Exhibit #1 marked for
2 identification.)

3 THE COURT: All right. If we could get the
4 remaining panel back into the courtroom.

5 (Whereupon, the remaining jury venire panel entered
6 the courtroom at 11:15 a.m.)

7 THE COURT: All right. Ladies and gentlemen, I
8 appreciate your patience. I trust we have everybody back
9 in here. So we've selected the jury for our trial. I
10 don't have another trial this week for you so I
11 appreciate you being here and appearing. I'm sorry you
12 weren't selected. I'm sure you're very sorry too, but
13 anyways, we appreciate you being here, but you're free to
14 go at this point. Madam Clerk, do they need to do any
15 forms with you or anyone downstairs?

16 THE CLERK: No, sir.

17 THE COURT: Okay. Y'all are free to depart and your
18 jury service for the week is done. Thank you.

19 (Whereupon, the remaining jury venire panel was
20 released from further jury duty at 11:17 a.m.)

21 THE COURT: Okay. All right. So we have a jury
22 picked, we have a foreperson, the panel has been
23 dismissed for the week. Before we bring them back up,
24 it's 11:20. At some point we'll be around the lunch hour
25 anyway. It may make sense to bring them up and dismiss

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1 them for lunch to take care of any pretrial matters.
2 Ideally if I bring them back up, I'll just let them go
3 out until, I'll tell them to be back at 12:45, that way
4 they can be seated in the courtroom, start the trial
5 before one p.m. and see where we go from there. That
6 make sense to both of you?

7 MR. KLOTZ: Yes. It does.

8 THE COURT: All right. So let's bring the jury
9 back up. I'll let them go for a good lunch break, and
10 then we'll handle any sort of evidentiary procedural
11 issues we have, okay?

12 (Whereupon, the jury entered the courtroom at 11:25
13 a.m.)

14 THE COURT: Okay. Please be seated. Well, Madam
15 Forelady, thank you for agreeing to serve as foreperson.
16 I've got some matters I have to take up with the parties
17 before we can really get started, so instead of just
18 keeping y'all down there in the jury room any longer, I'm
19 gonna go ahead and let you go to lunch now. I would like
20 you to, if you leave the courthouse, just be back in the
21 jury room at 12:45. That's about an hour and 20 minutes.
22 While you're out, as I said earlier, don't discuss the
23 case with anyone. You haven't heard anything obviously,
24 but please don't discuss any of your opinions about
25 anything. Don't discuss the parties, nothing to do with

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1 this courtroom or this case. Otherwise, have a safe
2 lunch. We'll see you back here in about an hour and 20
3 minutes and we'll get started this afternoon. Any
4 questions before y'all depart? All right. We'll see you
5 after lunch. Thank you.

6 (Whereupon, the jury was released for lunch at 11:26
7 a.m.)

8 THE COURT: Okay. So we'll start the trial
9 obviously after lunch, but I know there are several
10 things you wanted to go over before then regarding
11 exhibits and testimony. Mr. Klotz, as you have
12 indicated, I think it's your intention to just take the
13 stand and testify for yourself; is that correct?

14 MR. KLOTZ: That's correct.

15 THE COURT: Okay. Mr. Lybrand, I think you broached
16 a few things to me maybe as far as pretrial not motions,
17 but discussions as far as testimony that comes forward in
18 this case.

19 MR. LYBRAND: Yes, sir, Your Honor. May it please
20 the Court. Certainly Mr. Klotz has the right to take the
21 stand and testify, however, it creates a potential issue
22 slash problem for the defense because I'm assuming he's
23 going to testify in the narrative which means he's just
24 going to get up and start testifying. I don't know what
25 all he may say, some of it which may be objectionable and

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1 I would not know that it's objectionable until I hear it
2 and so there was some things that I think we needed to
3 handle in terms of what he intends, how he intends to
4 provide information in the narrative to the jury because
5 some of that may be excluded and that's what I wanted to
6 go through in these exhibits that have been submitted.

7 So, you know, I don't want to give the impression to
8 the jury that I'm hopping up every 30 minutes to make an
9 objection, but given the circumstances of how the
10 plaintiff is presenting his case that may be something
11 that I would have to consider doing.

12 THE COURT: Okay. Well, Mr. Klotz, obviously the
13 only way I know how to do this is to have a discussion
14 so, Mr. Klotz, obviously when you take the stand, the
15 Clerk of Court or I will place you under oath and, you
16 know, any witness in this courtroom can testify as to
17 their personal knowledge, what they saw, what they heard,
18 or excuse me, what they saw, smell or did, as far as if
19 you heard something at the accident scene, this is all
20 hypothetical, I don't know what your testimony is, but
21 what your senses experienced in that moment and that's
22 personal knowledge of the case. I suspect you're gonna
23 tell us your experience from the date of this accident;
24 would that be accurate?

25 MR. KLOTZ: That would be accurate.

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1 THE COURT: Okay. I think one of the things that
2 undoubtedly will come up, you can testify to what you've
3 done, but you have to be careful about testifying as to
4 what other people said. Are you familiar with that?

5 MR. KLOTZ: That's right. The hearsay motion.

6 THE COURT: Okay. Hearsay rule. It's not a motion.
7 Rules of evidence don't permit out of court statements
8 offered for the truth of the matter asserted here at
9 trial so while you can, as I have said again and again,
10 while you can testify to what you saw, you can't just
11 testify to what some person further away said to you or
12 said to the defendant. Does that make sense?

13 MR. KLOTZ: That's right. That's what I
14 anticipated.

15 THE COURT: Okay. There are, one of the things you
16 mentioned in your email was, I don't see it, but I think
17 it had to do with insurance and subrogation, if I'm not
18 mistaken.

19 MR. KLOTZ: Well, if it were possible to inform the
20 jury when you charge them or reach that point as to what
21 subrogation is and that it represents a cost to the
22 plaintiff.

23 THE COURT: Well, subrogation is an insurance term.
24 We don't mention, we don't allow automobile or liability
25 insurance or a subrogation claim from a liability

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1 insurance matter to ordinarily come up in testimony. The
2 reason is, one of the reasons is to avoid any sort of
3 confusing the jury because this case to hear is about two
4 individual parties, you and the defendant and you're
5 seeking to, you brought this claim against the defendant
6 for damages and to ask the juror, ask the jury to
7 compensate you for any damages the defendant caused, but
8 by interjecting insurance into that discussion it can,
9 well, it's long been a matter of evidentiary rules that
10 we don't allow that because we don't want the jury just
11 to think, well, he's got X dollars of insurance so what's
12 the big harm. It's just money. It's other people's
13 money. Do you follow me?

14 MR. KLOTZ: Yes. I follow you. It might be
15 reasonable then not to mention the subrogation, but
16 mention to the jury that they should consider that I
17 would be liable for all medical costs myself.

18 THE COURT: If I understand your point correctly, so
19 when someone is injured and they incur medical bills
20 generally, yeah, that person is responsible for paying
21 their medical bills. Is that what you're trying to say?

22 MR. KLOTZ: Yes. That's what I'm saying.

23 THE COURT: Did you understand that as well,
24 Mr. Lybrand?

25 MR. LYBRAND: I think so, Your Honor. I mean, Mr.

1 Klotz has told the jury when he introduced himself that
2 he's making two claims, one for property damages to his
3 vehicle and the other for his bodily injury medical
4 condition and what have you. A large portion of his
5 claim is contested, hotly contested by the defendant and
6 that feeds into what he can prove in terms of causation
7 of some of these things. He may feel like a certain
8 medical condition was attributable or caused by the
9 accident. We may disagree with that. The burden of
10 proof is on him under the rules of evidence to bring in
11 evidence to support such a claim.

12 So if, for example, what we've got here, Your Honor,
13 as I indicated in my brief, the accident happened in
14 February of 2015. My understanding from deposing Mr.
15 Klotz and going through his records are that the day
16 after the accident he went to the emergency room in or
17 around Aiken and incurred some of those charges that day.
18 At some point he consulted with his, with some former
19 attorneys of his and/or his primary care physician and he
20 then started some treatment with a chiropractor. So
21 between February and April or May or so that's what he
22 was getting treatment for. The chiropractic may have
23 gone on a little bit longer. So that's that snapshot,
24 that window of time.

25 When I took Mr. Klotz's deposition, fast forward to

1 around November or December of 2015, some six to eight
2 months later, his testimony is that he had began
3 experiencing coughing spells that led him to think that
4 he had bronchitis. He goes to his physician, tests are
5 run, he's referred for diagnostic testing, he sees his
6 primary care physician. At some point he gets referred
7 to heart physicians who eventually according to him
8 diagnose him as having congestive heart failure and it's
9 determined, all of this is in accordance with what Mr.
10 Klotz's deposition testimony was, that he had a 92
11 percent blockage in one of his arteries and I think he
12 had to eventually have either a CATH or possibly a stent
13 put in and follow up heart treatment.

14 My understanding is that Mr. Klotz intends and
15 wishes to say that that heart condition is related to
16 this wreck with my client. There's a six or eight month
17 gap before any symptoms whatsoever related to heart ever
18 arise and then when it's determined that he has a 92
19 percent blockage, obviously we know heart blockages take
20 time to evolve. You don't just have a coronary artery
21 blockage at 92 percent over the course of how many
22 months. Anyway, I'll set that aside. But Mr. Klotz
23 incurred about I want to say something around --

24 THE COURT: 90 something thousand dollars.

25 MR. LYBRAND: -- about \$9000.00 for what I call the

1 soft tissue neck and back. Six or eight or nine months
2 later goes by, his heart condition comes up, he then goes
3 to the heart doctors and he wants to add 105,000 or
4 \$100,000.00 of treatment which he wants to contend is
5 caused by this accident with my client. There's been no
6 testimony and there will be no testimony admissible here
7 that that heart condition is related to the car accident.

8 Now, Mr. Klotz may think it is. Mr. Klotz may have
9 talked to physicians who might give him somewhat of a
10 favorable opinion, but Mr. Klotz has never deposed any of
11 those doctors and, in fact, Your Honor, this leads into
12 your inquiry about calling one of the doctors from
13 Charlotte live, Mr. Klotz has never indicated that he
14 intends to call an expert medical witness, hence, we
15 never deposed anybody. Our position is that Mr. Klotz is
16 not a physician obviously. He can't self diagnose a
17 complicated complex heart condition. If he wants to try
18 to prove a causal link between an accident in February
19 and a heart condition that is discovered in December or
20 later, then he's got to prove that through competent
21 expert medical testimony which we have a right to
22 challenge and cross examine.

23 As Your Honor asked him today, he's never intended
24 to bring a doctor to testify because as you asked him, I
25 think the question was, have you talked to your doctor

1 about coming here to testify and he said no. So the
2 record is clear that there's never been any notice to the
3 defendant that the plaintiff intends to bring a witness
4 physician to testify. Mr. Klotz has presented I think an
5 affidavit that he alluded to which is perfectly fine, but
6 in our judgment it is not admissible.

7 So we've sort of got a demarcation line here when it
8 comes to the injuries and medicals. We don't object to
9 Mr. Klotz testifying about any neck, back, soft tissue
10 problems that he got viewed at the emergency room, maybe
11 saw his family doctor or had chiropractic treatment from,
12 but we do object, fast forward, with him testifying that
13 as a result of this accident and the stress that he
14 claims he received therefrom he now had a heart condition
15 that developed that required him to incur a substantial
16 amount of medication, testing, what have you, because
17 there's not going to be any way for him to prove that
18 through any witnesses so that's a big element concerning
19 our case, Your Honor.

20 THE COURT: Well, the original conversation started
21 with discussing insurance, but obviously one of the
22 issues is the affidavit of the cardiologist; is that
23 right?

24 MR. KLOTZ: That's right. The chief cardiologist.

25 THE COURT: And obviously a cardiologist is an

1 expert, but even at trial it's just not appropriate to
2 allow an affidavit to serve as authoritative testimony on
3 something as important as a heart condition without the
4 doctor having been, either being here live subject to
5 cross examination, but obviously under ordinary
6 circumstances they would be deposed in advance of trial.
7 But your other question about the bills he incurred after
8 the fact, has he provided those bills? Have those bills
9 been exchanged in discovery?

10 MR. LYBRAND: He's provided some or all of those
11 bills, Your Honor, but our issue would be moving in
12 limine to preclude, if that heart condition to which
13 those bills relate cannot come into evidence because of
14 there's a lack of expert testimony, then the bills can't
15 come in because the causation of all of that is
16 inadmissible. We would suggest, Your Honor, that the
17 plaintiff can't testify that in his opinion he had a
18 heart condition and it came from the accident and here
19 are the bills because there's no foundation laid for any
20 of that when he's the only witness.

21 THE COURT: Mr. Klotz.

22 MR. KLOTZ: Well, I have doctor's reports that
23 relate to a condition to the onset of arrhythmia in my
24 heart which was detected by my personal care physician
25 and detected when I went to the emergency room about my

1 bronchitis that I thought I had, they detected the
2 arrhythmia and it was the arrhythmia that brought on the
3 heart failure later so there's a time correlation there.
4 And also, I was in a second collision on Interstate 20 in
5 2019 which also brought on the same arrhythmia so I think
6 there's a clear evidentiary connection with the
7 arrhythmia and the onset of the heart failure.

8 THE COURT: But admittedly you don't have a witness,
9 a qualified expert to connect those medical theories,
10 those conditions to this case now?

11 MR. KLOTZ: Well, I think the affidavit should be
12 admitted. If you wanted, I could show you the actual
13 wording of it.

14 THE COURT: I'll be happy to look at a copy of it if
15 you've got one.

16 MR. KLOTZ: Yeah. I have a copy of it here if I can
17 find it. (Proffering.)

18 THE COURT: All right. Thank you. Okay. Mr. Klotz
19 has handed me a document from Atrium Health addressed to
20 Mr. Klotz at his home address dated October 31st, 2018
21 signed by Dr. Dominic Falewee which just states, it's a
22 two line letter, in fact, it's not an affidavit, it's not
23 a sworn affidavit, it's not notarized, it's just a
24 letter. Anyway, the letter states that Mr. Klotz's
25 accident occurring on February 22nd, 2015 to a reasonable

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1 degree of medical certainty the accident most probably
2 caused progression to heart failure via atrial flutter
3 and cardiomyopathy. Now, to be clear this -- Have you
4 seen this document, Mr. Lybrand?

5 MR. LYBRAND: Yes, sir, Your Honor.

6 THE COURT: I wouldn't characterize this as an
7 affidavit. An affidavit is a document that is sworn to
8 under oath to a notary public in South Carolina which if
9 found to be untrue, could expose someone to a charge of
10 perjury. It's a sworn statement. This is a letter
11 certainly. It's a letter that gives a medical conclusion
12 from a doctor, but I don't see the - if this were even a
13 motion hearing, I don't think this is something I could
14 use for summary judgment motion. I don't believe this is
15 an affidavit.

16 MR. KLOTZ: It was provided under the letterhead of
17 the Atrium Health Sanger and Vascular Clinic.

18 THE COURT: I can understand you wanting to use the
19 letter certainly, but to be clear there's an issue with
20 using a sworn affidavit because it's sworn testimony in
21 lieu of somebody being here, but unfortunately it
22 wouldn't allow that same witness to be subject to cross
23 examination by the defendant. What we have here that you
24 have provided me is a letter. It's not even a sworn
25 affidavit. That's not to say that I have any reason me

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1 personally to doubt the veracity of the doctor's letter,
2 but it's nonetheless not an affidavit. It's a just
3 a letter in a file, so I don't believe that's appropriate
4 evidence.

5 MR. KLOTZ: Well, it relates to the probability and
6 --

7 THE COURT: Of course it relates.

8 MR. KLOTZ: -- you really can't dismiss anything
9 regarding probability.

10 THE COURT: Well, the problem, Mr. Klotz, it can
11 absolutely relates to probability, but it's one sided.
12 The point of trial and discovery is that you discover all
13 the information we get. There's no surprises at trial.
14 Ordinarily that's why depositions are taken in a civil
15 case so everyone knows what everyone is going to testify
16 to when they come here. That said, you don't have to do
17 that, but that's why we have live witnesses at trial. So
18 if the doctor were here, I'm sure Mr. Lybrand wouldn't
19 like it, but he'd be here live to testify, but he's not
20 here now and in our dialogue we had just after
21 qualification you indicated he was a pretty busy guy. I
22 think you had an appointment fairly recently, but I can't
23 allow that letter to serve as some sort of -- Let me
24 rephrase that. The rules of evidence will not allow me
25 to allow that letter to be used to prove as expert proof

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1 of a medical condition one way or the other.

2 MR. KLOTZ: Well, the proof of the condition is in
3 the doctor's reports of the condition.

4 THE COURT: But another thing, we don't have a
5 witness to put in those reports, to testify to
6 authenticity. Sometimes they're used as business
7 records, a certificate of authenticity. Is there an
8 affidavit from a records custodian anywhere in the file?

9 MR. KLOTZ: Yeah. They have an office of records at
10 the Atrium Heart Sanger and Vascular Clinic. They have
11 an office of records and they provide these records.

12 THE COURT: Sure, but --

13 MR. KLOTZ: They're official orders.

14 THE COURT: Is there a records custodian document
15 there?

16 MR. KLOTZ: Yes. There is.

17 THE COURT: Okay. Have you shown it to Mr. Lybrand?

18 MR. KLOTZ: Yeah. Yeah. Mr. Lybrand has all of
19 those doctor's records.

20 THE COURT: Okay.

21 MR. LYBRAND: Your Honor, the point here is that
22 obviously he has sent me records and obviously he had to
23 obtain those records from the provider in whatever manner
24 the provider insisted him to get them. The problem as
25 the Court has seen and the position of the defense is

1 that that letter wherever it came from and I have no
2 doubt that it didn't legitimately come from the Heart
3 Center, but it's not, even if it were an affidavit, I
4 submit it's not admissible. It's a two line letter from
5 a doctor who is not going to testify either by deposition
6 or in person.

7 Mr. Klotz has never indicated to us that he intended
8 either by deposition or by live testimony that he was
9 going to bring any of his heart physicians to trial as a
10 witness. If someone tells me I'm not going to call any
11 expert witnesses, then I don't go about deposing them,
12 perhaps preserving testimony at my expense that the
13 opposition may later use later on should the doctor be
14 unavailable or whatever, but we didn't take any medical
15 depositions. All we did is receive information by form
16 of letter and records and bills from Mr. Klotz that these
17 are the bills that I've incurred and this is the
18 treatment that I have undergone and this is part of our
19 damages and so obviously one has to take that and in a
20 trial as His Honor has already indicated that evidence
21 has to come in in an admissible form and it's not.

22 Plaintiff is not purporting to present it in an
23 admissible form. We have no right to cross examine the
24 doctor on how he arrived at that opinion or what other
25 causes may have occurred. He's now indicated that he's

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1 had a subsequent accident that exacerbated the same
2 condition. So our motion, Your Honor, is simple, that
3 without a foundation and without expert testimony either
4 by deposition or live in person, Mr. Klotz is not as a
5 layman not in a position to give credible evidence
6 linking the causation of any heart condition and any
7 treatment therefor to this accident.

8 THE COURT: Okay.

9 MR. LYBRAND: He certainly had every opportunity to
10 do so but has not done so. And I don't believe the
11 doctor is under subpoena so...

12 MR. KLOTZ: Well, I offered to submit to medical
13 exams to anyone Mr. Lybrand requested and he told me he
14 didn't need that so if he wanted a deposition, I could
15 have arranged that, but it would be my understanding that
16 he didn't need that.

17 THE COURT: Well, at the end of the day the
18 plaintiff has the burden of proving their case by a
19 preponderance of the evidence so I understand what you're
20 saying about Mr. Lybrand, but ultimately it's on the
21 parties to ensure they have witnesses to testify to the
22 evidence they want indicated at trial, otherwise you've
23 got the risk of you talking about all these conditions
24 using that letter, it's a lay person talking about heart
25 conditions and evidence that only an expert in that

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1 medical field can provide in a court of law.

2 MR. KLOTZ: Well, I was going to address my
3 qualifications to speak to that.

4 THE COURT: Are you a medical doctor?

5 MR. KLOTZ: No. I'm not a medical doctor, but I've
6 studied and read a great deal on my condition.

7 THE COURT: Well, as any person may do when they
8 have a health conditions I understand your point, but I
9 don't think that qualifies you as an expert in the field
10 of medicine or cardiology.

11 MR. KLOTZ: Well, I wasn't going to give an opinion
12 so I don't want to claim to be an expert.

13 THE COURT: Well, the whole point of experts are to
14 give opinions.

15 MR. KLOTZ: I was only going to give evidence in
16 terms of doctor's reports.

17 THE COURT: Right, right, and we're kind of coming
18 around full circle here, but evidence comes in through
19 witnesses, witnesses who have the ability to -- You have
20 the ability to talk about what you experienced at the
21 wreck immediately after, the damages we're talking about,
22 but what you're talking about is you yourself talking
23 about medical testimony that only an expert witness can
24 educate a jury on. But I understand why you want to do
25 it, of course, but the rules of evidence require, Rule

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1 702 as far as expert witnesses you offer at trial.
2 Experts are people with knowledge, education, experience
3 to provide opinion testimony on the ultimate issue of the
4 case, but that's not something that's reserved for lay
5 witnesses. I would be a lay witness on that because I'm
6 not a doctor. You're a lay witness. A defendant would
7 be a lay witness.

8 MR. KLOTZ: I'm both a scientist accustomed to
9 reading literature and documents and I'm also a
10 professional engineer so I believe I have the
11 documentation for longstanding medical publications to
12 support the preponderance of the evidence.

13 THE COURT: Okay. But that type of publication,
14 that type of medical record would be exactly the type of
15 thing that your cardiologist Dr. Falewee would testify
16 to.

17 MR. KLOTZ: Well, he's testified to the main point
18 --

19 THE COURT: He did not testify.

20 MR. KLOTZ: -- that relates to the evidence.

21 THE COURT: To testify is either in a deposition
22 under oath and in this courtroom under oath so he did not
23 testify. He did write a letter, but that is not
24 testimony in the courtroom.

25 MR. KLOTZ: Well, I would be agreeable to having him

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1 called and asked questions.

2 THE COURT: That's - this morning, I mean, you
3 indicated he was very busy. You know, you can call his
4 office and see if he's available, but I'm not gonna do a
5 phone call. And also I suspect that if he could appear
6 live in trial, Mr. Lybrand would want to depose him
7 first, but we'll see. But you'll have some time in
8 between the break, but a lay person can't testify to
9 expert testimony, cardiology, okay?

10 MR. KLOTZ: Well, I think if you're a scientist,
11 you're allowed to speak to scientific matters.

12 THE COURT: That's -- Well, people can acquire
13 certain skills and that's a case by case basis, but
14 educating a jury on matters of cardiology I don't think
15 is an appropriate analogy. So we can agree to disagree
16 on that.

17 MR. KLOTZ: Well, I was just going to educate them
18 to the point they would understand the content of the
19 doctor's reports.

20 THE COURT: And the only person best qualified to
21 educate the jury about the doctor's reports would be the
22 doctor who is authoring the reports.

23 MR. KLOTZ: But several doctors in all.

24 THE COURT: We've made -- That's true. There could
25 have been more than one witness, doctor witness. Is

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1 there any other expert testimony issue in this case?

2 MR. LYBRAND: Your Honor, this sort of has come up
3 after I deposed Mr. Klotz, but the testimony is going to
4 be from my client is that the, as the accident is
5 occurring, and we have photographs that he can
6 authenticate, his right rear axle on his pickup truck
7 broke which caused Mr. VanLier to lose control of his
8 vehicle and collide with the plaintiff's vehicle. The
9 testimony from Mr. VanLier will be he had no knowledge
10 whatsoever or had any reason to believe that there was
11 going to be some sort of sudden mechanical failure. I
12 mean, that would be endangering his own life in addition
13 to anybody else's.

14 I think based on just some random things that I've
15 heard and received from Mr. Klotz that he wants to
16 testify as an expert witness on axle failure or something
17 of that nature. I think the fact that the axle failed is
18 not an issue. We all agree that it failed, but that
19 doesn't make Mr. VanLier liable or responsible and I
20 don't think Mr. Klotz is, if he purports to want to
21 testify on some sort of failure, he's not an accident or
22 reconstruction expert. He hasn't examined Mr. VanLier's
23 vehicle or any portion thereof. He hasn't done any
24 testing or what have you. I suspect what he's done is
25 similar to what he did with his medical issues that we

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1 just discussed was to go online and read articles and
2 self educate him which again doesn't make him an expert
3 in that. So that's the only other thing that I know
4 about expert testimony, Your Honor.

5 MR. KLOTZ: Well, I have to object here. That's
6 entirely speculative and Mr. Lybrand is testifying as to
7 what I will do with no knowledge thereof and, in fact,
8 the majority of what Mr. Lybrand has said is incorrect.
9 If you look at my brief that I submitted, I will not be
10 speaking about the brake of Mr. VanLier's truck axle
11 because the photographic evidence is that the axle
12 did not break. The wheel separated from the axle after
13 Mr. VanLier attempted to leave the scene of the accident
14 and I will testify as to what I saw after Mr. VanLier
15 left the scene of the accident. The wheel separated and
16 there is a defect in his truck, in this 2008 Dodge Ram
17 that causes the front wheels to lock and veer in the
18 direction of the wheel that has locked and that would
19 account for him running into the back of my Prius without
20 any warning to me and it would also account for the
21 reason the wheel came off the axle because he was going
22 at a high rate of speed, the wheel locked, it would have
23 sheared the wheel off the axle. And that's photographic
24 evidence and in the form FR10 the investigators annotated
25 that the proximate cause of the accident was the wheel,

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1 not the axle.

2 THE COURT: Is that the accident report done after
3 the -- Is that the trooper's report?

4 MR. KLOTZ: That's the accident report, FR10
5 accident report. I have that here as an exhibit.

6 THE COURT: It's a document understood, but is that
7 the trooper's report?

8 MR. LYBRAND: Your Honor, the FR10 is the insurance
9 report. That's not -- May it please the Court. This is
10 Trooper Antley's accident report (proffering) and that is
11 where the issue was described as a breaking of an axle.
12 So we've either got a broken axle as indicated by the
13 investigating officer or we've got a wheel separation.
14 Whatever it was it was a sudden and unexpected mechanical
15 defect, whether the axle breaks or whether the front end
16 locks and that causes some effect on the rear wheels.
17 The point is the plaintiff is not qualified to testify
18 about any of that. He can testify about what he saw and
19 what happened, but this testimony about the axle didn't
20 break, the front-end locked and there was a defect and
21 that caused this and that, there's no indication, he is
22 not qualified to testify about any of that.

23 MR. KLOTZ: Well, I would object to that conclusion
24 too. I'm a professional engineer with 20 years
25 experience in accident analysis with the Savannah River

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1 Site and as a professional engineer I am knowledgeable
2 about metal, metal alloys, strength of materials and I'm
3 well qualified to speak about that and to look at these
4 photographs --

5 THE COURT: What is it you want to speak about?

6 MR. KLOTZ: I wanted to speak about the fact that
7 Mr. VanLier was leaving the scene of the accident at a
8 high rate of speed that caused his wheel to separate from
9 his axle.

10 THE COURT: He was leaving the scene of the
11 accident?

12 MR. KLOTZ: That's correct. That's what I saw.

13 THE COURT: You mean an accident before the
14 accident? The allegation is that he collided with your
15 vehicle; is that correct?

16 MR. KLOTZ: And then he left the scene under his own
17 vehicle's power.

18 THE COURT: And did what, drove away?

19 MR. KLOTZ: He drove away and at some point about a
20 quarter of a mile down the road his wheel came off and he
21 had to stop and I looked and I saw Mr. VanLier walking
22 off to the side of the road and picking up his wheel and
23 putting in the back of his truck and that's what
24 happened.

25 THE COURT: Well, okay, but the wheel fell off after

1 he left the scene.

2 MR. KLOTZ: That is correct.

3 THE COURT: If that's the issue.

4 MR. KLOTZ: The wheel fell off.

5 THE COURT: What do you need testimony on why the
6 wheel broke off? That's not what happened when he
7 allegedly collided with you.

8 MR. KLOTZ: That's correct. It was allegedly. It
9 was alleged that the axle broke, but the axle did not
10 break. Now, if you look at the --

11 THE COURT: Just hold on. So your complaint alleges
12 that the rear axle broke thereby causing a collision with
13 the plaintiff. That's your complaint.

14 MR. KLOTZ: That's what my attorney wrote and he did
15 that because of that form the FR2 I believe it is that
16 the responding trooper completed, but there's a
17 disclaimer on that form that the responding trooper
18 signed. It says that it cannot be concluded from this
19 form that what is said here was what actually happened
20 because of limitations of the trooper.

21 THE COURT: Well, the trooper shows up and he talks
22 to you and he talks to the defendant and comes up with --

23 MR. KLOTZ: I don't believe --

24 THE COURT: There's a reason that report is not
25 ordinarily admitted because that's a fair reason. Now,

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1 they can come and talk about what they experienced at the
2 scene as a responding officer. Anyways. So you're
3 telling me that the complaint is not what your allegation
4 is?

5 MR. KLOTZ: That's right. The complaint was --

6 THE COURT: Did you ever amend the complaint?

7 MR. KLOTZ: I did. Mr. Lybrand had looked at that,
8 but I told my attorney that this would not be a valid
9 conclusion that the axle broke.

10 MR. LYBRAND: Your Honor, for the Court's
11 edification, may it please the Court?

12 THE COURT: Yes.

13 MR. LYBRAND: Here is the historical record. What
14 happened was Mr. Klotz's attorney at the time filed a
15 case in magistrate court here in Lexington County for
16 property damages only, and at some point it was getting
17 close to the time that the statute of limitations was
18 going to run and there was a pending suit in Magistrate's
19 Court and the attorney at that time then filed a suit in
20 Common Pleas to include not only the property damages but
21 the bodily injuries, that preserved both of his claims
22 and the Magistrate's Court case then was dismissed.

23 So the complaint, the only complaint that we've been
24 served with that I'm aware of that talks about, I'm
25 looking at the complaint, this is a complaint, Your

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1 Honor, filed by Mr. Hawk dated February 13, 2018 in the
2 Court of Common Pleas which bears docket number 2018
3 ending in 0527 and in that complaint in paragraph 4 of
4 that complaint it says that on February 22, 2015 the
5 defendant was traveling west on I-20 near Pond Branch
6 Road and the rear axle broke thereby causing a collision
7 with the plaintiff. So, that's the theory we've been
8 operating under because I'd be happy to see an amended
9 complaint if the records show he's amended the complaint
10 to allege a different theory.

11 THE COURT: I'm not aware of an amended complaint,
12 otherwise I would have printed it out and reviewed it
13 going through the case file as now so it's kind of a
14 complication because your theory of recovery is a little
15 different than what your complaint states.

16 MR. KLOTZ: That's correct. It is quite
17 different.

18 THE COURT: Well, okay. Did that come up in the
19 depositions of the parties?

20 MR. LYBRAND: The only deposition taken is that of
21 Mr. Klotz. Mr. VanLier has never been deposed.

22 THE COURT: Was Mr. Klotz questioned about what
23 happened at the scene?

24 MR. LYBRAND: Yes, sir.

25 THE COURT: And was it in line with the complaint?

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1 MR. LYBRAND: Well, I would have to go through what
2 he --

3 MR. KLOTZ: Well, I stated that there was no break
4 of the axle in my deposition.

5 THE COURT: Actually, I'm not as concerned about the
6 axle at the moment. I'm concerned on the one hand he was
7 rear-ended because of what's alleged in the complaint,
8 but you're saying that the plaintiff did the collision
9 and left the scene of the accident and the only reason,
10 inference that I heard was that the only reason he
11 stopped was because the wheel fell off.

12 MR. KLOTZ: That's correct.

13 THE COURT: Well, that's a bit different narrative
14 for the jury.

15 MR. KLOTZ: That came out with subsequent
16 analysis.

17 THE COURT: Analysis?

18 MR. KLOTZ: And what I actually saw.

19 THE COURT: Well, did you testify to that in your
20 deposition?

21 MR. KLOTZ: I believe I did. I have the deposition.

22 THE COURT: I would like to know. I think that's
23 worth knowing.

24 MR. KLOTZ: Let me take a look here. Okay. I'm
25 right at it I think. Okay. On page 66, line 5, the

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1 question was, when is the first time you saw or observed
2 or noticed or was aware of my client Mr. VanLier's
3 vehicle? When is the very first time you saw it? And I
4 answered, I never saw it until I looked down the road
5 that quarter mile and saw him with the tire. And he
6 said, so you never saw Mr. VanLier prior to your vehicle
7 being hit? I said, no. It was just, just a really large
8 jolt and then suddenly I was headed for the trees. I
9 really didn't know what was happening. And he says, for
10 example, do you know prior to him or his vehicle
11 colliding with yours whether he was in the right lane
12 behind you or whether he was in the left westbound lane
13 coming up beside you before the impact? And I answered,
14 he must have been in the left lane because of where he
15 struck. He struck me on the left side of the car. So
16 your first awareness of a problem or an accident is when
17 you felt the impact? And I said, that's right.

18 THE COURT: Okay. Anything else?

19 MR. KLOTZ: Well, it goes on to say that the impact
20 threw the car diagonally and eventually turned around 180
21 degrees and came to a stop. Where did it come to rest?
22 In the median there was about, oh, seven or eight feet
23 before the trees started and it was in that grassy area
24 on the median. So the only impact with your vehicle was
25 from Mr. VanLier's vehicle, no guardrail, no trees, no

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1 signs or anything like that? And I said, that's right.
2 And you say that after you came to rest, you then saw
3 Mr. VanLier's vehicle. Where was it when you saw it,
4 first saw it? And I continued, it was about a quarter
5 mile down the road. And the question, was it moving or
6 stopped? Stopped down the road.

7 THE COURT: Okay. Stop. Just so I'm clear, the two
8 vehicles collided while they were in motion.

9 MR. KLOTZ: That's right.

10 THE COURT: They were not at a stop and your car
11 spun while the defendant's car continued forward.

12 MR. KLOTZ: That's right. Actually my car spun
13 after the defendant's car continued forward because he
14 went down the side of my car. He took off my side view
15 mirror.

16 THE COURT: Okay.

17 MR. KLOTZ: He continued on and then after that I
18 was going off about 30 degrees towards the trees and the
19 median.

20 THE COURT: Okay. Well, the way you describe it and
21 I may have taken it the wrong way, I thought I heard that
22 there was a collision, a stop and that the defendant left
23 the collision site after that. It sounds to me that he
24 just proceeded, he may have proceeded forward a quarter
25 mile but he didn't --

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1 MR. KLOTZ: That's what I think happened.

2 THE COURT: Okay.

3 MR. KLOTZ: He just continued.

4 THE COURT: You described it as leaving the scene of
5 an accident. That's different than what you just
6 described.

7 MR. KLOTZ: Yeah. Once he hit me, that was the
8 accident and he left that.

9 THE COURT: Okay. Okay. All right. He proceeded a
10 little bit down the road.

11 MR. KLOTZ: And it would have been at a high rate of
12 speed for the short time that he had to go past my car.

13 THE COURT: Okay. I don't think you can testify
14 about how an axle broke or why an axle broke.

15 MR. KLOTZ: I wasn't going to testify about an axle
16 breaking at all. I was just going to say the wheel came
17 off which is what I saw.

18 THE COURT: The picture shows the wheel off, doesn't
19 it?

20 MR. LYBRAND: Yes.

21 THE COURT: Okay. So as far as testimony about disk
22 systems on a 2008 Dodge Ram --

23 MR. KLOTZ: I'm not going to talk about any of that.

24 THE COURT: Okay. So as far as what caused the
25 wheel to come off you don't have an opinion for the jury,

1 just that it came off?

2 MR. KLOTZ: Well, I have documentation that the 2008

3 --

4 THE COURT: No. We're getting off the track there.
5 We're talking about causation of what caused the wheel to
6 come off based upon your independent research, we're
7 getting back into expert testimony. I recognize you're
8 an engineer, but you're not an accident
9 reconstructionist. What sort of accident analysis do you
10 do at Savannah River?

11 MR. KLOTZ: We analyze accidents that occur on the
12 site and we analyze possible accidents that can occur.

13 THE COURT: Are we talking about human accidents?

14 MR. KLOTZ: We're talking about explosions, we're
15 talking about failure of valves and piping, the tie rods
16 that could fail.

17 THE COURT: These are all components that support
18 the nuclear facility?

19 MR. KLOTZ: All support the plant, support of the
20 plant. They process nuclear materials and act in the
21 nature of a chemical plant.

22 THE COURT: Sure. But you haven't done any analysis
23 on any employees of the Savannah River Site's automobile
24 accidents, have you?

25 MR. KLOTZ: No. That's strictly their affair. We

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1 do the accident analysis for mechanical accidents that
2 can occur with mechanical systems in the plant.

3 THE COURT: Sure. But it's germane to the Savannah
4 River Plant and the nuclear apparatus that is installed
5 there, not a Chevy, Dodge, Ford truck engine or brake
6 components, structural, axle components.

7 MR. KLOTZ: We don't do automotive accidents.

8 THE COURT: Okay. All right.

9 MR. KLOTZ: Other than, for example, we will
10 consider a runaway vehicle that would crash into a
11 nuclear component.

12 THE COURT: May it never happen. Well, certainly,
13 Mr. Klotz, you've got a lot of education and a lot of
14 engineering experience at Savannah River Plant and
15 Savannah River Nuclear Solutions as far as doing accident
16 analysis of those components that run those machines, but
17 you don't have any past experience in accident analysis
18 of a 2008 Dodge Ram or any other automotive analogous
19 investigation.

20 MR. KLOTZ: Well, we're also trained on other types
21 of accidents.

22 THE COURT: Yeah, but I'd like you to answer my
23 question. You don't have that experience, do you?

24 MR. KLOTZ: Well, I was just about to answer that.

25 THE COURT: Okay.

1 MR. KLOTZ: For example, we look at aircraft
2 accidents as training because an accident is an accident
3 and if there's a mechanical failure, it has bearing on
4 what we do. So we look at the aircraft that have failed,
5 in their guidance systems that have failed. We are
6 creative in the accidents we look at.

7 THE COURT: It would appear that you think Dodge
8 should have been a part of this case?

9 MR. KLOTZ: Dodge. Well, Mr. Lybrand, it would be
10 up to Mr. Lybrand to bring Dodge into it but --

11 THE COURT: Why? Well, okay.

12 MR. KLOTZ: -- we have the public record documents
13 showing that that model of truck is subject to the brakes
14 locking up and causing it to veer.

15 MR. LYBRAND: Your Honor, with all due respect to
16 Mr. Klotz, and I certainly concede he's a very well
17 educated person, I don't mean in any way to disparage or
18 criticize that, even if what he has said is accurate,
19 there has not been any reconstruction done by Mr. Klotz
20 or anybody on his behalf on this particular vehicle. Any
21 type of expert who wants to say why this particular
22 vehicle did what it did or what happened would need to go
23 examine the physical evidence of the truck, the tire, the
24 axle and that would be a critical part. None of that was
25 done here.

1 MR. KLOTZ: Actually, it wouldn't be necessary. All
2 you need is a photograph of the wheel, what it looks like
3 and that's all you have to need.

4 THE COURT: Okay. All right. What sort of
5 photographs do we have? Have y'all even discussed
6 photographs at all as far as evidence?

7 MR. LYBRAND: We've exchanged photographs, Your
8 Honor. Your Honor, and the reason I mention this, Mr.
9 Klotz has sent me voluminous, I think he has sent these
10 also to the court, we almost went to trial on this case
11 back in late summer or early fall and these exhibits that
12 he has submitted in email and/or filed with the court
13 which I alluded to generally in my email, they're
14 Internet articles, there's traffic collision manual, in
15 addition to all those price guides involving his
16 particular vehicle in question, the medical records on
17 heart conditions and what have you, I mean, he's just
18 said I want to put all this in and that's why I need to
19 know what is going to be, he's going to be allowed to
20 testify to since he's not gonna have a lawyer when I can
21 hear a question and determine whether or not an objection
22 is appropriate. I won't hear that until it comes out of
23 the plaintiff's mouth.

24 THE COURT: Okay. Well, I haven't seen any of those
25 exhibits.

1 MR. KLOTZ: Well, I've got three photographs here of
2 the wheel and they tell the whole story, the wheel.

3 THE COURT: I asked about photographs because
4 usually photographs at the scene usually, unless there's
5 some issue which you don't think that's an actual
6 photograph from the scene, photographic evidence of your
7 vehicle, the defendant's vehicle at the scene, generally
8 I don't think I have a problem with that. As far as
9 research articles, Internet articles, this is a courtroom
10 where we have evidence that comes in through qualified
11 witnesses. It's not a debate. We're not just gonna
12 argue points for the sake of arguing it. There's got to
13 be something that's, there's got to be a witness to put a
14 piece of evidence in unless y'all can agree to certain
15 exhibits that is.

16 But, Mr. Lybrand, I don't know what documents you're
17 referring to as far as Internet articles, but generally
18 just an Internet article from Yahoo about Dodge Ram not
19 coming into evidence.

20 MR. LYBRAND: Well, Your Honor, the only thing I
21 know about the exhibits is what I received in the email
22 Pdf's, maybe some actual mailings from Mr. Klotz. I
23 think Mona has seen some of the exhibits from prior
24 emails. I don't know. Mona may be able to tell you what
25 those are.

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1 THE COURT: Well, I can ask her too, but the bottom
2 line is this, no exhibit is going to be published to the
3 jury unless it's shown to the other party first, okay?
4 If Mr. Lybrand is going to try to get an exhibit into
5 evidence, he's gonna show it to you and then show it to
6 his client to authenticate whatever it is because you
7 only have one witness, the trooper. So, this is not a
8 situation where you can take out a sheet of paper and
9 start reading from it and showing it to the jury.

10 MR. KLOTZ: I understand that.

11 THE COURT: And I'm making a record, Mr. --

12 MR. KLOTZ: Mr. Lybrand has received all documents.

13 THE COURT: My concern is not what Mr. Lybrand has
14 received, it's what I see before it becomes admissible
15 evidence to a jury so the ultimate decision maker on the
16 admissibility of evidence will be mine, okay? So it's
17 important that anything that is to be presented to the
18 jury goes through my eyes first.

19 MR. KLOTZ: Well, that was what our understanding
20 was, that every exhibit would be presented to the Judge
21 and the admissibility would be decided at that point.

22 THE COURT: All right. I imagine it's a photograph
23 of the back of the plaintiff's car, I don't know if there
24 is one, but if there is --

25 MR. KLOTZ: That's fine. I have duplicates of --

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1 THE COURT: What I'm trying to --

2 MR. KLOTZ: -- exhibits.

3 THE COURT: Okay. Thank you. But what I'm trying
4 to say is these documents, assuming number 1, if he
5 doesn't have an objection, I'm fine with it. If he
6 objects to a piece of evidence, I will either sustain the
7 objection or overrule it. If I overrule the objection,
8 you can publish it and talk about it. If I sustain the
9 objection, move on to the next exhibit that you want to
10 move to. Does that make sense?

11 MR. KLOTZ: That makes perfectly good sense. That's
12 what I'm expected.

13 THE COURT: All right. We've been going on for a
14 while here so regarding any opinions of doctors, I don't
15 want any testimony from Mr. Klotz that talks about what
16 his doctor told him or how his doctor feels, okay, if we
17 don't have a witness to testify to the opinion or they
18 haven't been deposed prior to trial. There's no sworn
19 testimony in the record yet. We can't just bring it up
20 in a verbal assertion to the jury. Does that make sense?

21 MR. KLOTZ: And I have the doctor reports that are
22 official records.

23 THE COURT: Your medical records.

24 MR. KLOTZ: My medical records.

25 THE COURT: Right. Well, Mr. Lybrand, do you object

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1 to him putting his medical records in?

2 MR. LYBRAND: Yes, Your Honor.

3 THE COURT: What's the basis for your objection?

4 MR. LYBRAND: The basis of my objection is there's
5 been no authentication of those records, plus the records
6 contain subjective opinions, findings, et cetera, from a
7 doctor who is not going to testify and we've never been
8 told he would testify or his deposition would have been
9 taken and we've had no right or opportunity to cross
10 examine the doctor.

11 THE COURT: And those would be the same medical
12 records that would relate to the heart condition; is that
13 correct?

14 MR. KLOTZ: To the heart condition and to the
15 chiropractor and to just routine examinations I've had as
16 time went by.

17 THE COURT: Okay. And the chiropractor was not
18 deposed obviously.

19 MR. LYBRAND: No depositions have been taken, Your
20 Honor. My motion for the defense is if it's the Court's
21 ruling outside the presence of the jury that the
22 plaintiff is not allowed to give an opinion on the
23 causation of any subsequent heart treatment problems,
24 whatever, then none of the corresponding bills should he
25 be allowed to talk about. He shouldn't be allowed to

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1 mention anything about a heart condition if he can't, if
2 we know he can't relate that to the accident through
3 credible admissible testimony. It's prejudicial to the
4 defense to allow him without an expert witness to tell
5 that to the jury. He has to play by the same rules we do
6 so.

7 THE COURT: Okay. What about his other bills?

8 MR. LYBRAND: I would look at those individually,
9 but I don't think I have any objections to like an
10 emergency room bill for the day after the accident or
11 probably a chiropractic bill. I would object to any
12 chiropractic reports that give opinions and findings and
13 whatever because again, we can't cross examine it, but if
14 he's just talking about a bill from a provider that just
15 shows a date of treatment and a charge and a total I
16 probably don't have any objection to those.

17 THE COURT: Because the chiropractic treatment was
18 done shortly after the wreck itself.

19 MR. LYBRAND: That's what I recall, Your Honor.

20 THE COURT: Well, I'm just speaking in generalities.

21 MR. LYBRAND: Yeah. I'm assuming that one of his
22 exhibits is a chiropractic bill.

23 THE COURT: Well, it would help if you guys could
24 try to take at look at some of these exhibits. It's
25 gonna take more time as it is and it would help if we

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1 don't start from scratch every time a new record comes
2 up. Your record is clear on how your legal argument as
3 to the cardiology issue and the bills that follow, but to
4 the extent that y'all can look at bills from the ER and
5 make sure we don't need to do any redactions. The reason
6 I use the word redaction is, we can't let a medical
7 record in that says Blue Cross Blue Shield. You follow
8 me?

9 MR. LYBRAND: Yes, sir. What I would ask then,
10 although I've gotten a mountain of stuff from Mr. Klotz,
11 I would simply in light of what the Court, what we've
12 been talking about is Mr. Klotz to show me, you know, we
13 can stay in here and work through that, have him show me
14 what documents in terms of the medical bills he wants to
15 put into evidence and I'll take a look at them.

16 THE COURT: The only reason I'm saying he can do
17 that now is otherwise we're gonna get the jury in here
18 and we're gonna have a discussion about a record he wants
19 to put in or even if you want to put in your case and
20 there's gonna be a disagreement and I'm gonna have to
21 send them out so we can talk about it. During the trial,
22 what I'll try to do is as much as possible is to have
23 both of you come up and talk with me over here so the
24 jury can't hear us so we can try to work out - a lot of
25 times objections and disputes are, can be quickly decided

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1 at a bench conference on the side bar over here, but at
2 this time I don't believe the letter from the doctor is
3 admissible. I don't think the, I don't think it's
4 admissible for Mr. Klotz to talk about his cardiological
5 conditions as being connected to the accident itself
6 based upon a letter that's not admissible.

7 In the break I will check again. We're researching
8 as we're talking, but that's my understanding of the
9 proper way the rules of evidence apply here. As far as
10 the pictures, I suggest y'all look at the pictures too.
11 During your testimony, Mr. Klotz, I may, I want to
12 obviously give you as much free rein as possible to
13 testify about the accident and the injuries you sustained
14 at the accident scene, what you saw at the accident
15 scene, but to Mr. Lybrand's point, it is tough because
16 ordinarily objections arise based upon a question and
17 with this case it's tough to do if you're just testifying
18 from the witness stand. You may want to consider maybe
19 prefacing your testimony by, I may want to talk about
20 this. That way it sort of gives me a heads up of the way
21 things are going and Mr. Lybrand. Does that make sense?

22 MR. KLOTZ: Yeah. That's fine.

23 THE COURT: Okay. When you do an opening statement,
24 if you do an opening statement, it's essentially a
25 summary of what you think the evidence will show. You've

1 probably done this in your preparation for trial, looked
2 this stuff up.

3 MR. KLOTZ: Admitting the argument at that point is
4 what I understand.

5 THE COURT: Well, at the time of an opening
6 statement there's no evidence in so we can't talk about
7 what the evidence has shown because there's no evidence
8 yet. So essentially you can give an outline of what you
9 hope to be able to show. Mr. Lybrand will do the same.
10 He'll talk about who is client is and what he thinks the
11 evidence in the case will show, okay? There's really not
12 much more to it. Again, I'm not trying to tell you what
13 to do. That's my sort of synopsis of what a general
14 opening statement is. But as far as your opening
15 statement goes, stay away from the cardiologist's letter,
16 stay away from the matters that I am ruling that are not
17 admissible under the rules of evidence based on our
18 arguments here today. Is that clear?

19 MR. KLOTZ: Excepting so far as you're still
20 researching it.

21 THE COURT: Well, yes. And I can clarify that, but
22 assuming I don't change because I don't think I will, but
23 assuming I don't, you understand that I expect you not to
24 go into that area during your opening statement.

25 MR. KLOTZ: That would be fine. At some point I

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1 have to mention, I guess, the emergency room.

2 THE COURT: Of course. I think the emergency --
3 Well, you know, the date this happened and where
4 you went. You probably had some experiences from there,
5 but you can also testify to that from the witness stand
6 too. So I'm trying not to tell you exactly what to do,
7 but I do want to be careful to tell you what not to do.
8 And if we have to have a bench conference with
9 Mr. Lybrand, we can and if we need to discuss, ask the
10 jury to leave so we can make more record, we can do that.

11 Now, the jury is gonna be showing up here soon. If
12 you guys need to get some water, hopefully you'll have a
13 snack or something you can eat. You're also gonna need
14 to talk a little bit. We can just let the jury wait for
15 a little while so we get started on the right foot.

16 MR. KLOTZ: Well, initially I filed a motion
17 requesting review of evidence under Rule 16. Mr. Lybrand
18 declined to do that. He said he didn't need to do
19 that.

20 THE COURT: Well, I think we're reviewing the
21 evidence today. You wanted to meet with him?

22 MR. KLOTZ: Yeah. I wanted to meet with him under
23 Rule 16 and all of this cleared away before the trial,
24 but he declined to do that.

25 THE COURT: Well, we're having our pretrial

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1 conference now it appears. The jury is being kept on the
2 floor below us. I don't think you'll run into them in
3 the hall. If you do, just please don't speak to them,
4 okay? We've gone over a lot in the last hour and 10
5 minutes. Is there anything we totally left out that we
6 need to discuss?

7 MR. LYBRAND: No, Your Honor. I'm trying to get a -
8 it may be difficult to figure out how long we will go
9 this afternoon in terms of having the trooper come today
10 versus tomorrow morning.

11 THE COURT: My intent is to not to ram this through
12 in one day, that's for sure, so if it's easier for the
13 trooper to come tomorrow morning, we can do that, but I
14 would suspect we'll finish tomorrow.

15 MR. LYBRAND: Oh, yes, sir. That wouldn't be a
16 problem. Mr. VanLier can testify today.

17 THE COURT: Okay. So in theory you may could start
18 your case today with your client and then have the
19 trooper in the morning.

20 MR. LYBRAND: Yes, sir. That way we're not ramming
21 it through today.

22 THE COURT: Fair enough. All right. Let's take a
23 recess time here so you two can talk about exhibits.
24 Perfect world, the more you agree on and stipulate to
25 that it's evidentiary in nature and appropriate for

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1 admittance, that would be, helps everybody.

2 MR. LYBRAND: You know, I have all the exhibits
3 which are all photographs which I would propose to use
4 and will show Mr. Klotz. I just need for him to show me
5 the physical documents during the break now that he wants
6 to put in.

7 THE COURT: Okay. Thank you. We'll be at ease for
8 a little while.

9 (Short break.)

10 (Whereupon, Defendant's Exhibits #1 through #6
11 marked for identification.)

12 BAILIFF: All rise.

13 THE COURT: Please be seated. All right. We've
14 taken a short break after completing pretrial discussions
15 and motions. The jury is in theory waiting for us in the
16 jury room. The attorneys took an opportunity, excuse me,
17 Mr. Klotz and Mr. Lybrand took an opportunity to take a
18 look at some of the evidence to determine essentially
19 what can be agreed to as far as what came into evidence.
20 Mr. Lybrand, if you wouldn't mind, would you mind
21 updating me on some of those discussions.

22 MR. LYBRAND: Yes, Your Honor. We exchanged during
23 the break some exhibits as far as the defense which is
24 less complicated. I gave photographs of my client's
25 vehicle showing the damages. Mr. Klotz said those were

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1 fine. I presented them to our court reporter for
2 identification and these have been pre-marked defendant's
3 exhibits 1 through 6 so those are all taken care of, Your
4 Honor. We had some discussions about Mr. Klotz getting
5 me exhibits that he proposed to put into evidence. Some
6 of them I had no objections with and many of them I did.
7 I'm prepared to go on the record if I need to as to each
8 one.

9 THE COURT: Well, let's talk about the ones you
10 don't have any objection to after talking to Mr. Klotz.
11 Those would have been the photographs from the incident
12 scene; would that be accurate?

13 MR. KLOTZ: That's accurate. And the property
14 damages bill.

15 THE COURT: I'm sorry. I can't hear you, Mr. Klotz.

16 MR. KLOTZ: Damages, repairs for the car.

17 THE COURT: Okay. That was a property damage
18 document which showed the amount of approximately
19 \$7300.00; is that correct?

20 MR. KLOTZ: 7732.

21 THE COURT: Correct. All right. So property
22 damage. Okay. There were various documents in there
23 that dealt with the heart treatment, the heart records.

24 MR. KLOTZ: That's right. And I can table those
25 until you've done more research.

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1 THE COURT: Well --

2 MR. KLOTZ: And if the doctor calls back in, we can
3 admit him.

4 THE COURT: If we take a break during your case in
5 chief when you start testifying on your own behalf, if
6 there's some change, I still stand by my ruling that I
7 don't think it's a basis to be admitted into evidence at
8 this time based on the documents alone. Are you ready to
9 give an opening statement, Mr. Klotz?

10 MR. KLOTZ: Yes. But we don't have a jury yet.

11 THE COURT: Sure. I'm just asking if you're ready?

12 MR. KLOTZ: Yes. I'm ready.

13 THE COURT: Mr. Lybrand, are you ready to proceed?

14 MR. LYBRAND: Yes, sir, Your Honor. I'm just
15 texting the trooper who just let me know he'll be here at
16 three.

17 THE COURT: Okay. Of course. So I have to give
18 some remarks to the jury before we start opening
19 statements and I'll kind of lay out to them what the
20 normal progression of the trial is and that anything that
21 a party or an attorney says in the opening statement is
22 not, in fact, evidence, it's just your estimation or hope
23 of what the evidence will show. Once we're done, we can
24 go ahead and begin with your case in chief and I'll ask
25 you, Mr. Klotz, do you have any witnesses to call and you

1 can just let me know you're gonna testify on your own
2 behalf. We'll call you up to the witness stand, put you
3 under oath, and I would just ask that you, ordinarily
4 people introduce themselves or again, an attorney will
5 ask them to introduce themselves to the extent who you
6 are, where you live, basic background I think is
7 appropriate, but I trust you'll want to get to the date
8 of the accident, the damages incurred on that day, that
9 sort of thing. So if you can preface your testimony by
10 saying, now I'd like to tell you about this, that at
11 least gives Mr. Lybrand a chance, hypothetically if you
12 say, now I'd like to tell you about my last meeting with
13 my doctor, my cardiologist last week, that would be an
14 opportunity for Mr. Lybrand to may or may not object, but
15 that would at least give us a chance, a heads up and also
16 to avoid publishing things to the jury that I previously
17 said I don't want published to the jury. Do you
18 understand that?

19 MR. KLOTZ: I do.

20 THE COURT: Okay. Anything else? So I mean,
21 obviously, Mr. Klotz, in every trial I don't go through
22 all this with the attorneys. I'm just trying to make
23 sure you're apprised of the process as we go along. So
24 even though you are still a pro se, I'm still bound by
25 the rules of procedure and the rules evidence, okay? All

1 right. Let's bring them up.

2 (Whereupon, the jury entered the courtroom at 1:35
3 p.m.)

4 THE COURT: Okay. Madam Forelady, ladies and
5 gentlemen of the jury, welcome back. I hope you had a
6 nice lunch. We're about to begin the trial of the case
7 of William Klotz versus General VanLier. Before we begin
8 though, I'm gonna ask the Clerk of Court to swear each of
9 you in.

10 (Whereupon, the jury was duly sworn by the Clerk of
11 Court at 1:40 p.m.)

12 THE COURT: All right. Ladies and gentlemen, before
13 we begin the trial of this case, I'd like to tell you,
14 this trial will probably be different from what you might
15 expect. Many people do not have the chance to attend
16 actual court sessions as you're doing now. You may think
17 by watching television or movies or reading books that
18 trials are always full of high drama and intense action
19 and riveting circumstances. All of these things may be
20 true at times, but this trial is not for entertainment.

21 This courtroom is a place of honor dedicated to the
22 protection and preservation of citizens rights through
23 what we have called the greatest justice system ever
24 created. The parties appearing before you, the attorneys
25 appearing before you are advocates for the parties they

1 represent. First and foremost they're officers of the
2 Court and sworn to uphold the integrity and fairness of
3 the Court. Today also Mr. Klotz is appearing pro se.
4 He's representing himself which he has every right to do.
5 You should expect the parties in this case to be - you
6 should expect the attorneys to be competent, professional
7 and ethical in the representation of their client's
8 interest. Remember, you've just taken an oath to try
9 this case and reach a fair and impartial verdict so you
10 are also expected to be professional and reasonable and
11 ethical.

12 Now, the first thing that will occur in this case is
13 the plaintiff will give an opening statement. An opening
14 statement is not an argument. Those arguments will come
15 later in the trial. Both Mr. Klotz representing himself,
16 and Mr. Lybrand on behalf of the defendant, will give
17 opening statements. The purpose of the opening
18 statements is for each party to outline his or her claims
19 about the evidence which they intend to introduce to
20 support their claims. Now, again, whatever a party in an
21 opening statement or an attorney in an opening statement
22 say, whatever they say in opening statements is not
23 evidence in this case. After each side has completed
24 their opening statements, the plaintiff will have the
25 opportunity to present his case.

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1 Now, evidence may take many forms. It may be
2 testimony, documents, photographs, models or anything of
3 the like. You should pay close attention to all of the
4 evidence which is presented by each party. You, the
5 jury, are the sole finders of the facts in this case and
6 no one else will be permitted to weigh the evidence and
7 render a verdict based upon it. After all the evidence
8 has been presented, Mr. Klotz and Mr. Lybrand will make
9 their closing arguments. Unlike the opening statements,
10 the final remarks will be true arguments; that is each
11 side will emphasize certain portions of the evidence and
12 try to persuade you to agree with their version of the
13 facts. Keep in mind that opening statements as well as
14 closing arguments are not evidence in this case. Give
15 Mr. Klotz and Mr. Lybrand your complete and undivided
16 attention during opening statements and later in closing
17 arguments, but remember that what they say is not
18 evidence.

19 After the arguments are finished, I'll explain to
20 you the law which applies to this case. You will then
21 retire to the jury room and consider the facts and law
22 and once you've done so you'll return a verdict in favor
23 of one side or the other.

24 During the course of the trial the plaintiff has the
25 burden of proving his claims. The plaintiff must meet

1 this burden by proving his claims by the greater weight
2 or preponderance of the evidence. Now, what we mean by
3 the greater weight of the evidence is illustrated by
4 imagining a traditional set of scales. When the case
5 begins, the scales are even. After all of the evidence
6 has been presented, if the scales should remain evenly
7 balanced or if they should tip even slightly in favor of
8 the defendant, then the plaintiff will have failed to
9 meet his burden of proof and the verdict will be for the
10 defendant. If on the other hand, the scales should tip
11 even slightly in favor of the plaintiff, he will have met
12 his burden of proof and your verdict would be for the
13 plaintiff.

14 Now, as I mentioned earlier, although I'm the only
15 person who can tell you what the law is, you're the only
16 ones who can determine the facts. I do not have the
17 right to indicate how I may feel about the evidence
18 presented and throughout this trial my intention will be
19 to act impartially toward each party.

20 Now, from time to time the attorneys or a party
21 representing himself will object to some bit of evidence
22 which the other side is seeking to present. As in
23 sports, business or any other structured activity there
24 are certain rules that both sides must obey in presenting
25 evidence. These rules have a definite purpose. They

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1 ensure that the information you receive is the most
2 trustworthy and reliable evidence available.

3 An objection is a procedure used for an attorney to
4 call a possible violation of the rules to my attention as
5 the Judge of this court, and for this reason you should
6 not hold an attorney or a party's objection against his
7 or her client nor should you conclude from my ruling on
8 an objection that I favor one side or the other.

9 Finally, I ask you to pay close attention to all of
10 the evidence presented to you. It's you, the jury, who
11 will determine the facts of the case and as a result you
12 will have to evaluate the credibility which means the
13 believability of each witness who testifies in this
14 matter.

15 As I said earlier this morning, generally we try to
16 take breaks around 90 minutes. We may take breaks
17 sooner. There may be times when I need to discuss
18 something with the parties outside of your presence.
19 Please understand that's a normal procedure. I don't
20 want to keep you in here any longer than is necessary,
21 but there may be times when I have to talk with the
22 attorneys outside of your presence. Often times I'll try
23 to have a bench conference with them, bring them off to
24 the side. No one is trying to hide anything from you.
25 We're just trying to discuss something without having to

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1 go through the procedure of having you leave the
2 courtroom, go back down to the third floor and back up.

3 So if anyone needs a break, if something comes up
4 and you need to get out of the courtroom for whatever
5 reason, just get my attention, get someone's attention
6 and we'll address any need that arises during the trial.

7 What I would ask you to do now is just give the
8 parties here your complete and undivided attention as
9 they present their opening statements and thank you for
10 your service. All right. Mr. Klotz, you may make an
11 opening statement, sir.

12 MR. KLOTZ: Well, my full name is William Lee Klotz
13 and I live in Aiken, South Carolina, and my wife and I
14 have a second residence in Matthews, North Carolina. We
15 met in North Carolina in Winston Salem when I was working
16 there with the Department of Natural and Economic
17 Resources and then I went to Raleigh to study chemical
18 engineering and now I'm a professional engineer with a
19 specialty in chemical engineering and working up here at
20 the Savannah River Site in the area of accident analysis
21 of all things. I've got 20 years experience in accident
22 analysis and reviewing and preparation of accident
23 scenarios relative to the nuclear industry that can occur
24 from all sources there at the Savannah River Site. It
25 operates basically as a chemical plant when they used to

1 have nuclear reactors there, but they're no longer doing
2 that. It's not a bomb plant anymore. Although they may
3 begin making plutonium there again, but we're cleaning it
4 up for the most part. We're closing everything down and
5 that's what I work on, the safety analyses for that.

6 And I was driving basically from Matthews, North
7 Carolina in our 2002 Prius down here to begin work on a
8 Monday. I was driving down on a Sunday afternoon. I was
9 just by myself. My wife likes to stay in Matthews
10 sometimes. We both go to church up there. For the past
11 two years we've only gone virtual, virtual services and
12 Sunday school. So we're down here, the two of us. She
13 drove me over here, in fact. And I like electric cars.
14 If you watched the Super Bowl, my wife counted six
15 commercials for electric cars and I bought the 2002 when
16 it first came out. It was the first mass produced hybrid
17 in the United States.

18 I have also purchased a Volt 2012. Volt which is
19 all electric and my wife drove me here today in our 2016
20 Tesla and that was a great buy for us. We got free super
21 charging for the life of the car. And my plan is to keep
22 these cars in immaculate condition because they'll be
23 collectible, collectible cars in the future and that's
24 how I view the Prius. And I've got two claims here. One
25 is for the property damage to the Prius and I'll show

1 evidence for the cost of the damage and the
2 collectability of the car and why it's considered a
3 collectible car. And I'll show that to you later.

4 In the opening statement you're supposed to just
5 avoid any arguments that would be in your favor, just
6 wait and mention the evidence you're gonna produce. And
7 the bulk of the property claim is connected to
8 collectability because a car would be normally totaled if
9 it were higher than 75 percent of the actual value so
10 that's how that relates to collectability.

11 And then I have also a personal injury claim for
12 back, neck, shoulders, and I was actually out of work for
13 a while related to that, but I was compensated by the
14 state's disability insurance so I'm not going to mention
15 any of that. The main thing I guess is I have some
16 infirmity still, residual from the collision. Still have
17 a back injury. I've had two back injuries with rear-end
18 collisions. This was a rear-end collision. 30 years ago
19 I had two back injuries so after that I had disk problems
20 and my back is prone, prone for that reason to injury
21 from rear-end collisions and that doesn't make liability
22 for that any less because I'm prone to it, but I do have
23 that.

24 So, I think what I would like to do is let the other
25 side say a little bit about what happened with them.

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1 What happened with me was I was driving down I-20 and
2 there was suddenly a big jolt to my Prius. I didn't hear
3 any warning beeps or anything. There was a big jolt and
4 suddenly I found myself going about 30 degrees towards
5 the median strip there. It was between miles 42 and 44
6 there on I-20. That's down before all the construction
7 starts. There was a big tree lined median strip there.
8 I was really worried about hitting a tree there so I
9 threw on the brakes and it turned me around 180 degrees,
10 180 degrees just from throwing on the brakes.

11 And Mr. VanLier, the other driver, I looked down the
12 road and he had gone on. He had slid past my Prius and
13 taken out my side view mirror, but he had gone on. I
14 looked down the road and he was in the fast lane next to
15 the median strip which still had trees and he had his
16 wheel in the median strip, so I saw him get out and
17 pick up his wheel and put it in the back of his pickup
18 and then I guess he called a tow truck because later I
19 saw the tow truck and I kind of just stayed there by the
20 side of the road and someone had stopped and stopped the
21 traffic because I could have been hit by the oncoming
22 traffic in the fast lane, and I was driving along the
23 normal speed in the slow lane.

24 And it took me a while to get home. I really don't
25 remember exactly how I got home, but my wife was there at

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1 home. I didn't go to an emergency room. That was the
2 thing. I just waited until the next day to go get
3 checked out. I've got medical details on the emergency
4 room there. So I did survive it and that was the good
5 thing, but it's had lasting effects for me even today.
6 So I'll be discussing all of that in testimony later, but
7 I just wanted to make an introduction here and my opening
8 statement.

9 I'm actually a scientist and an engineer. I've been
10 a scientist for a long time. I worked ten years in
11 chemical engineering research before doing the nuclear
12 work and I was kind of well regarded in what I did. I
13 have a master's degree in chemical engineering and a
14 master's degree in chemistry and I have what I would call
15 a fairly high aptitude for that. I took I guess what
16 they call the GRE, the graduate records exam to go
17 through graduate school and my scores were high enough.
18 That's kind of like the LCAST that attorneys take to go
19 to law school except it's more, more of a technical side
20 to it. They put chemical engineering in there. But I
21 took that exam and on the basis of that I joined some
22 high IQ societies. I joined Mensa. Mensa, which has a
23 branch out here in the Lexington area close to Lake
24 Murray. That's usually the top two percent in your
25 scores and I also joined a Triple Nine Society. Triple

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1 Nine means you're in the top tenth of a percent of your
2 aptitude. That's where they get the Triple Nine, one out
3 of a thousand, take away one from a thousand, you get
4 three nines. It's not a George Sink commercial.

5 So, that's kind of my standpoint. That means I've
6 got good judgment as to what constitutes supportive
7 evidence. I think I have good supportive evidence,
8 you want to do, because the evidence in a civil case it's
9 the preponderance of the evidence. In other words, the
10 weight. When you judge weight, you just don't only just
11 look at the number of exhibits, you want to see how it
12 all fits together, you look at the pattern. For example,
13 grand masters who play chess, they don't do calculations
14 every time. What they do is they look at the pattern of
15 the pieces on the board and they memorize about a
16 thousand different patterns for chess pieces and that's
17 how a grand master gets to be really good.

18 Say you're going to solve a Rubik's Cube. There's
19 like 43 times 10 to the 18th possible combinations of all
20 those colored squares. So nobody solves it by looking at
21 all the squares. There are algorithms you use. You look
22 at the pattern on the face of the cube and that tells you
23 what algorithm to use and the record for solving a three
24 by three by three Rubik's Cube is 7 seconds. That's done
25 by a guy who knows maybe three or 400 algorithms that

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1 he's memorized to go with the different patterns of IQ.
2 So that's what you should do is look at the pattern of
3 the evidence. Does everything fit together.

4 So that concludes my opening remarks. Later I'll
5 actually testify. Thank you very much.

6 THE COURT: Mr. Lybrand.

7 MR. LYBRAND: May it please the Court, Your Honor.

8 THE COURT: Yes, sir.

9 MR. LYBRAND: Good afternoon, ladies and gentlemen
10 of the jury. My name Jim Lybrand. I practice law in
11 Lexington and Richland County. I represent General Joe
12 VanLier who is seated with me at counsel table. I'm not
13 gonna ask you to raise your hands and tell me where you
14 prefer to be today than where you are because we
15 understand you're not here of your own free will or your
16 own choice and we also understand you all have families,
17 you have jobs, you have obligations that I'm sure you
18 would rather be pursuing than sitting here in the
19 courtroom for a couple of days, but I want to thank you
20 on behalf of my client for showing up for jury duty
21 because although the jury system is not always a perfect
22 system and sometimes we get imperfect results, I would
23 submit to you that it is the best system devised by man
24 in resolving disputes between individuals who otherwise
25 cannot resolve disputes between themselves.

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1 Now, General Joe VanLier lives in Lawrenceville,
2 Georgia. He drives and is employed as a truck driver.
3 He's employed by a recycling company. And we're here
4 today about an accident that happened on Interstate 20 on
5 February 22, 2015, now almost seven years ago.

6 Now, there are reasons why we're now just getting
7 the case to court. It doesn't have any relevance or
8 anything to do with things that you need to consider, but
9 the case has been going on a long period of time. This
10 is a simple case I would submit to you.

11 As Judge McLeod indicated to you, what I tell you on
12 behalf of my client is not evidence and you should not
13 consider it as evidence. What Mr. Klotz tells you on his
14 behalf is not evidence and you shouldn't consider it as
15 evidence. What we try to do, what I try to do as
16 Mr. VanLier's attorney is to kind of give you an
17 introduction to the case, tell you what it's about and
18 what we think the evidence that you will eventually hear
19 will show. And understand that under our system of civil
20 law the burden of proof in this case is on the plaintiff,
21 Mr. Klotz. He has to prove by a preponderance or the
22 greater weight of the evidence what he claims he can
23 prove to your satisfaction. So understand we don't have
24 the burden of proof. The burden of proving or convincing
25 the 12 of you of the strengths or merits of his case rest

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1 with him.

2 Now, I've tried some cases over the years with
3 opposing parties who don't have lawyers, and as Judge
4 McLeod told you, that's every person's right to bring
5 their case to court without a lawyer. That's a right
6 that everyone has if they choose that route to go. But
7 the only reason I say that is that once we get to court
8 and even before we get to court, we all have to play by
9 the same set of rules whether you have an attorney
10 representing you or whether you're proceeding as the
11 Judge indicated pro se which means without an attorney.
12 So the same rules that apply to us apply to Mr. Klotz.
13 And sometimes when I have cases involving litigants on
14 the other side who do not have an attorney, sometimes it
15 makes my job to object to certain things, testimony,
16 evidence, sometimes I have to do that more frequently
17 because the opposing party is not represented by an
18 attorney. So I want you to understand if you hear
19 objections from me, I'm attempting to do that based upon
20 my obligation to represent my client.

21 Now, why are we here? Back on February 22, 2015
22 which I believe you will hear was a Sunday afternoon, Mr.
23 Klotz was driving his Toyota Prius down I-20 heading to
24 Aiken. At the same time my client Mr. VanLier was
25 driving his pickup truck and they were going in the same

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1 direction. Mr. Klotz was in the far right lane next to
2 the shoulder of the road. My client was in the left lane
3 right beside him and as my client was beginning to pass
4 Mr. Klotz's vehicle his vehicle suddenly and unexpectedly
5 and certainly unknown to him experienced a sudden
6 mechanical failure. He felt his truck start losing
7 control. His axle, rear axle on his truck broke, his
8 tire came off and after hitting Mr. Klotz's vehicle kind
9 of side swiping it, it wasn't a rear-end collision, it
10 was more of a side swipe, Mr. VanLier's truck went on a
11 short distance down the road where he couldn't drive it
12 any longer.

13 After the accident, my client called 911. A
14 patrolman, Trooper Antley showed up to investigate the
15 accident. We anticipate that he will be here this
16 afternoon and will tell you about his investigation into
17 the facts of the accident. And my client's vehicle was
18 not driveable after the accident and it was towed back to
19 where he had purchased the vehicle near Lawrenceville,
20 Georgia. My client was not injured in the accident.

21 So, the issues in the case as framed by the
22 plaintiff are this; the plaintiff claims that my client
23 was negligent. That means that he was careless in some
24 way and that his carelessness caused this accident to
25 occur. Our position is, however, that this was an

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1 accident that was due to a sudden mechanical failure that
2 my client had no reason to know about or expect or
3 experience, and for that reason the law doesn't hold a
4 person who experiences a sudden and unexpected mechanical
5 failure to necessarily be negligent or responsible.

6 Fortunately my client was not injured and he went on back
7 to Lawrenceville, Georgia where he continues to live now.

8 So I think that's the facts of the case that you're
9 gonna hear. Keep an open mind. Give both sides your
10 fair and undivided attention and don't begin to decide
11 the case until you've heard all of the evidence and just
12 remember the burden of proving and the burden of proof is
13 on the plaintiff and the burden of proof means to bring
14 evidence to court whether they're in the form of
15 documentary evidence or other witnesses to testify, the
16 burden of proof is on the plaintiff to meet that burden.

17 We'll talk about that more at the end but right now
18 I want to thank you very much for your agreeing to be
19 here and we'll try not to hold you here any longer than
20 we feel like is absolutely necessary. Thank you very
21 much for your time.

22 THE COURT: Mr. Klotz, which witness would you like
23 to call?

24 MR. KLOTZ: Well, I'm the sole witness.

25 THE COURT: Okay. Feel free to come on up. Is

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 everybody on the jury okay? Does anybody need a break
2 this minute? Okay. Thank you. Mr. Klotz, the Clerk of
3 Court needs to put you under oath and I need you to come
4 to the witness stand.

5 Thereupon,

6 WILLIAM LEE KLOTZ
7 after having been first duly sworn, testified as follows,

8 THE COURT: Mr. Klotz, if I could just speak with
9 you and Mr. Lybrand very briefly over here.

10 (Side bar off the record.)

11 DIRECT TESTIMONY

12 BY MR. KLOTZ:

13 A. Okay. I think we can go to the scene of the
14 accident. I have some photographs there. This is a
15 photograph of the Prius after it had spun across the fast lane
16 and gone into the grassy median strip and as you can see there
17 are a lot of trees here in the back part of the median strip
18 that went all the way down for a mile about and you can see
19 that the cars are moving along here at that point. Initially
20 all the traffic had been stopped. If you look way in the
21 back, a lady had pulled over to the side and she had stopped
22 before she pulled over to the side to stop the traffic in that
23 fast lane so that no one ran into me. And I've got this
24 marked as exhibit H. Just give this to the bailiff?

25 THE COURT: This is one that's --

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 MR. KLOTZ: Agreed on.

2 THE COURT: So you're asking to put this into
3 evidence?

4 MR. KLOTZ: Yeah. Defense has authenticated that.

5 THE COURT: Well --

6 MR. LYBRAND: We have no objection, Your Honor. I
7 think our court reporter will assign it a different
8 number.

9 THE COURT: Okay. So Mr. Court Reporter, this will
10 be Plaintiff's Exhibit 1. So Plaintiff's Exhibit 1 has
11 been admitted into evidence.

12 MR. KLOTZ: Well, yeah. This is, this is --

13 THE COURT: We're gonna put a plaintiff's sticker on
14 it.

15 MR. KLOTZ: Yeah, okay.

16 (Whereupon, Plaintiff's Exhibit #1 admitted.)

17 BY MR. KLOTZ:

18 A. Here's a second photograph showing the tire tracks
19 and I think the Prius, once I hit the grassy median, that's
20 when it spun around a 180 degrees. And again here are the
21 cars. They're moving along here.

22 MR. KLOTZ: This would be Plaintiff's Exhibit 2.

23 MR. LYBRAND: No objection, Your Honor.

24 THE COURT: All right. So Plaintiff's Exhibit 2
25 will be admitted into evidence. Ladies and gentlemen,

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 when you hear that it's been admitted into evidence, that
2 means you're seeing it for a moment right now, but you
3 will be able in theory to see it later, okay?

4 (Whereupon, Plaintiff's Exhibit #2 admitted.)

5 BY MR. KLOTZ:

6 A. Okay. This is the Prius from the rear. You can see
7 the tire marks in the median strip and the defendant had run
8 here just to the corner of the pass - of the driver's side
9 taillight and it pushed in the rear of the Prius and locked
10 the wheel so that I lost control of the Prius. I couldn't
11 steer very well and that's what put me into the skid going 30
12 degrees towards the median strip and here you can see that
13 I've turned around. There's the tire tracks and you can see
14 I've turned around 180 degrees so I'm looking east on I-20.

15 MR. KLOTZ: And this would be Plaintiff's Exhibit 3.

16 MR. LYBRAND: No objection, Your Honor.

17 THE COURT: All right. Plaintiff's Exhibit 3 will
18 be admitted into evidence.

19 (Whereupon, Plaintiff's Exhibit #3 admitted.)

20 BY MR. KLOTZ:

21 A. Okay. Here's a close-up of the wheel area where
22 it's been damaged so that it's locked into the rubber of the
23 wheel locking it and in each of these exhibits I've put the
24 time that I took it and the latitude and longitude of the
25 picture when it was taken. That's because I took it with an

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 iPhone. You can go to your iPhone picture and look at the
2 image file and then you go to properties and it will show you
3 the time, it will show you the latitude and longitude, it will
4 show you a zoom if you're zooming in on something so you get a
5 lot of information from your phone file.

6 MR. KLOTZ: So this would be Plaintiff's Exhibit
7 number 4.

8 MR. LYBRAND: No objection, Your Honor.

9 THE COURT: All right. Plaintiff's Exhibit 4 is
10 admitted into evidence.

11 (Whereupon, Plaintiff's Exhibit #4 admitted.)

12 BY MR. KLOTZ:

13 A. Okay. Now, the defense has said that the plaintiff
14 kind of sideswiped the car and that's correct. He continued
15 on after striking my vehicle. Before I had even gotten into
16 the skid, he went down the full length of my Prius and took
17 off the side view mirror and then he continued on and then I
18 believe he continued on down the road as I can show you from
19 this latitude and longitude statements. His wheel came off.
20 He went down the road and I looked down the road, probably
21 used the zoom on my camera, and he went down I-20 and he was
22 getting out of his truck and his wheel was off in the fast
23 side in the median strip next to the fast lane and he got out
24 and he picked up the wheel with two hands and he carried it
25 over and put the wheel down into his truck so really it was

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 not an axle break. That's not correct.

2 MR. LYBRAND: Objection, Your Honor.

3 THE COURT: Sustained. Why don't y'all approach for
4 a minute.

5 (Side bar off the record.)

6 MR. LYBRAND: Your Honor, we would move to strike
7 that last response in connection with our objection.

8 THE COURT: So noted. The testimony regarding the
9 axle will be stricken.

10 BY MR. KLOTZ:

11 A. Okay. Well, I have this photograph that I obtained
12 from Mr. Lybrand of the defendant's truck taken to the Georgia
13 repair shop and it has his wheel in the rear of the truck.

14 MR. KLOTZ: Plaintiff's Exhibit number 5.

15 THE COURT: Plaintiff's Exhibit 5 will be admitted
16 into evidence without objection.

17 (Whereupon, Plaintiff's Exhibit #5 admitted.)

18 BY MR. KLOTZ:

19 A. This is another photo that I have of the defendant's
20 truck wheel, the rear wheel. You can see it's pretty much
21 demolished there.

22 MR. KLOTZ: And this will be Plaintiff's Exhibit 6.

23 BY MR. KLOTZ:

24 A. And here is a close-up of that wheel.

25 MR. KLOTZ: Defendant's Exhibit 7.

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 THE COURT: You're the plaintiff.

2 MR. KLOTZ: Plaintiff's. I'm sorry.

3 THE COURT: Plaintiff's Exhibit 6 and 7 are admitted
4 into evidence without objection.

5 (Whereupon, Plaintiff's Exhibit #6 and #7 admitted.)

6 BY MR. KLOTZ:

7 A. Here is a photo of the Prius with the side view
8 mirror, yeah, side view mirror taken off. That's where the
9 defendant's truck hit along the side, the driver's side of the
10 Prius. He was going pretty fast. He was going pretty fast
11 past there and he went on down the road, but he never collided
12 with the front of the Prius even though the Prius at that
13 point was starting to pull at 30 degrees towards me and he
14 never collided with the front of the Prius.

15 MR. KLOTZ: I believe that is Plaintiff's Exhibit 8.

16 THE COURT: Plaintiff's Exhibit 8 will be admitted
17 into evidence without objection.

18 (Whereupon, Plaintiff's Exhibit #8 admitted.)

19 BY MR. KLOTZ:

20 A. And this is the defendant's truck wheel as it was in
21 the back of his truck and this is where the axle would have
22 connected to this wheel.

23 MR. KLOTZ: I believe this is Plaintiff's Exhibit 9.

24 THE COURT: Plaintiff's Exhibit 9 is admitted into
25 evidence without objection.

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 (Whereupon, Plaintiff's Exhibit #9 admitted.)

2 BY MR. KLOTZ:

3 A. Okay. Now, later when the trooper had arrived,
4 plaintiff was proceeding down the highway going east,
5 proceeding east going down the Highway 20 and the trooper went
6 over, I guess he'll testify later, and the truck is here on
7 the tow truck and this is a zoomed picture. This was a zoom
8 of a factor of five. It's magnified five times and it's a
9 little fuzzier because when you zoom a picture, it doesn't
10 optically zoom it. It crops the picture, then it expands it
11 to fill the frame so you lose the pixels, you lose the pixels
12 and the picture gets a little fuzzy.

13 MR. KLOTZ: So this would be Plaintiff's Exhibit 10.

14 THE COURT: Plaintiff's Exhibit 10 admitted into
15 evidence without objection.

16 (Whereupon, Plaintiff's Exhibit #10 admitted.)

17 BY MR. KLOTZ:

18 A. I did a photo analysis on that picture. I did an
19 iPhone app called EasyMeasure and what you do is you put your
20 height when you take the picture. You put that height as a
21 reference point so it uses the principle of triangulation. It
22 uses my height as one edge of the triangle and then it uses an
23 estimated height for the trooper as another triangle, and then
24 it calculates the distance from that triangular distance, that
25 triangular measurement and here it says the distance from me

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 to this truck is 250 feet, but because that was taken with a
2 five to one zoom the actual distance is 1250 feet. That's
3 almost an eighth of a mile distance. So he was, the tow truck
4 at that point had come up I-20 going east and it was about
5 1250 feet distance there.

6 MR. KLOTZ: This would be Plaintiff's Exhibit 11.

7 THE COURT: Without objection Plaintiff's Exhibit 11
8 is admitted into evidence.

9 (Whereupon, Plaintiff's Exhibit #11 admitted.)

10 BY MR. KLOTZ:

11 A. Okay. This is a picture of where the defendant's
12 truck was when I saw his wheel and when I saw an overpass in
13 the background. This overpass is numbered S-32-1205. Now,
14 this picture was taken at a much later time because I didn't,
15 I neglected to take a picture when the defendant was there
16 with his wheel so I got in the car with my wife and we drove
17 down I-20 until the overpass looked like I saw it. And I
18 measured, I took the picture, I got the latitude and longitude
19 from this picture for this overpass for the car, latitude and
20 longitude for the position of the car at this point and I
21 calculated using a formula for spherical distance because it's
22 not a straight line distance like a flat surface. It's a
23 spherical distance on the surface of the earth, and that
24 distance came out to like 2750 feet, so that was about a half
25 mile distance that the defendant went after the collision is

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1 what I'm saying. And the software I used was the same
2 software the National Hurricane Watch organization uses. It
3 was privately developed, but I had to use the original
4 software because the National Hurricane software rounds
5 everything off to the nearest mile, but the original software
6 will give it to you in feet so this was 2700 feet that was
7 calculated for latitude and longitude.

8 MR. KLOTZ: This would be Plaintiff's Exhibit 12.

9 THE COURT: Plaintiff's Exhibit 12 is admitted into
10 evidence without objection.

11 (Whereupon, Plaintiff's Exhibit #12 admitted.)

12 BY MR. KLOTZ:

13 A. Now, there may be some question about these because
14 I'm gonna get into -- Well, maybe not for this one. This one
15 is okay. My total repair costs for the Prius was \$7732.00,
16 and that was done with Kelly Body, Kelly Paint and Body of
17 Aiken, and I gave them instructions to use original parts as
18 possible and Mr. Kelly thanked me after doing the work. He
19 said, thank you for doing --

20 MR. LYBRAND: Objection, Your Honor. Hearsay.

21 THE COURT: Sustained and just for the record, Mr.
22 Klotz, please don't testify to what other people told
23 you.

24 MR. KLOTZ: That's correct. I remember that.

25 BY MR. KLOTZ:

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1 A. But it says here customer total 7307. Customer paid
2 7732, because he had given me a credit in the estimate and I
3 paid more.

4 MR. KLOTZ: So this would be Plaintiff's Exhibit 13.

5 THE COURT: Mr. Klotz, Mr. Lybrand, real quick.

6 (Side bar off the record.)

7 THE COURT: Plaintiff's Exhibit 13, the property
8 damage, that will be the document that you're asserting
9 is the amount of money that it cost to fix the vehicle;
10 is that correct?

11 MR. KLOTZ: That's right. That's what I wrote the
12 check for.

13 (Whereupon, Plaintiff's Exhibit #13 admitted.)

14 THE COURT: All right. Thank you. Thank you.
15 Okay. We've been going about an hour and 20 minutes.
16 I'm at a point where I would actually like to take a
17 short break, I'll ask you to go down to your jury room,
18 refresh yourselves. I would like to have you back up
19 here in 10 to 15 minutes so as soon as everyone is ready
20 to come back up, if you would communicate that to the
21 bailiff, I'd appreciate it, all right? Please don't
22 discuss the case while you're out. I'll see you back
23 shortly. Thank you.

24 (Whereupon, the jury entered the jury room at 2:30
25 p.m.)

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 THE COURT: Okay. We'll take a short break here,
2 but I believe just for the benefit of, you okay with him
3 just sitting here?

4 MR. LYBRAND: Yes, sir.

5 THE COURT: Okay. You don't have to go back to
6 counsel table unless you want to.

7 MR. KLOTZ: I was going to go back and just leaf
8 through my exhibits.

9 THE COURT: Okay. That's fine. Whatever suits you.
10 All right. I think some of the next exhibits you were
11 going to attempt to put in were gonna be there price
12 guide; is that correct?

13 MR. KLOTZ: Price guides. That's right.

14 THE COURT: That has to do with your assertion about
15 the classical nature of the car?

16 MR. KLOTZ: That's correct.

17 THE COURT: Didn't the property damage restore it
18 to, didn't it fix it?

19 MR. KLOTZ: Yes. It did.

20 THE COURT: So...

21 MR. KLOTZ: It's immaculate.

22 THE COURT: Okay. It's in as good as shape as it
23 was when it was damaged?

24 MR. KLOTZ: Yes. Just as good.

25 THE COURT: Okay. You had an objection I believe.

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1 MR. LYBRAND: Mr. Klotz has just indicated that he
2 paid that much to repair the vehicle and then he put it
3 back in its pre-accident state so under the law that
4 would be, if the jury were to find damages, that would be
5 the measure of damages to put him back as far as his
6 property is concerned in the same condition he was before
7 the accident. That's now been established by him and the
8 repair bill.

9 MR. KLOTZ: That's correct. That's all I would ask
10 for.

11 THE COURT: Right. Okay. But the issue of the
12 classic nature price guide kind of adds confusion I think
13 to the jury because on one hand the car is in immaculate
14 shape as you just said, but we're gonna talk about,
15 you want to talk about a classical price guide. I mean,
16 the car is fixed and you're seeking to be compensated for
17 the amount you spent on the car, I think you, you don't,
18 again, I'm trying not to tell you what to do, but I think
19 you have --

20 MR. KLOTZ: The thing is --

21 THE COURT: -- Hit your property damage mark.

22 MR. KLOTZ: Well, I had additional damage though.
23 What the property guide does is establishes the value of
24 the car as a collectible before the accident at 13,500,
25 so if that's established, then the car is not totaled.

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 If it was totaled, that would reduce the value that I
2 have in the car as a collectible 75 percent, 7700 is less
3 than 75 percent of 13,500 so if they accept the 13,500 as
4 the actual value, then that's over the 75 percent and I'm
5 not damaged by totally.

6 THE COURT: I'm just - I'm - I'm missing something
7 here. What you're talking about I gather is some sort of
8 damage in excess of property damage, the property damage
9 of the vehicle, sort of an intangible type damage.

10 MR. KLOTZ: It's kind of an intangible damage.
11 That's right.

12 THE COURT: Well --

13 MR. KLOTZ: In other words, I wouldn't be able to
14 sell it for as much as I would have if it were recognized
15 as a collector car.

16 THE COURT: It says what?

17 MR. KLOTZ: Well, that's in the collector guide.

18 THE COURT: Yeah, but we're getting into, again, I
19 think we're getting into, it's almost an appraisal, an
20 appraised value, right?

21 MR. KLOTZ: Uhm, it would lower the appraised value.
22 That's right.

23 THE COURT: Okay. Mr. Lybrand, I'm doing a lot of
24 talking up here. Is there anything that I've missed or
25 --

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 MR. LYBRAND: No, sir.

2 THE COURT: -- you can clarify for me or Mr. Klotz?

3 MR. LYBRAND: No, sir. I think that the evidence is
4 clear. The vehicle, the vehicle either has to be
5 considered repairable which apparently Mr. Klotz felt
6 that it was because he had it repaired and that would
7 establish the damages. If the vehicle was worth more
8 than the repair bills, then the car shouldn't have been
9 repaired. It should have been totaled. You don't get
10 both. You get the cost of repairs or you get the fair
11 market value if it's a total loss and --

12 THE COURT: Maybe esthetic is the word I was looking
13 for earlier. The value that exists because it's a 2002
14 hybrid.

15 MR. LYBRAND: Well, I mean, maybe there's opinions
16 to that, but I think those kind of opinions have to be
17 supported by expert testimony, not by price guides from
18 the Internet and things of that nature.

19 THE COURT: Or even a book which he has. Well, I
20 think he addressed the property damage. I just don't see
21 allowing for a car that's in pristine shape and has been
22 repaired to the status it was in before the wreck --

23 MR. KLOTZ: Well, as long as I don't have to
24 surrender the car for 7700.

25 THE COURT: Well, only you can say that. Why would

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 you have to surrender the car?

2 MR. KLOTZ: Well, if they paid the 7700, they might
3 demand the car title.

4 THE COURT: Who has the title? You have the title.

5 MR. KLOTZ: We've got the title so that would be
6 okay then.

7 THE COURT: I'm confused. You have the title.

8 MR. LYBRAND: Your Honor, I think the deal is that
9 if a vehicle is considered to be a total loss, that an
10 insurer will pay that --

11 MR. KLOTZ: But will want title.

12 MR. LYBRAND: -- but will want the title to sell the
13 vehicle at salvage and I think that what occurred here is
14 that when there were negotiations pre-suit about the
15 property damages and the reason they were paid by Mr.
16 Klotz rather than by the insurance company is he, they
17 felt like, the insurer felt like it was a total loss, he
18 felt like it wasn't so he elected to get it repaired. If
19 they had paid what they had offered to pay, then they
20 would have asked for the salvage to sell for the salvage.
21 He wanted to retain the vehicle which is certainly his
22 right but, you know --

23 THE COURT: Regardless of the outcome today the
24 insurance company is not going to seek out the vehicle,
25 are they?

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1 MR. LYBRAND: I wouldn't think so, Your Honor, but I
2 have no control over that.

3 THE COURT: Well, I mean, he's fixed the vehicle.
4 They never paid the property damage claim.

5 MR. LYBRAND: Yeah. And if he gets a verdict, then
6 they would pay for the property damage portion of it.

7 THE COURT: If he got a verdict.

8 MR. LYBRAND: To my knowledge that would be the end
9 of it.

10 THE COURT: They would pay for the verdict.

11 MR. KLOTZ: Not for the vehicle. That sounds
12 reasonable.

13 THE COURT: I'm not trying to say that I'm -- This
14 just seems like an odd circumstance. I mean, you elected
15 not to have the company pay your property damage claim
16 and you did it yourself, you're seeking property damage
17 now, but I can't imagine, I don't even know who the
18 carrier is, it doesn't matter, but I can't imagine X
19 insurance company trying to take the car after the trial,
20 can you?

21 MR. LYBRAND: No, sir. I mean, the trial and the
22 verdict sets the legal positions of each party. That's
23 how it is.

24 THE COURT: Yeah. I think it's, if there's a
25 verdict, it will encompass, you know, what it encompasses

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1 which may be property damage, it may be property damage
2 plus something else. I don't think the jury has to set
3 it out necessarily. It's all actual damage. Well, we're
4 not there yet, but anyways. I apologize for the
5 confusion. I just feel like it's a property damage
6 matter.

7 MR. LYBRAND: No. I assume and my theory of the
8 case is because the vehicle was repaired --

9 THE COURT: It's not totaled.

10 MR. LYBRAND: -- it's not totaled and he's been
11 compensated for it and if he now claims that the vehicle
12 was worth more, he's got to prove it by competent
13 evidence which are expert witnesses, not Internet price
14 guides or things of that nature.

15 THE COURT: Well, based on your experience the
16 bottom line is they don't take a car unless it's been
17 totaled and it hasn't been totaled here because ---

18 MR. LYBRAND: Right. Right. They paid, they pay,
19 if he gets a verdict, they pay, the verdict would include
20 presumably the damages, property damages. That's what
21 they would pay.

22 THE COURT: Yeah. Okay. I haven't had this
23 specific issue arise before, but I'm not inclined to
24 allow additional testimony on intangible esthetic value
25 of the vehicle when it's restored to its condition before

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1 the wreck occurred.

2 MR. KLOTZ: Yeah. I'm not claiming additional
3 value.

4 THE COURT: Okay. I think we can move on from
5 property damage frankly.

6 MR. LYBRAND: Yes.

7 MR. KLOTZ: Right. That would be the case.

8 THE COURT: Wait, wait.

9 MR. LYBRAND: Just for housecleaning, I didn't know
10 what other documents and whether we needed to take those
11 up now in light of what we just discussed.

12 MR. KLOTZ: Well, these are all relating to the
13 collector book value.

14 MR. LYBRAND: Those wouldn't be, those would not be
15 gone into by him.

16 THE COURT: No. Because we've hit property
17 damage.

18 MR. LYBRAND: Right. And so those would not be
19 exhibits to be introduced.

20 THE COURT: Right. Now, you just said that that
21 would be your case. Now you have done this, but you
22 still have time to testify to --

23 MR. LYBRAND: I'm not trying to cut him off.

24 MR. KLOTZ: I'll check my other exhibits and see.

25 THE COURT: Okay.

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WILLIAM LEE KLOTZ - DIRECT TESTIMONY BY MR. KLOTZ

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1 MR. KLOTZ: See if there is something else going on.

2 MR. LYBRAND: I just wanted to make sure we were
3 square on exhibits.

4 THE COURT: Because you testified -- You said a lot
5 of things in opening, but we may have to...

6 MR. LYBRAND: Well, I didn't want to --

7 THE COURT: Well, no, no, no. I'm just saying, you
8 go look at your table and then we'll talk. Mr. Klotz,
9 when you come back up on the stand, do you have anything
10 else that you want to present?

11 MR. KLOTZ: No.

12 THE COURT: No. Mr. Klotz, what do you intend to
13 present next?

14 MR. KLOTZ: I'm sorry. The common issues with Dodge
15 Ram 1500 trucks.

16 THE COURT: Okay. All right. Now, as we discussed
17 earlier, the product defect type testimony regarding
18 Dodge Rams was a subject matter, but without an
19 independent expert I didn't think that was appropriate
20 for a lay witness or in this case you representing
21 yourself to testify about from the witness stand. As you
22 recall, we discussed your career and current job in
23 accident analysis, but none of that had to do with
24 automotive type accidents in the nature of what you're
25 talking about these axles for 2008 Dodge Rams.

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1 MR. KLOTZ: Well, I guess my point would be not to
2 say that we knew for certain, but that Mr. VanLier should
3 have taken it to the maintenance facility, to a
4 maintenance facility enough that they would have advised
5 him of this defect in the 2008 Dodge Ram 1500.

6 THE COURT: Mr. Lybrand.

7 MR. LYBRAND: Your Honor, may it please the Court.
8 If there were such defects for purposes of addressing
9 Mr. Klotz, I'll accept that there was such defects, it
10 would require expert testimony to tell what defects there
11 were and that still does not address the issue of whether
12 or not who, if anybody, should have communicated with my
13 client about what to do or not to do or what the
14 condition was. The burden of proof is on the plaintiff
15 to present that kind of evidence and that evidence
16 doesn't flow from those.

17 THE COURT: Competent evidence.

18 MR. LYBRAND: Competent evidence.

19 THE COURT: I mean, again, you're presenting an
20 article from the New England Journal of Medicine by a
21 doctor and I don't believe you can give that type of
22 opinion. Obviously that's an unrelated hypothetical, but
23 I can't, I'm not inclined to allow you to testify about
24 these product defects on the 2008 Dodge Ram. There's no
25 testimony, no evidence in the record done by any

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1 witnesses in this case who can give any opinion on
2 anything of that nature. Now, in openings we talked
3 about property damage, if you'll recall, and you
4 mentioned some other things about --

5 MR. LYBRAND: Your Honor, excuse me for interrupting
6 you, Your Honor. What I was wanting to see, hoping to
7 see during this break was what the next exhibit was. If
8 we set aside the articles that relate to property damage
9 either the value of his vehicle, that has been
10 resolved.

11 THE COURT: We've done that.

12 MR. LYBRAND: And the other one I think if I heard
13 correctly is now resolved when he talks about articles
14 relating to defects in my client's vehicle, if that
15 doesn't come in, what I wanted to see is what his next
16 exhibit would be once he retakes the stand so we could
17 see whether there's need to hash that out now or wait
18 until --

19 THE COURT: Before the jury gets here. Mr. Klotz,
20 anything else from the date of the accident or shortly
21 thereafter?

22 MR. KLOTZ: Well, maybe if I just read out what it
23 says here about the truck, you could have a clearer
24 picture of what they're saying and what I wanted to use.
25 It says the 2002 to 2008 Dodge Ram trucks are notorious

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1 for wearing through front wheel bearings. Wheel bearings
2 replacement in the Dodge Ram seem to be the most
3 prevalent starting around 75,000 miles. Some owners
4 reported that they had replaced one or both sides
5 multiple times within one hundred thousand miles on the
6 truck. You can usually hear a wheel bearing going as it
7 will make a higher pitched squeaking squealing noise as
8 you're driving around. If you notice this type of noise,
9 have it checked immediately. If you wait too long, the
10 bearing could lock up causing that wheel to freeze and
11 the truck to dart or roll in that direction which is what
12 happened. It went in the direction of the front wheel.

13 MR. LYBRAND: Your Honor, without somebody having
14 inspected, this what Mr. Klotz has just read is a
15 generalization of things that may or could possibly
16 happen to a Dodge, 2008 Dodge truck. We're talking about
17 the specific truck owned and driven by the defendant and
18 maybe that linkage could have been established if
19 somebody had inspected. Those things that he's talking
20 about would require somebody to have inspected the
21 defendant's truck and say, oh, yeah, I can see right
22 here, the wheel bearing or whatever, whatever it is, are
23 gone or whatever, but that never happened. There's
24 nobody here to testify that they looked at that truck.
25 It would be mere speculation to allow something like that

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1 to be heard by the jury.

2 THE COURT: I heard what you read to me, Mr. Klotz,
3 and again, I had my concerns about it. It's certainly
4 magnified by Mr. Lybrand's statement here, I'm sorry, I
5 just don't think that's appropriate evidence for you to
6 testify to or use in your testimony from the witness
7 stand. The argument is very similar to the discussions
8 we had regarding the other expert testimony pretrial. So
9 what would be another exhibit after that?

10 MR. KLOTZ: Well, you said something about my
11 reading the report from my last medical exam.

12 THE COURT: No. We were talking about your medical
13 records and that was a medical record that would have
14 been completed by a medical professional, correct?

15 MR. KLOTZ: That's right.

16 THE COURT: Okay. That medical professional is not
17 here to identify themselves as the person that completed
18 the record; is that correct?

19 MR. KLOTZ: No. They're not here.

20 THE COURT: Okay. There could be a great many
21 records that any plaintiff could believe is relevant to
22 their case, but you are still bound by the rules of
23 evidence as far as having witnesses come and testify, the
24 creator of that record or a records custodian or
25 something of that nature, otherwise it's just a sheet of

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1 paper authored by someone not you.

2 MR. KLOTZ: Well, I don't think it's hearsay. I
3 think it's a public record that should be --

4 THE COURT: Your medical record is not a public
5 record. I don't think - I don't say that flippantly. I
6 just -- Our medical records are protected by a great many
7 privacy laws, so it's not public in the sense that, no
8 one can just go get your medical records. If you want to
9 get medical records, you usually have to subpoena or a
10 HIPAA authorization to protect that type of record from
11 going to someone who is not you. What else? I know you
12 have more stuff. I just want to make sure we're...

13 MR. KLOTZ: Well, I was going to show this output
14 from the Great Circle Calculator.

15 THE COURT: We discussed that I think off the
16 record, but that is a document that you say supports
17 where the vehicles were located that we already have
18 pictures of?

19 MR. KLOTZ: That's right.

20 THE COURT: Okay. Well, you have testified about
21 the pictures and where the vehicles were located in the
22 pictures. I don't think that document helps the jury
23 understand anything and I understand Great Circle routes
24 actually and I don't think the document helps me
25 understand the case any more.

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1 MR. KLOTZ: Okay. Well, I've got a list here of
2 medical damages.

3 THE COURT: Have you shown that list to Mr. Lybrand?

4 MR. KLOTZ: Yep. I think you have seen this before.

5 MR. LYBRAND: Your Honor, this is a medical record
6 from the chiropractor's office.

7 THE COURT: A record or a bill?

8 MR. LYBRAND: A record. Well, there's a record.
9 I'll be happy to show you what it is (proffering).

10 THE COURT: Okay. It does have a medical summary at
11 the end.

12 MR. LYBRAND: And again, without a chiropractor, I
13 don't think that document can come in on its own.

14 THE COURT: The record?

15 MR. LYBRAND: Correct.

16 THE COURT: Correct. I think the medical records
17 themselves are a situation that there's no one here to
18 put it in, however, ordinarily a plaintiff can talk about
19 the medical bills.

20 MR. LYBRAND: Sure, he can talk about the medical
21 bills. Yeah.

22 THE COURT: And there is a list of medical bills at
23 the end of this. I think some of those you were okay
24 with. Obviously not the ones at the end pertaining to
25 any sort of heart treatment, but I believe we spoke

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1 earlier about the ER bill.

2 MR. LYBRAND: Right. And what I wanted to see was
3 not an expense total. I wanted, I was agreeing to a bill
4 with a letterhead from the provider and what have you.
5 That's what I don't have any objection to.

6 THE COURT: Right. We haven't seen that.

7 MR. LYBRAND: Not yet.

8 MR. KLOTZ: Well, I sent the bills to Mr. Lybrand.

9 THE COURT: Right. But do you have a copy of your
10 bills today?

11 MR. KLOTZ: No. I didn't think that would be
12 required.

13 THE COURT: Okay. You have a copy of what you sent
14 to Mr. Lybrand, right?

15 MR. KLOTZ: Well, this was one of the things I sent
16 to him, but I sent it, electronically I sent copies of
17 all the bills.

18 THE COURT: Well, so you're essentially in a
19 position where you didn't bring a copy of your medical
20 bills to put into evidence.

21 MR. KLOTZ: That's right.

22 THE COURT: So you could talk about, you can testify
23 you had medical treatment, but you wouldn't be able to
24 show what it was, how much.

25 MR. KLOTZ: Well, I have them all on my computer

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1 here.

2 THE COURT: You have them on your computer now?

3 MR. KLOTZ: I have them on my computer.

4 THE COURT: The copies?

5 MR. KLOTZ: Yeah.

6 THE COURT: Well, can you pull that up and
7 confirm.

8 MR. KLOTZ: I can pull that up. That's right.

9 THE COURT: You know, I'm trying to be as - I know
10 you have these expenses, but just because you had them
11 you've got to be able to show some sort of tangible proof
12 that it is, so if you've got those and you can show them
13 to us, maybe you can get them printed out.

14 MR. KLOTZ: Okay. Yeah. I think there's a printer
15 in there.

16 THE COURT: Well, how about just pull them up on the
17 computer first. I can't keep -- Are you looking for
18 those documents as well, Mr. Lybrand?

19 MR. LYBRAND: Yes, sir. I'm looking at the exhibits
20 that Mr. Klotz sent me and everything that I'm looking at
21 here, uh, he's presented that we've gone through and
22 you've either ruled in or out or we have agreed to in or
23 out. This is one from, that he sent me from Aiken
24 Regional Medical Center, but it was related to the
25 heart.

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1 THE COURT: So you don't see the bills in your file?
2 Well, let me rephrase that. You don't see the ER bill
3 from February 2015?

4 MR. LYBRAND: Not in the file that I've brought to
5 court with me, Your Honor. I mean, there's been a lot of
6 paper transferred in this case.

7 MR. KLOTZ: Well, I've got Carolina Chiropractic
8 bills. I've got the Carolina Radiological Associates'
9 bill. Aiken Physician Services' bill. That would be the
10 ER I think. I could email these to the Clerk of Court.

11 THE COURT: Just email them to Mr. Lybrand and me.

12 MR. KLOTZ: Your Honor, I sent them all to
13 Mr. Lybrand.

14 THE COURT: Okay. I only say that because if you
15 send something to me, you need to send it to him too.

16 MR. KLOTZ: Okay. Here, email for Mr. Lybrand.
17 Okay. I have just sent them to Mona Huggins and
18 Mr. Lybrand.

19 THE COURT: All right. Mr. Klotz has emailed some
20 documents to the Clerk of Court here. One of the
21 documents contains the Aiken Regional Hospital emergency
22 room bill which corresponds with the summary that was
23 attached to some other exhibits. The rest are health
24 insurance claim forms, not bills, and I don't think I can
25 submit it as a bill. I can't allow it to be submitted as

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1 a bill I guess. So, you've got what happens to be your
2 largest bill anyway so when you get back up, you can --
3 did you see any information on that ER bill pertaining to
4 insurance? I only glanced at it quickly.

5 MR. KLOTZ: It says Blue Cross and Blue Shield.

6 THE COURT: Okay. Well, we will redact that before
7 it goes to the jury. Just when you talk about it, when
8 you look there, don't mention Blue Cross, okay? Don't
9 mention health insurance. So that's something you can
10 use in your discretion. Anything else, Mr. Klotz, before
11 we bring the jury back in?

12 MR. KLOTZ: I think that would be it then.

13 THE COURT: Okay. So as I understand it, the next
14 portion of your testimony would be just hitting on those
15 medical bills from the day after or the accident; is that
16 correct?

17 MR. KLOTZ: That's correct.

18 THE COURT: Okay. Please don't mention insurance
19 when you're talking about those bills. Anything else
20 before I bring the jury up, Mr. Lybrand?

21 MR. LYBRAND: No, sir, Your Honor.

22 THE COURT: All right. Let's bring them up please.
23 I don't know what all that treatment entails, but
24 obviously please be mindful of talking about what anyone
25 told you while you were at the hospital or what you

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1 perceived, what you experienced as we've talked about
2 many times leading up to before we got the jury and
3 after, your personal knowledge of this portion of your
4 claim. In fact, you can come on back up to the witness
5 stand. We broke with you on the stand. We'll have you
6 there when they get back.

7 (Whereupon, the jury entered the courtroom at 3:35
8 a.m.)

9 THE COURT: All right. Madam Forelady, ladies and
10 gentlemen of the jury, welcome back. We'll pick up where
11 we left off with the plaintiff who is in the process of
12 presenting his case in chief will continue to do so at
13 this time. Mr. Klotz.

14 BY MR. KLOTZ:

15 A. Okay. Well, the only further exhibit I have as
16 we've gone through them all is the medical bill from Aiken
17 Regional Medical for a total for the ER work a total of
18 \$6911.00.

19 MR. KLOTZ: And that would be Plaintiff's Exhibit
20 14? And then I'm concluded then.

21 THE COURT: Okay. So you don't have any other
22 testimony?

23 MR. KLOTZ: No other testimony.

24 (Whereupon, Plaintiff's Exhibit #14 admitted.)

25 THE COURT: Okay. Mr. Lybrand, any cross

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1 examination?

2 MR. LYBRAND: Briefly, Your Honor.

3 THE COURT: Please answer any questions that

4 Mr. Lybrand has for you on cross examination.

5 MR. KLOTZ: Okay.

6 CROSS EXAMINATION

7 BY MR. LYBRAND:

8 Q. Mr. Klotz, as I understand it, related to your last
9 exhibit which was the Aiken Regional Medical Center emergency
10 room bill, you went there because of problems with your back
11 that you found out the next day after the accident; is that
12 right?

13 A. That's right. The next day on the 23rd.

14 Q. Okay. Now, I think you may have alluded to this
15 earlier, but before this accident with my client, you had
16 previously had three back surgeries; is that right?

17 A. Well, that would be 30 years ago I think.

18 Q. You first started having back problems in the 1980's
19 when you were getting out of a car and then suddenly you had
20 some pain and you went down and --

21 A. And it was a disk injury.

22 Q. Right.

23 A. Not an injury. It was just a herniated disk.

24 Q. You had a herniated disk in the 1980's that you
25 first discovered when you were getting out of a car,

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1 correct?

2 A. That's right. I was getting out of a car and I had
3 to freeze because I couldn't walk.

4 Q. Okay. And as a result of that you had a back
5 surgery? You had a disk surgery, correct?

6 A. That's correct.

7 Q. All right. That was, that's surgery number 1, okay?
8 Now, you were in a car accident in 1995 when you were
9 rear-ended and had a back injury from that accident,
10 correct?

11 A. Well, that sounds correct.

12 Q. And you had a second surgery on your back from that
13 accident, correct?

14 A. Well, there were two accidents.

15 Q. Okay. I'm talking about the 1995 accident.

16 A. Okay.

17 Q. You had a, you were rear-ended and you had back
18 surgery from the 1995 rear-end collision, correct?

19 A. That's right.

20 Q. Okay. So that's back surgery number 2.

21 A. That's right.

22 Q. Then in 1999 you had another rear-end collision that
23 required a third back surgery; is that correct?

24 A. That's correct.

25 Q. Okay. So my question was, before the accident with

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1 my client, you had previously had three back operations, the
2 first one being in the 1980's, the other two in the mid to
3 late 1990's, correct?

4 A. Yes. That's correct.

5 Q. Okay. And you had lawsuits over those, didn't
6 you?

7 A. Not for the very first one. That was a naturally
8 occurring disk injury.

9 Q. No. Not for the one getting out of the car, but for
10 the other two rear-end accidents?

11 A. That's right. Well, the second one, the one in 1999
12 was settled.

13 Q. Okay. The other one in 1995 was a result of a
14 lawsuit, correct?

15 A. Right. That was a lawsuit.

16 Q. Okay. Now, you talked about your cars and you're
17 repairing this car, the Prius that you have; is that right?

18 A. That's right.

19 Q. You referenced other vehicles that you have. Did I
20 understand you to say that you owned a 2016 Tesla?

21 A. That's correct.

22 Q. What's the cost of that car?

23 A. Well, the actual cost I'm thinking was 110,000.

24 Q. Okay. And so you have that car. You still have the
25 Prius and then I think you said you had another car that you

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WILLIAM LEE KLOTZ - CROSS BY MR. LYBRAND

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1 intend to collect or retain; is that right?

2 A. Well, actually two other cars that are electrical in
3 nature. The 2012 Chevrolet Volt I consider a collectible
4 because that was their first electric car.

5 Q. Okay.

6 A. And we also got a, well, we've got a 1992 Chevrolet
7 Suburban that I like to think of as collectible, but it's not
8 electrical in any way.

9 Q. Okay. And so you have this accident with my client
10 and the next day you have what corresponds to your last
11 exhibit which was the treatment at Aiken Regional Medical
12 Center emergency room?

13 A. That's right.

14 Q. And you had a subsequent accident in 2019, haven't
15 you?

16 A. That's correct, with the Tesla on Interstate 20.

17 Q. And you injured your back in that accident too,
18 didn't you?

19 A. Well, I injured my back and they also at the
20 emergency --

21 Q. Hold on. I don't want you to testify what they told
22 you. My question is, didn't you injure and claim you had a
23 back injury from the 2019 accident in the Tesla?

24 A. That's correct.

25 MR. LYBRAND: Your Honor, that's all I have.

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WILLIAM LEE KLOTZ - REDIRECT TESTIMONY BY MR. KLOTZ

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1 THE COURT: All right. Ordinarily a lawyer would
2 have an opportunity to do what's called redirect
3 examination. Is there any redirect testimony that you
4 want to give that is only within the scope of his cross
5 examination? You don't have to.

6 MR. KLOTZ: Yeah. I would be asking this to
7 Mr. Lybrand or just testifying?

8 THE COURT: No, sir. Redirect is when after cross
9 examination if there were an attorney here, they may or
10 may not ask a redirect question, but if there's some
11 redirect testimony based upon your cross examination that
12 you would be entitled to give. To be clear, you don't
13 have to do anything.

14 REDIRECT TESTIMONY

15 BY MR. KLOTZ:

16 A. Okay. Well, I would say all of the back injury
17 cases were from rear-end collisions when I was not moving. I
18 was simply properly sitting in my lane with no fault attached
19 to anything I did, just as there was no fault attached in this
20 case.

21 THE COURT: Okay.

22 MR. KLOTZ: That would be my redirect.

23 THE COURT: All right. Any other recross?

24 MR. LYBRAND: None, Your Honor.

25 THE COURT: All right. So your testimony is done.

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1 You're finished so you're free to step down now.

2 MR. KLOTZ: Very good.

3 THE COURT: Okay. Mr. Klotz, just to be clear, do
4 you have any other witnesses?

5 MR. KLOTZ: I haven't heard back from my doctor so
6 not at this time.

7 THE COURT: All right. Actually, let me speak with
8 y'all up here real quick.

9 (Side bar off the record.)

10 THE COURT: Having no witness present, does the
11 plaintiff rest?

12 MR. KLOTZ: I do, Your Honor. I rest my case.

13 THE COURT: Very well. Ladies and gentlemen, the
14 plaintiff has rested his case. I have to take some
15 matters up with the parties at this time so I'm gonna
16 take a short break and then I'll get you back up here as
17 soon as possible, okay? Thank you very much. Please
18 don't discuss the case while you're in the jury room.

19 (whereupon, the jury entered the jury room at 3:45
20 p.m.)

21 THE COURT: Okay. At this stage of the trial the
22 plaintiff has rested. Does the defendant have any
23 motions?

24 MR. LYBRAND: Yes, Your Honor. Related to the
25 matters in the complaint, I'm referring specifically to

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1 the last two pages, one of the elements of damages is
2 listed as number, on the very last page, number 3, future
3 medical expenses. There's no evidence that those would
4 be incurred. I don't have any idea what plaintiff
5 intends to offer, but I would ask that that element of
6 damages be stricken for lack of any evidence. Then we go
7 to number 4, future general damages and number 6, costs
8 and attorney's fees aren't recoverable.

9 THE COURT: Just if you could elaborate. Not
10 recoverable under the negligence cause of action?

11 MR. LYBRAND: That's correct.

12 THE COURT: Okay.

13 MR. LYBRAND: And I can't tell, but if the plaintiff
14 is seeking punitive damages, I would move to strike those
15 on the grounds that there's no evidence of any
16 recklessness, willfulness or wantonness. It's hard
17 reading his complaint to --

18 THE COURT: The complaint does not use the word
19 punitive at any point that I can see.

20 MR. LYBRAND: That's what I can see. There's also a
21 claim for lost wages. There's no evidence of that so we
22 would move to strike that as any element that the
23 plaintiff might claim. There's been no testimony about
24 the loss of quality of life or anything of that nature so
25 I would move to strike that also, Your Honor. That's all

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1 we would have.

2 THE COURT: All right. Mr. Klotz, as to the future
3 medical expenses, I didn't hear anything at any time
4 about future medical expenses. That's something that
5 gets put in the complaints often to be clear, but I
6 didn't hear any testimony or any language throughout the
7 entire day about future medical expenses.

8 MR. KLOTZ: I hadn't really planned on asking for
9 that, any of that because of the subsequent collision.

10 THE COURT: I think that answers my question.
11 You're not seeking future medical expenses from the --

12 MR. KLOTZ: For punitive I'm wondering, is
13 Mr. VanLier going to testify?

14 THE COURT: He may. He may not. All indications
15 have been that he would from Mr. Lybrand.

16 MR. KLOTZ: I have some punitive facts may emerge
17 from his testimony.

18 THE COURT: Okay.

19 MR. LYBRAND: The plaintiff should have called him
20 as his witness then, Your Honor.

21 THE COURT: Be that as it may, there's nothing in
22 the complaint itself, the operative document that sets
23 forth the basis of recovery that seeks punitive damages.
24 Now, in the event that we may have to discuss this again
25 based upon what sort of testimony we hear, but there's

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1 nothing that originally sought punitive damages and it's
2 kind of tough to rule on something when it wasn't in the
3 complaint anyway, but for the record, I'll say that
4 punitive damages were not sought in the complaint.
5 Should something -- Obviously there's more testimony to
6 come, but I don't think based on what I've heard now that
7 it's a factor, punitive damages.

8 MR. KLOTZ: Well, I think the fact that he may have
9 left the scene.

10 THE COURT: Well.

11 MR. KLOTZ: Which may show up.

12 THE COURT: All that I have to go on right now is
13 the evidence I've heard in the case thus far which is
14 your testimony and the documents that were admitted into
15 evidence and there was no plea for punitive damages from
16 either your former lawyer or yourself in any sort of
17 amended pleading so I don't think punitive damages at
18 this time is before me. It's tough to rule on something
19 when it was never sought. I will, as far as future
20 general damages, I'm not sure what that even entails.

21 Frankly, Mr. Lybrand, I may take that up on the next
22 round of motions because I would like to know what that
23 even entails. I think the matter of other things in the
24 complaint about the Prius was dealt with on the record,
25 stipulated to amongst the parties as far as the property

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1 damage discussion. The only complaint, the only cause of
2 action asserted was for negligence, so I don't think
3 attorney's fees are appropriate. Now, under Rule 54, I
4 think he's entitled to costs for this trial in the event
5 he would obtain a verdict.

6 MR. LYBRAND: Whatever recoverable costs are
7 allowed, but not attorney's fees.

8 THE COURT: Sure. But I don't want to grant a
9 directed verdict on costs when we haven't come to a final
10 outcome of the case. That was a lot, Mr. Lybrand. Did I
11 address all your motions?

12 MR. LYBRAND: Yes, sir, Your Honor. You did.

13 THE COURT: Now, Mr. Klotz, Mr. Lybrand will now
14 have an opportunity to put forth a case. The trooper is
15 here and is gonna be the first witness up and then we
16 will break for the day. How long do you anticipate his
17 testimony to be?

18 MR. LYBRAND: The trooper, five minutes, 10 minutes.

19 THE COURT: Okay. Whatever direct testimony comes
20 up, you will have the opportunity to ask questions in
21 cross examination. Just remember to not go into areas
22 that we've already said are off limits in prior
23 discussion. But we'll break for the day after this
24 witness, come back in the morning and I can still --

25 MR. KLOTZ: Would the trooper be considered a

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1 hostile witness since he's Mr. Lybrand's witness?

2 THE COURT: No. He's a witness in his case in
3 chief. In fact, I don't think he could ever be
4 considered a hostile witness. He's a neutral party. Had
5 you called the defendant in your case in chief in theory
6 he might have been a hostile witness, could have been a
7 hostile witness, but no, he's not a hostile witness, but
8 you will have the opportunity to cross examine him after
9 Mr. Lybrand has finished with his direct examination,
10 okay?

11 MR. KLOTZ: Okay.

12 THE COURT: All right. Two minutes. I'll be right
13 back and tell them we're about ready.

14 (Short break.)

15 THE COURT: Okay. The jury is on their way up now.

16 (Whereupon, the jury entered the courtroom at 3:50
17 p.m.)

18 THE COURT: Okay. Ladies and gentlemen, welcome
19 back. When we left, the plaintiff just finished his case
20 in chief. We have now the opportunity to hear from the
21 defendant. Mr. Lybrand.

22 MR. LYBRAND: Thank you, Your Honor. May it please
23 the Court. The defendant would call Trooper Antley to
24 the stand please.

25 THE COURT: Very well.

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ADAM ANTLEY - DIRECT BY MR. LYBRAND

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1 Thereupon,

2 ADAM LOUIS ANTLEY

3 after having been first duly sworn, testified as follows,

4 THE CLERK: Please have a seat. Once you're seated,
5 state your full name spelling your last please.

6 THE WITNESS: Adam Louis Antley, A-n-t-l-e-y.

7 DIRECT EXAMINATION

8 BY MR. LYBRAND:

9 Q. Trooper Antley, I think we can probably guess who
10 you're employed with, but would you tell the jury what your
11 occupation is?

12 A. I'm a state trooper with the South Carolina Highway
13 Patrol. The parent agency is the Department of Public
14 Safety.

15 Q. How long have you been so employed?

16 A. This is my thirteenth year, 2008.

17 Q. And that's been continuously since 2008?

18 A. Yes, sir.

19 Q. Just briefly, how are highway patrol trained when
20 they first are hired?

21 A. We go through the same, at the time when I was in
22 the training academy, it was a nine week Class I on law
23 enforcement certification and then once we get finished with
24 that that all deputies, municipal officers just go through, I
25 did an additional 12 weeks at highway patrol specific training

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ADAM ANTLEY - DIRECT BY MR. LYBRAND

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1 that went more along the lines of DUI detection, collision
2 investigation and things that are more specific to my job that
3 differentiate between myself and another police officer.

4 Q. And is part of your training and your experience,
5 does that involve investigating traffic accidents?

6 A. Yes, sir.

7 Q. And would you have any estimation how many traffic
8 accidents you may have investigated?

9 A. Thousands. Between the first -- I think I got
10 promoted to my first supervisor position in mid 2015 so
11 between 2008 and, from 2008 to 2014 somewhere between two and
12 three hundred a year working in Lexington County pretty
13 mainly.

14 Q. Trooper Antley, were you -- First of all, before
15 today did you and I ever meet each other?

16 A. Not in person I don't believe.

17 Q. Do you know my client Mr. VanLier?

18 A. No, sir.

19 Q. Do you know the plaintiff Mr. Klotz?

20 A. No, sir.

21 Q. So you don't know anybody involved in this lawsuit;
22 is that correct?

23 A. That's correct.

24 Q. Now, were you called to investigate a traffic
25 accident on the afternoon of February 22, 2015 on Interstate

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ADAM ANTLEY - DIRECT BY MR. LYBRAND

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1 20?

2 A. Yes, sir. I was.

3 Q. And tell us a little bit about how you get called
4 and what you do. You say you work mostly in Lexington County
5 where this accident happened. What would have been the
6 protocol for you to arrive at the scene?

7 A. Yes, sir. At this time I was assigned to Lexington
8 County. Most calls for collisions, most of them come by way
9 of 911 dispatch. When a person gets involved, they normally
10 calls 911. If it didn't come through the 911 center which
11 would be routed through Lexington's communications, they would
12 call star HP or star 47 on a cell phone, that gets you the
13 highway patrol dispatch center. Either way whether it came in
14 through 911 or star HP, the call taker would take the
15 information for whatever emergency was is taking place, they
16 provide it to the appropriate dispatcher and the dispatcher
17 would notify a trooper to respond to the call.

18 Q. So you were dispatched in some fashion to this
19 accident involving the parties in this case; is that right?

20 A. That's correct. Yes, sir.

21 Q. And when you arrived on the scene, were both parties
22 still in the area?

23 A. I believe they were. Yes, sir.

24 Q. All right. Now, you have before you notes that you
25 would have prepared at or around the time of the accident?

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ADAM ANTLEY - DIRECT BY MR. LYBRAND

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1 A. Yes, sir.

2 Q. Okay. Please feel free to refer to those notes,
3 okay?

4 A. Yes, sir.

5 Q. Now, when you arrived at the scene, do you typically
6 talk with both parties, both Mr. Klotz and Mr. VanLier?

7 A. Yes, sir. I would.

8 Q. Okay. What did you find out about, what kind of
9 vehicle was Mr. Klotz driving?

10 A. Based on the crash report that I generated from
11 this, he was operating a 2002 Toyota, I have four door with a
12 North Carolina tag.

13 Q. All right. My client Mr. VanLier was driving
14 what?

15 A. A 2008 Dodge pickup with a Georgia tag.

16 Q. All right. And when you get to the scene, what is
17 your first concern?

18 A. Well, in this case it was on Interstate 20, it's in
19 a rural area of Interstate 20 in a 70 mile an hour zone. At
20 the time my practice would have been to make sure the roadway
21 was clear. If the road was blocked for any reason, try and
22 alleviate the blockage or remove the blockage and then
23 obviously make sure that the parties, if there were injuries,
24 they were being treated and after that my job is to
25 investigate the collision to determine the cause of it.

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ADAM ANTLEY - DIRECT BY MR. LYBRAND

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1 Q. Did you determine or did anyone complain of any
2 injuries according to your report?

3 A. I did list that Mr. Klotz whether he complained of
4 it or whether he showed signs I can't recall, but I did
5 indicate a possible injury on the report. A possible injury
6 to me would be something that is either something that you
7 can't see. A cut on the arm would be an injury. A possible
8 injury would be a complaint to me. That's how I designated
9 those types of injuries on my report so a possible injury was
10 something that I maybe couldn't see, but maybe something
11 somebody complained of.

12 Q. All right. After you spoke with both drivers, I
13 think you indicated that you tried to determine from both
14 drivers what had occurred; is that correct?

15 A. Yes, sir.

16 Q. And what do your notes reflect?

17 A. Briefly that, or I guess in the simplest form that
18 the collision occurred on Interstate 20 in the westbound
19 lanes; that it was approximately a mile and half west of Pond
20 Branch so in front of the Pond Branch Road interchange going
21 towards Aiken about a mile and a half. It indicates that the
22 vehicle that Mr. VanLier was driving suffered some type of
23 catastrophic failure. It indicates that right rear axle broke
24 on the unit, on unit two which is Mr. VanLier's car causing
25 him to lose control, he then side swiped Mr. Klotz's vehicle

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ADAM ANTLEY - DIRECT BY MR. LYBRAND

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1 who was beside him in the lane or in the lane adjacent to him
2 and after that side swipe occurred, Mr. Klotz's vehicle, based
3 on the diagram that I drew, Mr. Klotz's vehicle spun around
4 and ended up facing the wrong way in the median and
5 Mr. VanLier's vehicle ran off the road, struck a guardrail and
6 enough for me to list DOT as the property owner. It must have
7 damaged the guardrail and then it came to rest blocking what
8 you would call the slow lane of traffic or the right lane.

9 Q. And what you just recited would have been based upon
10 your physical view of the evidence, any objective evidence,
11 skid marks, debris, anything like that plus talking to each of
12 the drivers; is that right?

13 A. Yes, sir.

14 Q. Did you talk to the drivers about how fast each of
15 them was traveling?

16 A. That's normally part of my interview. Yes, sir.

17 Q. And what did you, what were you told about the speed
18 of both vehicles as given to you by them?

19 A. I can't recall specifically if they told me their
20 exact speed, but I indicated on the report that both of them
21 were traveling approximately 70 mile an hour. The speed limit
22 in the area is 70 mile an hour. I normally wouldn't have put
23 - it would have been -- I base that speed estimate off the
24 current traffic conditions and then what the drivers say, but
25 at this time I couldn't tell you seven years ago what they

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 exactly would have said.

2 Q. All right. During the time you investigated this
3 accident, I think you said that Mr. VanLier, my client, his
4 vehicle experienced a catastrophic failure; is that right?

5 A. That's what it says. Yes, sir.

6 Q. And at any time when you were there on the scene,
7 Trooper Antley, did you ever hear of or see anything about my
8 client trying to leave the scene of the accident?

9 A. Not that I recall. No, sir.

10 MR. LYBRAND: That's all I have, Your Honor.

11 THE COURT: Okay. Mr. Klotz, you're entitled to ask
12 questions. You can cross examine this witness. Yes,
13 sir.

14 MR. KLOTZ: Okay. All right.

15 CROSS EXAMINATION

16 BY MR. KLOTZ:

17 Q. Trooper Antley, I have here a photograph of you
18 talking, I believe it would be to Mr. VanLier while his pickup
19 truck is on the back of a tow truck. Is that the first time
20 you had spoken to Mr. VanLier?

21 THE COURT: How about --

22 MR. LYBRAND: Is that in evidence, Your Honor?

23 THE COURT: Is that the same picture that's already
24 in?

25 MR. KLOTZ: It's the same picture in evidence.

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 THE COURT: Okay. I would like you to come a little
2 closer so he can see it.

3 MR. KLOTZ: Yes, if the bailiff wants to hand this
4 to him.

5 THE COURT: Do we have the actual -- Let's hand him
6 the one that's already in evidence.

7 MR. KLOTZ: That one there and that one there.

8 BY MR. KLOTZ:

9 Q. Okay. Here is the actual exhibit. You can see
10 you're talking to someone in the pickup. Was that Mr. VanLier
11 or do you remember?

12 A. I can't see the person that I'm talking to. Can you
13 show me whom I'm talking to? I don't see anybody else --

14 Q. Well, you have your hands on your hips here like
15 you're actually addressing someone there or were you just
16 inspecting at that point?

17 A. Well, what I can tell you is I don't have a common
18 habit of putting my hands on my hips in this uniform. The
19 only time you ever see my arms do that in this uniform is to
20 grab this heavy belt and pull it up on my waist, so maybe the
21 picture was taken while I was doing that.

22 Q. That might have been the case.

23 A. But as far as actually talking to Mr. VanLier, I
24 don't know if that was the first time or the last time I
25 talked to him. I can't recall.

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 Q. Okay. Did Mr. VanLier tell you that his -- I'll
2 step back here. Did Mr. VanLier tell you that his axle broke
3 or did he make some other statement about the catastrophic
4 event?

5 A. The axle being broke, for me to put that in that
6 report, that would have been something that I would have seen
7 from my own perspective. I wouldn't have just -- I can't say
8 whether he told me that or not or what he told me.

9 Q. But the car is, the pickup truck is up here on top
10 of the tow truck so that would be hard to see from there,
11 wouldn't it?

12 A. It actually would be easier to see. I would have to
13 take a knee and kneel down and look under it. I could just up
14 and look right underneath the car. I worked on, prior to
15 becoming a trooper, I did a lot of work, automotive work in mt
16 teenage years and my college years and so that's one good
17 thing, that's one thing that I kind of take value in when
18 somebody tells me there's something wrong with their car, I
19 can usually look at it and kind of see if they're on the right
20 track and in this case in the picture you can see that the
21 back hub is totally missing off of that truck.

22 Q. That's correct. The back hub is missing, but it
23 could have been a wheel failure, couldn't it?

24 A. When you say wheel, you mean the rim or --

25 Q. I mean the entire wheel.

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 A. You'd have to differentiate what you're telling me
2 about the wheel. There's a rim, there's a wheel bearing.

3 Q. In the exhibits here from both Mr. VanLier, defense
4 and myself, if we could look at one of the wheel pictures, I
5 can show the officer. For example, we have several pictures
6 like this but --

7 THE COURT: Which picture are you showing him, Mr.
8 Klotz?

9 MR. KLOTZ: This is exhibit number 6.

10 THE COURT: Okay.

11 BY MR. KLOTZ:

12 Q. And you can see the wheel has basically exploded
13 there, but it appears --

14 A. I don't know if I would characterize that or
15 describe that picture as an exploded wheel. The wheel is
16 missing. The backing plate for the brakes is bent. It
17 appears that the axle shaft, the shiny piece here you see with
18 all the dirt around it, it appears that the axle shaft that
19 goes inside that axle tube is sheared off, but I wouldn't say
20 that it exploded. It appears that --

21 Q. It sheared off?

22 A. It appears that this damage here to this backing
23 plate is caused from contact damage with either --

24 Q. With the road?

25 A. Well, the top of it doesn't touch the road up here.

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1 It would hit something other than the road. Again, I wouldn't
2 characterize it as exploding.

3 Q. Okay. If I could look at that exhibit with the
4 wheel in the truck. I've got them here. Okay. Here is
5 exhibit number 9 and this shows the wheel in the truck. This
6 is pretty much intact so it's just that back part of the
7 wheel, I guess, so that's still attached.

8 A. So this is the brake caliper. This is the caliper
9 bracket. This is where it would have bolted to the - this is
10 the caliper bracket mounts that would have bolted to the axle
11 and this other shiny piece here, obviously there's your five,
12 might be six, no, five wheel studs where your lug nuts go,
13 that's your brake rotor and that shiny piece here, that would
14 be what's left of the axle shaft. The axle shaft would be
15 sticking out of the back of that hub and it should stand, you
16 know, 36 inches tall just about.

17 Q. Right.

18 A. It has to go to the center section of the axle.

19 Q. So that bears what you just said about the wheel
20 being sheared off?

21 A. It appears, from that picture it doesn't appear it
22 did. The axle shaft is sheared in half so in that case it's
23 only a one and a quarter inch piece of steel that is totally
24 cracked in half.

25 Q. Well, just one and a quarter inch, but an axle shaft

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 goes the full length underneath the back of the truck, doesn't
2 it?

3 A. The axle tube would go the full length, but the axle
4 shaft, there's two of them, they go from the center section to
5 each side so --

6 Q. Okay. Was the axle shaft that sheared when the
7 wheel left the car. The axle tube remained intact?

8 A. Well, not necessarily. No, sir.

9 Q. You didn't actually see that then. Okay.

10 MR. KLOTZ: Let the record show that the officer
11 didn't actually see the axle tube then.

12 MR. LYBRAND: Is that - if that's what the officer
13 said, Your Honor.

14 BY MR. KLOTZ:

15 Q. Is that correct, officer?

16 A. You're asking did I see the axle tube?

17 Q. Axle tube.

18 A. Yes, sir. I would have seen the axle tube because
19 it still would have been attached.

20 Q. But you didn't see any break in the axle tube?

21 A. In the tube itself, I don't recall a break in the
22 tube.

23 Q. Okay. It was a shearing of the wheel. So now I've
24 got a copy of the accident report here. Did you complete the
25 whole accident report or did you have any assistance with

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 that? I guess I see that it was reviewed.

2 A. I would have completed the entire report. The only
3 box on this page that I would not have filled out was the
4 reviewer's name and the rank of the reviewer, other than that
5 everything else I would have filled out.

6 Q. There's a final page on this report. Did you
7 complete that too?

8 A. The back page. Yes, sir.

9 Q. Okay. Now, it says here on the very last entry
10 here, it says, vehicle defect and you've selected 73 which is
11 tires and wheel.

12 A. Yes, sir.

13 Q. So you're saying that the tires and the wheel were a
14 defect apparently in the vehicle?

15 A. I can't say -- I wasn't saying that the tire was a
16 defect. That is the closest option that I had --

17 Q. This is the description that you used.

18 A. -- to choose. Yes, sir. There's no option here for
19 axle shaft sheared off at the tube.

20 Q. Okay. Because it says the wheel was the primary,
21 the primary, number 73, which is tires slash wheel was the
22 primary contributing factor to the failure that caused
23 Mr. VanLier to veer into the Prius. Now, I've got another
24 exhibit here, exhibit number 8, and it shows the Prius,
25 Mr. VanLier's truck continued on after hitting the Prius in

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 the back. You would normally expect the truck to slow down a
2 little bit after striking the rear fender of the Prius,
3 wouldn't you?

4 A. When you say expect it to slow down, it just
5 depends, I guess, on the situation. In this case it all
6 depends on how hard it hit it and what's causing it to slow
7 down. Are you saying by means of braking?

8 Q. If he had brake, but I don't know that he did brake.
9 Was there any sign of braking at the scene?

10 A. Well, what I can tell you is, and I have again, I
11 worked on cars for a long time and I still continue to do it
12 as a hobby, at the moment that axle shaft broke and that wheel
13 came loose, that picture that you have of the caliper there,
14 the brake line is gonna rupture at that point and as soon as
15 that ruptures, he's not gonna have any brake pressure so even
16 if he tries to touch the brake, it's not gonna do anything.
17 The pedal will go to the floor and at that point he's along
18 for the ride. Other than steering the vehicle he cannot use
19 the conventional brake pedal to slow the car at that point.

20 Q. Now, in the drawing you have there it shows
21 Mr. VanLier's truck striking, I guess, it's the barricade, but
22 then it shows the truck backing away. So was that backing
23 away at a point in which he was leaving?

24 A. So on the diagram when I draw it, the dotted lines
25 here, the staggered lines or skip lines that I have drawn here

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 indicate to me that that is post collision movement. That is
2 not voluntary movement per se. That is not the driver putting
3 the vehicle in reverse and backing away.

4 Q. So you're saying that could be --

5 A. So to me that is he bounced off the guardrail. The
6 way I wrote this report is and the way this report reminds me
7 is that he hit the guardrail with the front end of the truck,
8 rotated around and I guess you could say backed away, but
9 again, he wasn't in control of the truck. It spun around and
10 kind of lurched to a stop I guess.

11 Q. So you're saying he rebounded from the barricade?

12 A. Yes, sir.

13 Q. Okay. Now, when I viewed Mr. VanLier's truck, I saw
14 him some distance down the road and he was picking up his
15 wheel in the median. Could that wheel have continued on after
16 shearing off?

17 A. Could it have? Yeah. It could have done a number
18 of things.

19 Q. Could it have gone on down the road? But his truck
20 couldn't have gone on down the road, could it, if it was
21 missing a wheel?

22 A. It could have. I mean...

23 Q. You got three wheels. Maybe one would be --

24 A. You mean could he have driven it?

25 Q. Could he have driven it after the wheel came off?

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 A. I mean, it's not very efficient, but I guess I've
2 seen worse driving down the road. To be honest, I've seen
3 cars with three wheels go down the road.

4 Q. So he could have gone down to collect his wheel?

5 A. Could he have? Yeah. I guess he could. Yes, sir,
6 I guess he could have.

7 Q. Okay. And because when you saw him in the pickup,
8 in the tow truck, they were already coming back. Apparently
9 the accident occurred about 4:30 and it was about 5:00 when
10 you were on the scene; is that correct?

11 A. I estimated the accident occurred at 4:15. I
12 received the call from my dispatch at 4:20 and I got there at
13 4:32.

14 Q. Okay. So a little time passed. Okay. I think that
15 answers my questions. I guess there was a little confusion
16 between unit one and unit two, but I think you may have just
17 misnumbered unit one and unit two on this accident report.
18 You've got the text here.

19 A. I don't believe -- I mean, I believe that unit one
20 says Mr. Klotz and unit two is VanLier. The diagram shows
21 Mr. VanLier's truck going into your lane, hitting the
22 guardrail and it shows your vehicle going off to the median.

23 Q. Well, it says the front of unit one struck the
24 guardrail and I'm unit one and I didn't strike the guardrail.
25 It was --

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ADAM ANTLEY - CROSS BY MR. KLOTZ

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1 A. Okay. I see what you're saying now.

2 Q. -- unit two that struck the guardrail.

3 A. Yes, sir. It says unit two traveled off the right
4 side of the roadway and struck, and the front of unit one
5 strike the guardrail. Yes, sir. That's a typo. Should say
6 the front of unit two struck the guardrail.

7 Q. Okay. Now, there's no scale shown on this drawing.

8 A. It's not to scale.

9 Q. You don't really know or it's not in evidence here
10 how far unit two went before it struck the guardrail?

11 A. No, sir. I'm not sure.

12 Q. So it might have gone a good distance.

13 A. You would have to tell me what a good distance is,
14 how far that is.

15 Q. Quarter of a mile. A quarter mile. It might have
16 gone a quarter mile before striking the guardrail.

17 A. After it struck your car?

18 Q. Yeah.

19 A. You're asking could it --

20 Q. Could it.

21 A. -- or did it?

22 Q. No. I don't think you could say whether it did or
23 not, but do you think it could have?

24 A. Could it have gone a quarter mile after striking
25 your car? I mean, I guess anything is possible. I would say

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ADAM ANTLEY - REDIRECT BY MR. LYBRAND

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1 highly unlikely but...

2 Q. Well, if the wheel were still on there and didn't
3 come off until it struck the barricade and nothing would be
4 there to stop it.

5 A. You're asking me if the tire did not fall off, or
6 did it fall off before the collision if it was on there, but
7 it got knocked off after it hit the barricade?

8 Q. Yes. If it was knocked off possibly after it hit
9 the barricade do you think?

10 A. You're asking if I think that's what happened or if
11 that's possible.

12 Q. Well, if it was possible?

13 A. Anything is possible. Yes, sir.

14 Q. Anything is possible.

15 A. Yes, sir.

16 Q. Okay. Well, I think you've been very helpful and
17 truthful and in responding and I appreciate that.

18 A. Yes, sir.

19 MR. KLOTZ: So that concludes my cross examination.

20 THE COURT: Very well. Any redirect examination?

21 REDIRECT EXAMINATION

22 BY MR. LYBRAND:

23 Q. Trooper Antley, the information that you put on your
24 report that you've been asked about by both me and Mr. Klotz,
25 was it done at or near the time of the accident?

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ADAM ANTLEY - REDIRECT BY MR. LYBRAND

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1 A. That day. Yes, sir.

2 Q. And you're not only familiar with cars, I mean with
3 accident investigation, but with the mechanics of a car?

4 A. Yes, sir.

5 Q. The shaft, the brakes and what have you, correct?

6 A. Yes, sir.

7 Q. And in this case I think you've testified this was a
8 catastrophic, which would mean something unexpected,
9 correct?

10 A. That's what it appeared to me. That's why I put it
11 on the report the right rear axle broke. That's not something
12 that normally drivers experience on a daily basis. That's why
13 I call it catastrophic. It's something hard to control or
14 hard to recover from.

15 Q. And a driver who experiences a catastrophic failure
16 in this case like you've testified to would not have any
17 control over the vehicle; is that right?

18 A. I would say it would be very limited.

19 Q. Very limited. And it could be very dangerous,
20 correct?

21 A. Sure. Yes, sir.

22 Q. And it would be dangerous not only to anybody on the
23 road, it would be dangerous to the driver of that vehicle,
24 wouldn't it?

25 A. Yes, sir. It would be, like I said, he's along for

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ADAM ANTLEY - RECROSS BY MR. KLOTZ

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1 the ride.

2 MR. LYBRAND: Thank you. That's all I have,
3 trooper.

4 THE WITNESS: Yes, sir.

5 THE COURT: Mr. Klotz, you're entitled to do a
6 recross if there is anything else based upon the
7 redirect? Is there anything? You don't have to but...

8 MR. KLOTZ: Okay.

9 RECROSS EXAMINATION

10 BY MR. KLOTZ:

11 Q. Trooper Antley, do you remember speaking to me while
12 I was in my Prius as you were leaving the --

13 MR. LYBRAND: Objection.

14 THE COURT: Counsel is objecting.

15 MR. LYBRAND: Objection, Your Honor. That was not
16 covered on redirect examination.

17 THE COURT: Outside the scope.

18 MR. KLOTZ: Outside the scope.

19 THE COURT: So that's outside - his objection is
20 that's outside the scope of his redirect so just keep
21 your questions confined to anything that was testified to
22 in redirect.

23 MR. KLOTZ: Redirect. Okay. I'll have to think it
24 through a minute.

25 BY MR. KLOTZ:

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1 Q. How long were you on the scene at that location?

2 MR. LYBRAND: Your Honor, again, outside the scope.

3 I asked him nothing about time he was on the scene.

4 MR. KLOTZ: Okay.

5 THE COURT: Okay.

6 MR. KLOTZ: Well, I don't think I need to redirect
7 anything.

8 THE COURT: Very well.

9 MR. KLOTZ: Thank you.

10 THE COURT: All right. Trooper Antley, you may step
11 down, sir.

12 MR. LYBRAND: May the trooper be excused, Your
13 Honor.

14 THE COURT: Yes, sir. You're free to go. Let me
15 speak to y'all.

16 (Side bar off the record.)

17 THE COURT: All right. Ladies and gentlemen, it's
18 late afternoon hour here. We have some more work to do,
19 but we're gonna do that, start that tomorrow morning so
20 I'm gonna let you go for the day at this point. I would
21 like you to be back in the jury room tomorrow morning at
22 9:15, 9:15. If, I know y'all are scattered across the
23 county, there is a traffic issue or something that crops
24 up, please try to give us a heads up, call the Clerk of
25 Court's office in the morning. If you get in traffic,

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1 you get in traffic, just give us a heads up, if you can.

2 When you depart today on your way back to the jury
3 room, walking out together, please don't discuss the case
4 or anything involved with the case or any of the parties
5 involved in the case. Otherwise, we'll see you tomorrow
6 morning. Have a good evening and thank you for you
7 service today and thank you in advance for your service
8 tomorrow. Have a good evening.

9 (Whereupon, the jury was released for the day at
10 4:30 p.m.)

11 THE COURT: Okay. So we have another witness
12 tomorrow morning. I explained to the parties up here in
13 a short conference what the schedule was. We'll pick up
14 tomorrow morning. Anything else for the record for now?
15 I wouldn't think but...

16 MR. LYBRAND: Nothing from the defendant, Your
17 Honor.

18 THE COURT: Anything else before we adjourn today?
19 Mr. Klotz, anything else?

20 MR. KLOTZ: No. Nothing else.

21 THE COURT: Tomorrow we'll finish defendant's case
22 in chief and we'll have a short charge conference where
23 I'll talk about the law that I think is applicable based
24 upon the evidence I've heard in the trial, we'll do
25 closing arguments and closing arguments are a good time

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1 to go through the evidence that's been put in the record.
2 I'll charge, after closing arguments I'll charge the jury
3 on the law of the case and they can begin their
4 deliberations, okay? All right. Y'all have a nice
5 evening.

6 MR. LYBRAND: Thank you, Your Honor.

7 (Whereupon, court concluded for the day at 4:35
8 p.m.)
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February 15, 2022

BAILIFF: All rise. Court is now in session. The Honorable Walton J. McLeod presiding.

THE COURT: Okay. Good morning. Please be seated. Thank you. I hope everybody had a nice evening.

MR. LYBRAND: Yes, sir. Hope you did too.

THE COURT: Okay. It's my understanding the jury is all present. Do you have a witness ready to go, Mr. Lybrand?

MR. LYBRAND: Yes, sir, Your Honor.

THE COURT: Anything before I bring up the jury?

MR. LYBRAND: Nothing from the defense.

THE COURT: Mr. Klotz, anything before we bring up the jury?

MR. KLOTZ: I'd like to make an objection relating to the pretrial evidence review. I reviewed my emails and on October 16th, 2021, I had made a discovery request to defense counsel for a list of the evidence that he was contesting and the basis for it and I didn't timely receive that. The defense counsel's reply is those would be presented at the time of the pretrial hearing so I had no opportunity or information that I needed to schedule testimony from my medical doctor so I would object I guess to a ruling to exclude the doctor's statement.

THE COURT: Okay. Your objection is noted. Thank

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 you. All right. Let's bring up the jury please.

2 (Whereupon, the jury entered the courtroom at 9:35
3 a.m.)

4 THE COURT: All right. Ladies and gentlemen,
5 welcome back. Hope you had a nice evening. When we left
6 off we just finished one witness yesterday and we'll
7 pick up where we left of with the next witness in the
8 defense's case in chief. Mr. Lybrand.

9 MR. LYBRAND: Thank you, Your Honor. May it please
10 the Court. The defense would call General Joe VanLier to
11 the stand.

12 THE COURT: Very well.

13 Thereupon,

14 GENERAL JOE VANLIER

15 after having been first duly sworn, testified as follows,

16 THE CLERK: Please have a seat. Once you're seated,
17 state your full name spelling your last please.

18 DIRECT EXAMINATION

19 BY MR. LYBRAND:

20 Q. State your full name for the record, please.

21 A. My full name is General VanLier.

22 Q. Mr. VanLier, good morning. You're the defendant in
23 this case. Let me ask you some questions please, sir. Where
24 do you live?

25 A. I live in Lawrenceville, Georgia.

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 Q. How long have you lived there?

2 A. About 23 years.

3 Q. All right, sir. And what do you do for a living,

4 Mr. VanLier?

5 A. I drive a WastePro Recycling Company, residential
6 recycling.

7 Q. All right. You're a truck driver?

8 A. Yes, sir.

9 Q. How long have you done that?

10 A. Driving trucks?

11 Q. Yes, sir.

12 A. About 30 years.

13 Q. All right, sir. And how long have you worked for
14 your current employer?

15 A. I worked for this one here for eight years.

16 Q. All right, sir. Now, are you married, single? Do
17 you have children?

18 A. Divorced.

19 Q. Divorced. Okay. All right. Mr. VanLier, let me
20 turn your attention back to February 22, 2015, almost seven
21 years ago. Were you involved in a traffic accident here in
22 Lexington County that day with Mr. Klotz?

23 A. Yes, sir.

24 Q. All right. And you were living in Georgia. What
25 brought you to be in South Carolina that afternoon? Where had

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 you been and where were you going to?

2 A. I come to see a friend I hadn't seen in a while,
3 found out he was sick and I come up to visit him because he
4 used to work with me.

5 Q. All right. Where does that friend live?

6 A. He lives up here in, I think, I can't remember the
7 address, but he lives up here in South Carolina must be
8 towards Myrtle Beach, towards that way.

9 Q. All right. And had you visited your friend
10 already?

11 A. Yes, sir.

12 Q. All right. And were you driving that day alone or
13 was anyone with you?

14 A. I was driving by myself.

15 Q. And what kind of vehicle were you driving?

16 A. I was driving a Ram Dodge.

17 Q. And was that your personal vehicle?

18 A. Yes, sir.

19 Q. How long had you owned that vehicle?

20 A. A couple of years.

21 Q. And while -- So a couple of years before the
22 accident with Mr. Klotz you had had that vehicle; is that
23 right?

24 A. Yes, sir.

25 Q. Now, during the time you had owned that vehicle for

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 a couple years, had you ever had any mechanical problems with
2 it?

3 A. No, sir.

4 Q. Anything, did you have to do any repairs to it other
5 than regular maintenance like oil change, tire rotation,
6 anything like that?

7 A. No, sir.

8 Q. Had you ever experienced any problems with it
9 steering or stopping, turning, braking, anything like that
10 before the day of the accident?

11 A. No, sir.

12 Q. Now, you were traveling, I believe, westbound on
13 Interstate 20; is that correct?

14 A. Yes, sir.

15 Q. And this was a Sunday afternoon and you were headed
16 home?

17 A. Yes, sir.

18 Q. Would this be the route you would have traveled to
19 get home that day?

20 A. Yes, sir.

21 Q. And had you traveled up and down Interstate 20
22 before the day of the accident?

23 A. No, sir.

24 Q. All right. And at the time of the accident was it
25 daylight or was it dark yet?

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 A. It was daylight.

2 Q. All right. And you were alone in your truck?

3 A. Yes, sir.

4 Q. All right. At the place where the accident happened
5 on Interstate 20, how many lanes, westbound lanes were
6 there?

7 A. Two lanes.

8 Q. All right. Let's call the lane closest to the
9 shoulder of the road the outside lane, okay? And the lane
10 closest to the median or the center of the road the inside
11 lane, okay?

12 A. Okay.

13 Q. Which of the two lanes westbound were you traveling
14 in?

15 A. I was in the center lane. I think that would be the
16 outer.

17 Q. Closest to the median --

18 A. Right.

19 Q. -- or closest to the shoulder?

20 A. Closest to the median.

21 Q. All right. So you were on the inside of the two
22 lanes?

23 A. Yes, sir.

24 Q. And take us back and tell us what you remember about
25 the accident. You're traveling in that inside lane. Just

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 tell the members of the jury what you remember happening, what
2 occurred and what happened afterward?

3 A. Well, I remember coming down the road and this other
4 vehicle was in the lane closest to the shoulder so I had got
5 in the fast lane. I noticed we was going the same speed. I
6 noticed my truck was like pulling to the side where he was and
7 I tried to steer it, I tried to steer it away from his car to
8 keep from hitting his car, but as I was steering the car, I
9 was trying to hit my brakes to slow up. I had no brakes, so
10 my truck was just running, just running down the road. I'm
11 trying to keep it in the road. I'm trying to keep it, it's
12 just going all over the road. I'm just trying to keep it in
13 the road. It came to rest after hitting the steel gates after
14 leaving the highway. There was a steel gate there and the
15 trunk hit the steel gate. That was the only way it stopped.

16 Q. All right. Let me back up a minute. You're in the
17 process of passing, going by Mr. Klotz; is that correct?

18 A. Yes, sir.

19 Q. And you feel a sensation of your rear end of your
20 truck drifting towards his vehicle; is that right?

21 A. Yes, sir.

22 Q. And at that point did you have any control over your
23 truck other than steering or anything?

24 A. The only control I had is when I tried to steer it
25 from keeping it from hitting his car and that was it. I tried

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 to steer it because I was too close. I seen his - my truck
2 was moving too close to him. I tried not to hit him so when I
3 moved over and tried to stop, I had no brakes. I kept
4 pumping. I had no brakes. The truck was just running because
5 we was running about 65 miles an hour anyway and the truck was
6 just running.

7 Q. All right. And so at some point your vehicle made
8 contact with the side or the side rear of his vehicle,
9 correct?

10 A. I believe so.

11 Q. All right. And you continued on down the
12 interstate?

13 A. Yes, sir.

14 Q. Did you have any brakes?

15 A. No brakes, just running.

16 Q. Okay. And I think you said you went on down the
17 road and you talked about hitting a gate. Do you mean the
18 guardrail in the center of the median? Is that what you
19 mean?

20 A. The guardrail on the outside to keep you from
21 leaving the road, not in the center, but it's like when you
22 trying to leave the road on that side, the truck jumped and
23 tried to leave the road, but the gate stopped it and it
24 bounced back.

25 Q. Okay. And what - did your vehicle then come to

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 rest?

2 A. Yes. It did.

3 Q. When your vehicle came to rest, what did you do?

4 What happened?

5 A. Well, the first thing I did, I looked up and I seen
6 traffic had stopped, trucks and everything had stopped, so it
7 scared me, so I said I got to move my vehicle out of the road.
8 So I tried to move, (indicating). So I said I need to find
9 out what's going on. So I got out of my truck and I walked
10 around. When I walked around, I noticed the right wheel
11 wasn't there. The axle and everything was gone. There was
12 nothing there. So I'm starting, I'm starting to see where did
13 it go. I'm looking for it, right? And I see it down in the
14 woods. So I go down in the woods and I get it and I rolled it
15 back up and put it inside the back of the truck.

16 Q. And is that where your truck remained?

17 A. Yes, sir.

18 Q. All right. And did you stay there until the Trooper
19 Antley who testified yesterday came and interviewed and talked
20 to you?

21 A. Yes, sir.

22 Q. Okay. Let me show you, Mr. VanLier, what's
23 previously been, let me show you what's been pre-marked as
24 Defendant's Exhibits 1, 2 and 5. Let me get you to look at
25 those and before you say anything, do you recognize what is

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 shown on those three photos?

2 A. Yes, sir.

3 Q. All right. And what is exhibit 1 and 2, what do
4 they show?

5 A. Number 1 shows my truck. I had picked the wheel up
6 and put it in the back of the truck.

7 Q. What does exhibit 2 show?

8 A. Exhibit 2 shows where the wheel axle had broke off
9 the truck.

10 Q. All right, sir. And what about exhibit, what is
11 that, exhibit 6 or 7?

12 A. Exhibit 5. This is what it looked like.

13 MR. LYBRAND: Your Honor, I would move these into
14 evidence.

15 THE COURT: Which numbers are those?

16 MR. LYBRAND: This is Defendant's Exhibit 1, 2 and
17 5.

18 THE COURT: Okay. Those are the ones we talked
19 about I believe. Yes. All right.

20 MR. LYBRAND: I think those are without objection.

21 MR. KLOTZ: No objection.

22 THE COURT: Defendant's Exhibit 1, 2, and 5 are
23 admitted into evidence without objection.

24 BY MR. LYBRAND:

25 Q. Mr. VanLier, were you hurt in the accident? Were

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GENERAL VANLIER - DIRECT BY MR. LYBRAND

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1 you injured?

2 A. No, sir. Just shaken up.

3 Q. The officer who testified yesterday, Trooper Antley,
4 were you at the scene still with your truck when he arrived at
5 the scene?

6 A. Yes, sir.

7 Q. Did you talk with him and give him an explanation
8 as to what happened?

9 A. Yes, sir.

10 Q. Did you answer all of his questions?

11 A. Yes, sir.

12 Q. Did you answer them truthfully?

13 A. Yes, sir.

14 Q. And was your vehicle driveable from the scene?

15 A. No.

16 Q. So you weren't anywhere near Lawrenceville, Georgia,
17 but I think there is a photograph that shows a tow truck with
18 a roll back that's got your vehicle on it, correct, your
19 truck?

20 A. Yes, sir.

21 Q. Where was your truck towed to initially after the
22 accident?

23 A. It took it to Columbia, South Carolina.

24 Q. All right. And did you eventually get it from
25 Columbia back to Lawrenceville?

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GENERAL VANLIER - CROSS BY MR. KLOTZ

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1 A. Yes, sir. I paid to have it towed back.

2 Q. And where did you have it towed back to in
3 Lawrenceville?

4 A. Back to the dealership where I brought it from,
5 Hayes Dealership in Lawrenceville.

6 Q. Where you had purchased it about a year or two
7 before the accident?

8 A. Yes, sir.

9 Q. Okay. And, Mr. VanLier, was there anything you
10 could do once you felt your vehicle start to drifting and you
11 were starting to steer away, was there anything that you could
12 do in controlling your vehicle to avoid what had happened?

13 A. No, sir.

14 MR. LYBRAND: Thank you, Mr. VanLier. Answer any
15 questions that Mr. Klotz may have.

16 THE COURT: Mr. Klotz, you can cross examine this
17 witness.

18 CROSS EXAMINATION

19 BY MR. KLOTZ:

20 Q. Good morning, Mr. VanLier.

21 A. Good morning.

22 Q. You gave your name as General Grant VanLier?

23 A. General VanLier, sir.

24 Q. It's listed in the court filings as General Joe
25 VanLier. Is there some reason for the difference?

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GENERAL VANLIER - CROSS BY MR. KLOTZ

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1 A. I don't usually use the middle name because I have a
2 son named Joe and I have a brother named Jeff so I just say
3 General VanLier.

4 Q. Okay. But you haven't served in the military?

5 A. No, sir.

6 Q. It was more a historical reference for your name, I
7 guess.

8 A. My father's name was General.

9 Q. General.

10 A. Yes, sir.

11 Q. Now, you were driving without brakes so were you
12 still able to steer?

13 A. Well, when I was driving, I mean, the truck was just
14 going all over the road. I was trying to keep it in the road,
15 but it just, it was just going to where it wanted to go. If I
16 was able to steer, I wouldn't have hit that gate trying to
17 leave the highway.

18 Q. But you could make some corrections, some correction
19 in adjustment --

20 A. No.

21 Q. -- using the steering wheel?

22 A. I was trying to, but it was doing its own thing.

23 Q. Okay. Well, if you lost just one wheel, your front
24 wheels were able to turn, weren't they?

25 A. I was trying to turn it. Yes, sir.

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1 Q. Okay. So the steering wheel turned?

2 A. Yes, sir.

3 Q. Yeah. Okay. But the deviations caused by losing
4 one wheel you believe over powered your turning of the
5 steering wheel?

6 A. Yes, sir.

7 Q. Okay. Well, I guess the trooper yesterday testified
8 that we were both doing about 70 miles an hour so you were
9 continuing on down the road, let us say, at 70 miles an hour
10 with no brakes to slow you down. How long, or how long did
11 you continue on that way?

12 A. I don't know. I just, it was going and I really
13 can't tell because I was trying to stop the truck and like I
14 said, the only reason it stopped, it was trying to leave the
15 highway and it hit it real hard. Had I still been going
16 straight, I probably would have went further down the
17 highway.

18 Q. Okay. Now, when you saw yourself going towards my
19 car, did you try to blow your horn?

20 A. Well, you said towards your car?

21 Q. Right.

22 A. I figured I wouldn't have time because when I looked
23 and I had got so close to you, I felt the back pulling, I got
24 so close to you, I know I wasn't supposed to be that close, I
25 didn't have time. My reaction was to get away from your car,

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1 not hitting your car. That was my reaction, to pull away.

2 Q. Okay. As you continued on and you're saying the
3 rear of your truck struck my car; is that correct?

4 A. I believe so.

5 Q. And the front of the truck was pointed away from my
6 car. If the rear hit the car, then it would be necessary for
7 the front of the truck to be pointed away from my car, would
8 it not?

9 A. Yes, sir.

10 Q. So you were basically fishtailing as you went past
11 my car?

12 A. No. I wasn't fishtailing, sir.

13 Q. Well, for the back of your truck to hit my car that
14 would be like a fishtail. You weren't going straight. The
15 rear was going towards my car so your front would have had to
16 be pointed away, otherwise you'd be turned around.

17 A. I remember that I was going straight because I
18 looked over there and I seen a man in a car. I was going
19 straight, you know, we passing cars and sometimes I like to
20 look to see who we passed. So when I got up about even
21 with you, I looked and I noticed my car, my truck was too far
22 over coming toward your lane so what I did, I tried to steer
23 it away from your car to keep from hitting you and as I
24 steered away, I tried using my brakes. I was going to the
25 side. I didn't want to run off the median this way. That's

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1 when I noticed I didn't have no brakes. So the best thing for
2 me to do is try to keep it inside the road inside to keep from
3 going off.

4 Q. Were there other cars in that area besides mine?

5 A. No, sir, because nobody but me and you and the
6 highway when I seen it because if I had seen anybody in the
7 front, there could have been a bad accident because I couldn't
8 stop. I couldn't stop.

9 Q. But you would have blown the horn if you saw anyone
10 in front of you that you might have hit and warned them?

11 A. Sure. But that don't mean they would have got out
12 of the way. They might have stopped, you know.

13 Q. Now, you hit my side view mirror. Was that also
14 with the back of your truck or was the front of your truck
15 going along the side to hit that side view mirror?

16 A. I believe it had to be the back. I mean, I had to,
17 because I'm thinking if I had hit you in the front with the
18 front of my truck or the side, I would have felt it. I
19 believe I would have felt it.

20 Q. Now, it was the right rear wheel on your truck that
21 was missing, that came off?

22 A. Yes, sir.

23 Q. So that would cause you to veer to the right. If
24 your one rear wheel is turning propelling your truck and you
25 have no wheel on the right rear passenger side responding,

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1 then that propelling action on the rear would make your car in
2 the rear go faster than the right and that would drive you
3 veering to the right so you would expect the front of your
4 truck to strike before the rear, would you not, since you're
5 veering? And you veered into the barricade. You veered into
6 the guardrail. That was turning to the right. So it would be
7 inconsistent for the rear of the truck to strike the car
8 before the front of the truck.

9 MR. LYBRAND: Object to the form of the question,
10 Your Honor. It's argumentative.

11 THE COURT: It was a long question, but overruled,
12 if the witness understood the question. If not, Mr.
13 Klotz can ask it again.

14 MR. KLOTZ: I can rephrase.

15 THE COURT: That would be fine.

16 MR. KLOTZ: Okay.

17 THE COURT: Try to avoid a long question.

18 BY MR. KLOTZ:

19 Q. All right. I'm just asking if it's possible that
20 the front of your truck was the point of impact rather than
21 the rear since you expect to veer to the right?

22 A. Well, I don't remember it happening that way. All I
23 remember is I was going down the road and I seen because I
24 looked over there and seen you and I noticed my truck was too
25 close to your vehicle because I felt something and so I tried

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1 to steer it to the left to keep from hitting your car.

2 Q. Okay. When you saw you were too close, were you
3 looking in the rear view mirror?

4 A. I looked out the side. I looked out the side of my
5 truck. I can see your car over there.

6 Q. Okay. So you didn't see the actual positioning of
7 the rear of the truck, you just looked out the side of the car
8 and saw the whole truck was too close --

9 A. Right.

10 Q. -- is that correct?

11 A. To get over. Yes, sir.

12 Q. Okay. So you looked and you seen. I guess
13 yesterday Mr., your counsel in his opening statement said you
14 felt a wobble, a wobble and then you lost control. So is that
15 correct? Did you feel a wobble in your truck and then lose
16 control?

17 A. I felt something. I didn't know what it was, but I
18 noticed I was getting too close to your vehicle and I tried
19 not to hit it.

20 Q. That would have been an opportunity to try to blow
21 your horn, wouldn't it?

22 A. Well, like I say, it looked like I was too close to
23 you. My mind said move. It doesn't say blow the horn. It
24 said move to keep from hitting you because I might have blowed
25 the horn and it might have excited you and we might have

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1 collided.

2 Q. That's a lot to think in the urgency of the moment,
3 isn't it?

4 A. Sir?

5 Q. Well, in my situation I didn't stop to think about
6 anything particularly. I just responded.

7 A. Mm-hmm.

8 Q. And I would think in the urgency of the moment since
9 you were out of control you would have just responded and not
10 thought ahead to say, well, if I blow my horn, he might stop.
11 I don't think I would stop, but at least I would have been
12 alert and not caught sitting there by surprise, but that was
13 what you say so I take that as your answer. I can understand
14 there's a lot that can go through your mind in a split second.

15 Now, I estimated your distance that you traveled
16 down the road is about 2700 feet, about a quarter of a mile.
17 That would just be in a minute or so doing 70 miles an hour.
18 Would you think that would be about right, in just a few
19 minutes you traveled that far?

20 A. I don't have -- I don't have -- I don't know.

21 Q. You have no idea?

22 A. No idea, sir.

23 Q. When you hit the barricade at 2700 feet possibly
24 down the road, it wouldn't have been the barricade at the site
25 of the collision. It wouldn't have been that barricade

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1 necessarily because there were like two barricades on that
2 road. No other cars would have blocked you from hitting a
3 barricade further down the road. So you got out and you, when
4 I saw you, you had gotten out from the outside lane and your
5 wheel was there in the median grass in the grassy area and you
6 picked it up and you put it in the car so you waited with your
7 car there and I guess the other traffic as it got there would
8 have gone to the inside lane and gone past you; is that
9 right?

10 A. I don't remember no traffic moving. I was, you
11 know, all I remember is that when I got out of my car because
12 I couldn't move it and I seen the vehicles stopped on the side
13 of the road up the road, it frightened me because I said I
14 need to, because I figured they gonna come down and so I
15 couldn't move it. I couldn't move it. My car wouldn't move
16 so I got out to see what was wrong. I didn't know. So when I
17 got out, I looked, I went around and I know I had no wheel.
18 The thing had broke off. So I'm looking around. Where did my
19 wheel go? I'm looking. So I noticed it had ran off the road,
20 it had run off the road down there in the bushes so I went
21 down there and got it. Now, I don't know if the cars started
22 coming or what because the state trooper come down there and
23 he was trying to see, you know, if my car had hit your car.
24 He wanted to know what damaged your car. He was looking on
25 the side of my car and didn't see nothing.

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1 Q. So there were no damages to the side of your truck
2 then?

3 A. No.

4 Q. Yeah, there was a pretty good dent in the rear
5 fender of my Prius which would have been consistent with
6 getting a corner of the front of your truck to that, but you
7 had a pretty good bumper on the front, didn't you?

8 A. That's what hit the gate. That gate stopped it.

9 Q. That hit the gate. Yeah. Well, you were veering to
10 the right. Could it be possible that because of that heavy
11 fender you hit the rear corner in the Prius, but you didn't
12 realize it was the front?

13 A. Repeat the question, sir.

14 Q. Is it possible that you may have actually gone into
15 the rear corner, the back corner, made a fairly large dent and
16 then pulled away and then continued on?

17 A. Talking about of your car?

18 Q. Yeah. My car. Yeah. Could it have been damaged
19 from the front? Because there was no damage on your truck
20 from the rear. There was no damage on the side and you were
21 saying the rear hit my Prius, but there wasn't any damage.

22 A. So are you saying that, if I'm right, that you think
23 that I hit the back of your car and then spin off?

24 Q. That's what I would say. That's what I would think
25 consistent with the depth of the large dent. It had pushed

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1 the metal of my Prius into the tire and that would be more
2 consistent with a front end collision than just a rear-end
3 swipe.

4 A. I don't remember hitting it. I don't remember doing
5 that because if I had hit you, you would have spin around
6 faster in the road. All I remember, I was side by side
7 with you and when I looked over, I was getting too close and
8 my mind said move and that's when I tried to keep from hitting
9 you. I moved.

10 Q. Okay. So when you got down the road whatever
11 distance it was, you waited there with the truck and your
12 wheel in the back of the truck. You didn't try to walk back
13 down to the collision point, did you?

14 A. I didn't see you nowhere. I looked up the road.
15 All I seen was vehicles. I didn't see your car in sight
16 nowhere. I didn't know what had happened to you. I didn't
17 see you. I just seen a bunch of cars and trucks that
18 stopped.

19 Q. Well, you knew --

20 A. Because I looked up the road. I didn't see you.

21 Q. -- you had hit me, but you knew I was back there.
22 You didn't know, you couldn't see me you say?

23 A. I didn't know where you was. I didn't see you.

24 Q. Well, you know the traffic had pretty much stopped
25 after that collision so you should have had a clear view I

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1 would say and I was able to see you.

2 MR. LYBRAND: Objection, Your Honor.

3 Argumentative.

4 MR. KLOTZ: Argumentative.

5 THE COURT: Mr. Klotz, you can certainly ask
6 questions, but this is not for you to be able to argue
7 back and forth about where somebody was. Ask a question
8 and get a response, but you want to limit your arguing
9 with the witness, okay?

10 MR. KLOTZ: Okay. I'm just trying to refresh his
11 memory.

12 THE COURT: Okay. Well, feel free to ask questions
13 and go from there.

14 MR. KLOTZ: Okay. Very good.

15 BY MR. KLOTZ:

16 Q. Now, when you got the truck to your dealer, did he
17 indicate anything, was there any indication that it could be
18 repaired or some components could be fixed and the truck still
19 reused?

20 A. Uhm, you say could it be repaired?

21 Q. Yeah. Was there anything on it that could be
22 repaired?

23 A. Maybe. I don't know because they totaled it so...

24 Q. Right. And that's an economic decision to total it.
25 But the pictures that are in evidence were taken at the

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1 dealer. Was it the dealer that took the pictures or did
2 someone knowledgeable about repairing the truck or failure
3 take those pictures?

4 THE COURT: Mr. Klotz, before he answers that
5 question, can I speak with y'all just very briefly on
6 side.

7 (Side bar off the record.)

8 BY MR. KLOTZ:

9 Q. Okay. Well, I guess one last question, Mr. VanLier.
10 Were you aware that you've got a responsibility after a
11 collision like that to try to render aid to the other party?
12 Did you know that was a legal requirement?

13 MR. LYBRAND: Your Honor, I would object. That's
14 asking the witness to comment on the law which is within
15 the Court's purview. The Court will charge the jury what
16 legal responsibilities, if any, each party may have
17 had.

18 THE COURT: You can try to rephrase your question
19 another way, Mr. Klotz.

20 MR. KLOTZ: Okay.

21 BY MR. KLOTZ:

22 Q. Did you think in terms of the welfare of the person
23 in that white car that was struck, did you have welfare in
24 mind?

25 A. I don't understand your question.

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1 Q. Were you concerned, were you concerned after the
2 collision that you might have done some injury and maybe I
3 needed assistance or help?

4 A. Right. I did.

5 Q. But you were too far away and you didn't see where I
6 was, I guess, so that's why you didn't walk back down the
7 road?

8 A. I asked the state trooper was anybody hurt. He said
9 no.

10 Q. Okay. But it took -- Well, you called the trooper
11 right away, did you not? And you put in a 911 call you were
12 saying for the trooper to come? In other words, you called
13 the trooper?

14 A. Uhm, I don't -- I just -- I just don't remember. I
15 was concerned about the traffic and the trooper showed up. He
16 showed up. I can't remember if I called him or what. I was
17 hysterical at this time. I'm trying to think, you know. All
18 this happened. All shook up. I know the trooper, he came, so
19 I don't know if I called or somebody else called or what. I
20 was concerned about trying to move my vehicle out of the road.
21 I couldn't move it.

22 Q. Okay. Now, this was a 2008 Dodge Ram 1500, and I
23 think it was mentioned earlier that you had it for a year or
24 two so there were multiple owners before you bought it or at
25 least one. Did you have maintenance done on it any time after

1 you bought it?

2 A. I had it serviced all the time. Oil change and
3 stuff. It didn't need any other maintenance at the time that
4 I know of or the dealership would have told me because I took
5 it to the dealer every time I got the oil changed and stuff.

6 MR. KLOTZ: Okay. You did the oil change at the
7 dealer. Okay. Well, that will conclude my questions.
8 Thank you very much.

9 THE COURT: Any redirect?

10 MR. LYBRAND: No redirect, Your Honor.

11 THE COURT: All right. The witness may step down.
12 Thank you, sir.

13 MR. LYBRAND: Your Honor, the defense rests.

14 THE COURT: All right. Ladies and gentlemen, the
15 defendant has rested his case. I've got some matters to
16 take up with the attorney and Mr. Klotz at this time.
17 I'm gonna have you go down to your jury room, refresh
18 yourselves and we'll get you back up here shortly. Thank
19 you very much. Please don't discuss the case while
20 you're downstairs.

21 (Whereupon, the jury entered the jury room at 1:15
22 p.m.)

23 THE COURT: Okay. The defense has rested. Any
24 other motions? Renewing your previous ones?

25 MR. LYBRAND: Yes, sir. Those would be related to

1 our discussion's yesterday at the close of plaintiff's
2 case concerning the plaintiff's claims for certain
3 damages that are outlined in his complaint. I believe
4 those included claims of future medical expenses, future
5 general damages for whatever the complaint reads, lost
6 wages, things of that nature. There's been no evidence
7 presented by the plaintiff for any of those kind of
8 damages that are recoverable. We got into the issue of
9 punitive and we didn't see the word punitive in the
10 complaint so I assume that's not an issue for it, so we
11 would simply renew our motions that relate to future type
12 of damages that we discussed yesterday.

13 THE COURT: All right. I think I ruled on them, did
14 I not? Or did I hold off?

15 MR. LYBRAND: I think you indicated maybe that we
16 should address those at the conclusion of the entire
17 case.

18 THE COURT: Okay. As I recall, some of my rulings,
19 some of them I ruled on, but I just didn't hear any
20 testimony of future medical expenses. I believe Mr.
21 Klotz acknowledged that yesterday sitting at the table
22 and as far as future general damages those would be along
23 the same line. There will be a charge for damages
24 certainly that I'll read to the jury, but those will be
25 actual damages and property damages.

1 MR. KLOTZ: Well, I might have a comment regarding
2 punitives.

3 THE COURT: Sure.

4 MR. KLOTZ: As I understand it, normally, when I had
5 my accident 30 years ago, they would use a multiplier of
6 three. You multiply your medical costs by three and some
7 part of that was considered punitive damages. I spoke to
8 attorneys as I interviewed around and they told me that
9 conventional multiplier now is two so one half of the
10 multiplier would be considered punitive damage.

11 THE COURT: Okay. Well, let me start here.
12 Punitive damages were not pled for in the record. If
13 you're talking about multiplier which I don't think
14 there's a statutory or common law application of a
15 multiplier of damages, for actual damages here in this
16 courtroom. The jury may elect to award you something in
17 excess of what you ask for, if you ask for anything
18 specific, but there is no multiplier in play here. I'm
19 not trying to confuse you. I think I'm understanding
20 what you were told several years ago or while you were
21 interviewing attorneys prior to bringing the current
22 case, but I don't think they're speaking of matters of
23 law. They're thinking maybe in matters of strategy.
24 Does that sound -- Did you understand that the same way,
25 Mr. Lybrand?

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1 MR. LYBRAND: Possibly, Your Honor. The only
2 comment that I could make is it sounds like to me that
3 what Mr. Klotz may be referring to is how insurance
4 companies and claimants evaluate cases and try to put a
5 settlement value on them. I've heard and have been told
6 about multipliers, but that's something that is sort of
7 strategy in individual's, either individual's attorneys
8 or insurance companies on how they evaluate or put a
9 number to negotiate. That's certainly not a matter of
10 law and I think that that's as much as I can say about
11 what I've heard him just bring up.

12 THE COURT: Well, there's no multiplier to charge to
13 the jury. I'm sure of that so... I believe we discussed
14 reasonable attorney's fees which I don't think are
15 accounted for in a basic negligence cause of action and
16 there aren't any other causes of action other than
17 attorney's fees that are recoverable here, court costs
18 may be assessable depending upon the outcome of the jury
19 verdict. So those motions for directed verdict, I
20 already ruled on, the future medical expenses, future
21 general damages, and lost wages are granted. We figured
22 out the property damage matter yesterday so the next step
23 would be to come up with some jury charges to give to the
24 jury.

25 I have, we worked on a proposed draft yesterday so

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1 let me just look at it here. I'll give each of you a
2 copy of it, but I can tell you that it deals with, in
3 fact, 75 percent of it is stuff that we would say in just
4 about any jury trial as far as the duties of the Judge
5 and the jury, direct and circumstantial evidence, what is
6 not evidence. I have a paragraph about self represented
7 litigant just to ensure the jury either favors or
8 disfavors a party just because they choose to represent
9 themselves and that they have the absolute right to do it.

10 I have a paragraph about objections, the burden of
11 proof which is preponderance of evidence, a negligence
12 charge which deals with the elements of negligence and
13 proximate causation as well as damages. It's called
14 property damage motor vehicle which talks about
15 determining property damage, gives all the possibilities,
16 but it also gives the paragraph on what is here which
17 states that if repairing the vehicle would put it in as
18 good as condition before the accident, the measure of
19 damages would be the cost of repair plus any
20 depreciation, we got pre-existing condition, relationship
21 of the conditions to the accident, sympathy, and duty to
22 maintain the vehicle, common law charge of maintaining
23 the vehicle that is safe and not dangerous by reason of
24 mechanical defect, but because of some latent defect
25 unknown and the operator is not able to control the

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1 movement of his car, he's not negligent. He's not liable
2 for anything directly resulting from the sudden loss of
3 control. We need to print this out. Mr. Klotz, you had
4 testimony yesterday regarding pre-existing conditions and
5 how the defendant takes the plaintiff as they find him
6 regardless of whatever conditions you have. So I'll
7 print this out and let both of you review it.

8 MR. LYBRAND: Your Honor, do you have in there a
9 charge on sudden emergency?

10 THE COURT: The only thing, sudden emergency, it
11 talks about the negligence of another and maybe I need to
12 look at another charge than sudden emergency. I thought
13 the mechanical charge was on point. I thought it may be
14 confusing when I read it, but the answer is that I did
15 have it. I read it last night and this morning and
16 thought it makes reference to a party who's not
17 present.

18 MR. KLOTZ: It's a third party is what I've read for
19 emergency.

20 THE COURT: And maybe I've misapplied.

21 MR. LYBRAND: My understanding of the concept is
22 that if a person is, through no fault of their own,
23 placed in a situation of sudden and imminent danger or
24 peril, they act, their actions are to be judged in the
25 way any reasonable and prudent person's actions would be

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1 done given the same or similar situation. It doesn't
2 necessarily have to involve a third party.

3 THE COURT: Okay. Well, this is what I have. It
4 says, when the driver of an automobile is confronted with
5 a sudden peril brought about by the negligence of
6 another, it says, is not held to the exercise of the same
7 degree of care as when he has the time for reflection. A
8 person who by the negligence of another and not by his
9 own negligence is suddenly placed in an emergency and
10 compelled to act instantly to avoid a collision toward
11 injury is not guilty of negligence if he makes a choice
12 that a person of ordinary prudence placed in the same
13 position might make even though he did not make the
14 wisest choice. Persons who have to act in the face of
15 sudden and imminent imperil are not to be judged in light
16 of later events, but are to be judged on all the
17 circumstances which surround them at the time even though
18 it might outwardly appear the injury could have been
19 avoided if he persuade a different course provided the
20 defendant acted reasonably in light of the emergency.
21 That's the full charge. The only thing that made me step
22 back a little bit was the first sentence about the
23 negligence of another.

24 MR. LYBRAND: Right. And the case, my position
25 would be, and that may be a charge that's available, but

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1 the survey of cases that I have read indicate that sudden
2 emergency can develop, there are weather conditions or
3 highway conditions, not necessarily brought about by --

4 THE COURT: Could be by the negligence of another or
5 of sudden event. I mean, I understand your point. I
6 think that the charge is appropriate in this case. Maybe
7 the answer is just adding some more language to not
8 include negligence of another, but not disclude it
9 either.

10 MR. LYBRAND: Yes, sir. That's the point I'm trying
11 to make.

12 THE COURT: Okay. When the driver of an automobile
13 is confronted with a sudden peril be it brought about by
14 the negligence of another or not. I think that covers
15 both because the original way I read it, it kind of
16 creates some sort of question that we haven't answered
17 for them, but if it's one, it could be one or the other
18 and then they can just judge the whole thing in totality.

19 MR. LYBRAND: That's acceptable, Your Honor.

20 MR. KLOTZ: But are they not speaking of a peril
21 which indicates whether some other actor to have a peril?

22 THE COURT: I think now it covers both, Mr. Klotz.
23 It could be, the reality is both of you can use the
24 charge to argue in closing arguments, probably in
25 different arguments, but I think it's acceptable. We can

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1 add that in to mechanical failure. We'll print that out
2 back in the office, give each party a copy. So it's
3 10:30. My intent is to order some lunch. What is our
4 plan? Actually what time do we anticipate getting here?

5 THE CLERK: I was going to ask you what time you
6 wanted it here. 12?

7 THE COURT: Yeah.

8 THE CLERK: Okay.

9 THE COURT: Just to have food delivered here around
10 12 for the jury. Now, if we're still in closing
11 arguments, that's fine. They'll get it when they start
12 their deliberations. If they're already deliberating,
13 we'll just give them some food. For closing arguments
14 it's your opportunity to kind of make your argument about
15 the evidence that's in the case, but not make an argument
16 about things that are not in evidence because I instruct
17 the jury to disregard any argument that's not based on
18 evidence in the trial, and evidence is those documents
19 and pictures. You focus your argument around the
20 evidence that's been admitted. Does that make sense?

21 MR. KLOTZ: Well, yes, but that would include
22 testimony.

23 THE COURT: Well, sure. Testimony from the witness
24 stand and the documents and pictures entered into the
25 record. Yes. Are you basically prepared to move forward

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1 with your closing argument?

2 MR. KLOTZ: Yes, Your Honor.

3 THE COURT: Okay. You're essentially prepared to
4 move forward?

5 MR. LYBRAND: Yes, Your Honor. I just want to make
6 it clear and I think it probably has based on what your
7 comments were just now that the plaintiff is not allowed
8 to get into anything concerning injuries or damages that
9 you have ruled are not proper i.e., the only testimony
10 we've got is the medical bill and what he's testified to.
11 All of the other things that involve his doctors,
12 doctor's reports, heart problems, et cetera, none of that
13 is allowed to be argued by the plaintiff because it's not
14 in the record?

15 THE COURT: Right, with the exception of the ER
16 bill.

17 MR. LYBRAND: Yes, sir.

18 THE COURT: Anything after that would not be in the
19 record.

20 MR. KLOTZ: Well, I wanted to bring up, I guess, in
21 connection with that, I've got an ER record for the Tesla
22 collision that brought in the heart effects. That's
23 something I could have entered into the record.

24 THE COURT: Well, we didn't - we didn't - the only
25 record we put in was the ER record from the day after the

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1 collision in this case so there's nothing -- Now, you, I
2 know you, you did testify to some extent about the second
3 car wreck on cross examination, but as far as what any
4 doctors told you at that appointment I don't believe that
5 ever came into evidence.

6 MR. KLOTZ: Well, it's an ER so it wasn't really an
7 appointment. It was right after the collision.

8 THE COURT: I don't recall any testimony about,
9 other than you were involved in a second collision, I
10 don't recall testimony about medical treatment. Maybe
11 I'm -- Do you recall something different?

12 MR. LYBRAND: No, sir. I only recall that there
13 was, that he was involved in an accident while driving
14 one of his other vehicles, i.e., the Tesla. What I hear,
15 I think I'm hearing him saying is he's got an emergency
16 room record following another accident involving another
17 vehicle at some different point in time that he wants to
18 put in that contains information about his heart problems
19 or something that was mentioned in the record from
20 another accident.

21 First of all, that exhibit is not in the record. It
22 wasn't introduced and I think moreover it would violate
23 the Court's ruling earlier.

24 THE COURT: On the heart issues.

25 MR. LYBRAND: On the heart issues.

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1 THE COURT: I would encourage you to look through
2 the evidence, the documentary, the exhibits that are in
3 the record right now and you can even have them close to
4 you if you want to look at them during your closing
5 argument, but obviously the trooper testified, you
6 testified and the defendant testified and that's the
7 sworn testimony we have from this trial that you can rely
8 on for your closing argument as well.

9 MR. KLOTZ: Okay, Your Honor.

10 THE COURT: Ordinarily I try to ask the attorneys
11 how much time they expect they need for closing
12 arguments. If they're literally about the same amount of
13 time as your opening, I think that's fine, about 30
14 minutes for opening. You don't have to take that long
15 but...

16 MR. LYBRAND: Our argument won't be that long.

17 THE COURT: Yeah. Sure. Sure. I don't want to cut
18 anybody off, but if somebody thinks they're gonna need a
19 whole lot of time, I would like to know in advance.
20 We're gonna take a short break, get the jury charges
21 printed out. I also need to do a verdict form and I'll
22 show those to you momentarily. My practice is I give a
23 copy of the charge, the jury instructions to the jury to
24 take to the jury room just so they have the text of what
25 I've said in front of them because sometimes it's tough

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1 to remember everything I say at one time. So, all right.
2 We'll take a short recess here. I'll be back momentarily
3 with some documents.

4 (Short break.)

5 THE COURT: All right. I have handed copies of the
6 proposed jury charge to the parties. Anything,
7 Mr. Lybrand?

8 MR. LYBRAND: Nothing, your Honor.

9 THE COURT: Mr. Klotz, you've got a copy yourself?

10 MR. KLOTZ: Yes. I do.

11 THE COURT: Okay. That's what I'll read to the
12 jury. Anything before we bring up the jury?

13 MR. LYBRAND: Nothing from the defense, Your Honor.

14 THE COURT: Once I get the jury up here, Mr. Klotz,
15 are you ready to make your closing argument?

16 MR. KLOTZ: Yes. I am.

17 THE COURT: All right. Let's bring them up.

18 (Whereupon, the jury entered the courtroom at 11:00
19 a.m.)

20 THE COURT: All right. Ladies and gentlemen,
21 welcome back. The parties have presented their evidence
22 in this case. It's now time for the parties to make
23 their closing arguments. Now, the arguments in this case
24 from Mr. Klotz and Mr. Lybrand are not evidence in this
25 case. Their statements and arguments are meant to help

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1 you understand the evidence and apply the law to the
2 evidence. You should disregard any remarks, statement or
3 argument which is not supported by the evidence presented
4 during the trial or the law that I will explain to you
5 after the arguments. Now, at this time please give your
6 complete and undivided attention as you hear closing
7 arguments. Mr. Klotz.

8 MR. KLOTZ: Yes. Well, I would like by referral to
9 evidence to show that certainly the defendant,
10 Mr. VanLier, was negligent on a number of points and
11 there are a number of issues of credibility with the
12 testimony you've heard from Mr. VanLier today. The first
13 issue, Mr. VanLier has testified that the rear of his
14 truck was what struck and damaged the 2002 Prius, but
15 when you look at the evidence in place, there is a deep
16 dent here which, in fact, was sufficiently deep to cause
17 the rear wheel of the Prius to lock up from the metal
18 contacting the tire and there was no damage as
19 Mr. VanLier testified to the side of his truck
20 which would have happened you would think if his rear
21 contacted my Prius, so this evidence is consistent with a
22 frontal impact rather than a rear impact.

23 Now, Mr. VanLier has also testified that it was a
24 sudden loss of brakes, sudden loss of brakes that caused
25 him to careen wildly down the road completely out of

1 control. He did that for some distance because he was
2 going 70 miles an hour after the collision and he says he
3 was doing that without brakes, however, we see that the
4 wheel that was lost from his truck was with him at the
5 point at which he picked it up from the median next to
6 the outside lane and when I viewed that, the truck was
7 pointed towards Georgia, it was pointed westbound and
8 he's agreed that he had picked up the tire and put it in
9 the back of the truck. If he had lost the tire at the
10 time of collision, you would expect it to be there at the
11 point of collision.

12 I would argue that he lost the tire further on down
13 the road and that's what would have caused his loss of
14 brakes, but I would argue that he still had braking
15 functionality at the point of the collision. He didn't
16 lose his tire until he got all the way down the road. He
17 had steering. He testified he could move the steering
18 wheel. He did not immediately try to pull over at the
19 point of the collision. He did not blow his horn which
20 would have alerted me to move away or accelerate to avoid
21 the collision and it enhanced the whiplash type of injury
22 that would have resulted from a rear-end collision
23 because I was completely unaware that this was going to
24 happen. I had nothing to cause me to tense up and
25 prepare for a collision which enhanced my injury to my

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1 neck and shoulders as documented by ER medical report,
2 evidence of costs of which are in evidence. Photographs
3 of the accident area do not show Mr. VanLier's truck
4 having collided with a barricade at this point. We would
5 likely conclude that any barricade he collided with was a
6 good bit further on down the road.

7 Now, the trooper has testified that there was a
8 drive shaft failure, a drive shaft break, but in the
9 accident report the trooper referred to when he was on
10 the witness stand, the cause, the primary cause was
11 listed as the number 73 on the accident report which was
12 tires and wheel. So if Mr. VanLier lost his tire further
13 on down the road, there was no sudden emergency or reason
14 for him to lose brakes at the point of collision. We
15 don't know why he collided. There could be other
16 causative factors, maybe he was trying to pull into the
17 right hand lane and the sun was in his eyes. My wife and
18 I were driving from Matthews to Aiken just this weekend
19 and I looked up at that point of collision because I know
20 it quite well from the latitude and longitude and from an
21 overpass that's present there which was very close to
22 where Mr. VanLier picked up his tire and the sun was off
23 to the right up above the trees.

24 MR. LYBRAND: Your Honor, I object. This is
25 argument is not within the record and I would object to

1 that.

2 THE COURT: Please confine your closing argument to
3 the testimony at trial given from the witness stand or
4 documents enter into the record.

5 MR. KLOTZ: Very good. Well, I guess the evidence
6 at trial shows that there was no loss of the wheel there
7 at the point of impact and we don't know because there's
8 no evidence to support loss of wheel there, we don't know
9 what the cause of the collision was at that point, but we
10 know there was negligence and that no warning was
11 provided and that Mr. VanLier negligently continued on.
12 The trooper who testified did so based on the accident
13 report he filled out, but as far as using that as
14 evidence, his testimony based on that accident report,
15 there's a disclaimer on that report saying that the
16 contents --

17 MR. LYBRAND: Objection, Your Honor.

18 THE COURT: Mr. Klotz, the report itself is not in
19 evidence, the document.

20 MR. KLOTZ: I'm just referring to the testimony.

21 THE COURT: Let me ask you a quick question. I'm
22 sorry.

23 (Side bar off the record.)

24 MR. KLOTZ: So after discussion I would say that the
25 trooper testified, he testified as to mechanical details

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1 based on his having worked with cars in the past and no
2 actual evidence was presented to support the trooper's
3 testimony or his qualifications as a mechanic and
4 authority on car drives or car axles, any of that so that
5 could be disregarded.

6 So I think that the preponderance of the evidence is
7 that Mr. VanLier lost his wheel further on down the road.
8 At the time of the collision he had control of steering
9 and certainly control of his horn and he could have
10 prevented a great deal of the injury by responding more
11 rapidly and not proceeding through the collision. So
12 that would rest my argument so I will defer to defense
13 now for their argument.

14 THE COURT: Thank you, Mr. Klotz.

15 MR. LYBRAND: Thank you, Your Honor. May it please
16 the Court.

17 THE COURT: Yes, sir.

18 MR. LYBRAND: Ladies and gentlemen, thank you for
19 your attention to the case. I know you're disappointed
20 probably that you didn't see some high powered case like
21 you might see on the news reported on TV or something
22 like that because we all have most of our exposure based
23 on what we hear and read that's sensational and what have
24 you and to that extent I'm sure you're disappointed, but
25 let me say this in all seriousness, this is the, this

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1 case is important to my client, Mr. VanLier, because it's
2 his case and he has entrusted his fate in your hands.

3 Let me review with you some of what I believe the
4 evidence has shown and what the testimony has been that
5 has been presented to you.

6 Now, as Judge McLeod has told you and will charge
7 you again, what I tell you is not evidence, it's argument
8 and you can take it as argument. The same goes for Mr.
9 Klotz. The evidence in this case consists of what you
10 hear from the witness stand and any exhibits that you see
11 with you which you will have back in the jury room.

12 What I try to do is to summarize what I believe the
13 evidence has shown and during the course of my remarks
14 here if I should say something that a witness said on the
15 stand and you think you heard it differently than what I
16 say, then I apologize to you. You use your own
17 recollection and your own memory of what that witness
18 said. Don't take it from me. I try to take a lot of
19 notes and I try to pay particular attention to witnesses
20 when they testify so that I can fairly present a closing
21 argument to the jury on what witnesses said.

22 Now, fortunately in this case we only had three
23 witnesses so it's not one of these long trials with
24 dozens and dozens of witnesses and as I told you
25 yesterday, it's a simple case. It's not a complicated

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1 case. That doesn't diminish the fact that it's an
2 important case for my client.

3 Now, as the judge charged you yesterday and will
4 charge you later when we get through, the burden of proof
5 in this case is on the plaintiff. Anyone who brings a
6 lawsuit against another and comes into court, the person
7 who brings the lawsuit in this case, the plaintiff, has
8 the burden of proving the merits of his claim and he must
9 prove that through witnesses, through evidence that is
10 admissible and he must prove that by a preponderance of
11 the evidence, the greater weight of the evidence and one
12 of the things when we talk about weighing the evidence,
13 that's sort of mental exercise or a mental process that
14 one has to undergo.

15 Sometimes we in the law use the example of the old
16 merchant's set of scales where you would put an item on
17 one side and an item on the other side and the scale will
18 go one side or the other depending on the weight of the
19 objects on each side. That's sort of an illustration of
20 weighing evidence and if the evidence put on by the
21 plaintiff and then the evidence put on by the defendant
22 remain equally balanced, then the plaintiff hasn't met
23 his burden of proof. If the scale tips towards the
24 defendant, the plaintiff has not met his burden of proof
25 and your verdict according to the law must be for the

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1 defendant.

2 Now, I simply use that as an illustration about how
3 you are instructed to weigh evidence, but it's a mental
4 process that you have to undergo.

5 MR. KLOTZ: Objection. I think there was a
6 misstatement there. The scale tips towards the
7 plaintiff, that's the heavier side, is it not?

8 THE COURT: I will charge the jury on the burden of
9 proof. I didn't hear -- I think your objection is
10 overruled, but I will continue to listen to counsel.
11 Thank you.

12 MR. LYBRAND: Thank you, Your Honor. So what you as
13 jurors do because you didn't know anything about this
14 accident, you didn't know anything about either of these
15 people until yesterday and everything that you know about
16 the case you're being asked to decide is based on the
17 limited time you have had to be in the courtroom, observe
18 witnesses and listen to and consider the evidence that
19 has been presented. One of the things that Judge McLeod
20 will charge you is the credibility of the witnesses.
21 That simply means the believability of a witness.

22 You know, we run into people all time in our daily
23 lives that we know and you know the old expression, well,
24 if Joe or Steve tells me something, I can rely on that.
25 I can take that to the bank. Well, that's because you

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1 have had the opportunity and experience that in prior
2 dealings with this individual you can rely on as being
3 trustworthy, honest and credible. That's not what you
4 have here because you don't know these people so what you
5 have to do is look at their demeanor on the stand, how
6 they talk, how they speak, what they say. Do they appear
7 to be forthright. Do they appear to be telling you the
8 truth. Do they appear to be evasive or trying to hide
9 something from you. What is there ability to know
10 something of what they're telling you. That's all a part
11 of believability of a witness or credibility and that's
12 your job to size up each witness and put whatever weight
13 you deem appropriate on that witness' testimony.

14 Now, Mr. Klotz has testified about his version of
15 the accident. You've heard Mr. VanLier this morning
16 testify about his version of the accident. He'd been to
17 South Carolina to visit a friend. He's going home. He's
18 going down Interstate 20. He's driving his 2008 Dodge
19 truck that he's owned for a year or so. He's never had
20 any mechanical problems with it at all. He had no
21 forewarning that there was any problem with it and
22 suddenly as he's in the process of pulling beside Mr.
23 Klotz he feels his vehicle getting closer to the side of
24 Mr. Klotz's vehicle and he attempts to steer away and all
25 of a sudden he has no brakes and at some point during

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1 that maneuver the side rear of his vehicle had come in
2 contact with the side, the driver side portion of Mr.
3 Klotz's vehicle.

4 Now, he, as the trooper said, at that point he's got
5 no brakes and he's just as the trooper said he's along
6 for the ride, my client, and so whatever momentum he has
7 carries him for whatever distance down the road until his
8 vehicle comes to rest. Now, you will remember that the
9 trooper testified, and the trooper doesn't know anybody
10 involved in this case. He has no reason to favor or
11 disfavor one side or the other. He's simply out there
12 doing his job, a job he's done for 13 or 14 years. You
13 heard about his training and what he does and
14 coincidentally he's got practical experience in repairing
15 and dealing with cars. Not every trooper does, but in
16 this case he did, and you heard Mr. Klotz question the
17 trooper about it and the trooper obviously is very
18 knowledgeable about rear wheels, rear axles, brakes, all
19 of that information and he testified that what happened
20 was Mr. VanLier had experienced, his words, not mine, a
21 catastrophic failure that caused him to lose control of
22 his vehicle and caused it to do whatever it did and
23 follow whatever path it did down the roadway.

24 And you heard the trooper describe the wheel and the
25 axle and the axle shaft and the sheering and what have

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1 you. This was somebody who was at the scene, had the
2 knowledge of that type of mechanics and Mr. Klotz
3 attempted to get the trooper to say what he wanted him to
4 say and the trooper would always say, no, sir, that
5 wouldn't happen. At one point I think the trooper was
6 asked by Mr. Klotz, well, you didn't see the vehicle
7 until it was up on the roll back, up on the trailer.
8 That wouldn't give you as good a view and the trooper
9 said, actually that gave me a better view than me
10 stooping down and trying to look under the vehicle when I
11 was eye level or underneath I could see even more than I
12 would have been able to see had the vehicle been on the
13 ground.

14 MR. KLOTZ: Objection, Your Honor. Defense counsel
15 has no knowledge of my motivations in questioning the
16 trooper.

17 THE COURT: Overruled.

18 MR. LYBRAND: Thank you, Your Honor. So the trooper
19 with no axe to grind whatsoever told you how he saw it.
20 Mr. Klotz in his closing statement talked about a, the
21 trooper putting something down on his notes about the
22 wheel being defective or something of that nature.
23 You'll remember the testimony from the trooper was, well,
24 there was nothing on the report that led me to put axle
25 failure. I didn't have an option on my report for axle

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1 failure so I used the closest thing that I could check on
2 the box which was the wheel. Makes perfect sense.

3 So we've got a trooper who basically corroborates
4 what Mr. VanLier has indicated. There's no evidence
5 whatsoever that Mr. VanLier had any prior knowledge that
6 there was anything wrong with his vehicle and obviously
7 if he had known that he had some sort of serious defect
8 or problem that might cause an accident such as this, any
9 reasonable person wouldn't put their own life and their
10 own safety at risk on an interstate highway going 60 to
11 70 miles an hour if they knew they were driving a vehicle
12 that might cause an accident in which they might be
13 seriously injured or otherwise. That simply doesn't - he
14 certainly wouldn't put himself at risk in addition to not
15 putting other people at risk, and there's no evidence
16 that he had any prior forewarning that there was any
17 problems whatsoever with his vehicle.

18 Now, we've never blamed this accident on Mr. Klotz.
19 We've never said that Mr. Klotz caused or contributed to
20 this accident. That's never been our contention and it's
21 not our contention today. We don't fault or place any
22 blame for the cause of the accident on Mr. Klotz. What
23 we say is this, is that Mr. VanLier was driving a vehicle
24 that experienced a quote, by the officer, "catastrophic
25 failure" which left him no brakes, difficulty steering

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1 and he was along for the ride like the trooper said.

2 Now, you're going to hear Judge McLeod give you
3 charges. The basis of this case, the theory of the
4 plaintiff's case against my client was that Mr. VanLier
5 in some way was negligent. Negligence simply means
6 carelessness. It means doing something that a reasonable
7 person would not have done under those circumstances.

8 Our defenses in this case relate around two areas
9 called sudden emergency and sudden unavoidable accident,
10 sudden mechanical failure. These defenses are recognized
11 in the law. I'm not making them up and you will hear the
12 Judge charge you this and they make not only legal sense,
13 they make perfect common sense. And one of the charges
14 you will hear and again, you take your charge from the
15 Judge, not from me, but I think you will hear, you will
16 hear the charge that on a duty to maintain a vehicle that
17 if because of some latent defect, latent means something
18 that's hidden or not known by somebody, if because of
19 some latent defect unknown to the operator, he is not
20 able to control the movement of his car, he is not
21 negligent, and for that reason not liable for the
22 injuries directly resulting from such loss of control.
23 The injuries result from an unavoidable accident. And I
24 submit to you that's what we have here and this is not
25 something I have dreamed up. This is something that is

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1 the law of the state of South Carolina.

2 You will hear also the description of sudden
3 emergency and the Judge will say something along the
4 lines of when a driver of an automobile is confronted
5 with a sudden peril not brought about by his own conduct,
6 he is not held to exercise of the same degree of care as
7 he was had he had time for reflection. And he, if a
8 driver is compelled to act instantly to avoid a collision
9 or an injury he is not guilty of negligence. He's not
10 negligent if he makes a choice that a person of ordinary
11 reason and prudence placed in the same situation might
12 make even though he may not have made the wisest choice.
13 Persons who have to act in the face of sudden and
14 imminent peril are not to be judged in the light of later
15 events or to be judged under the circumstances with which
16 they were faced. That's common sense.

17 Obviously if we're driving down the road and
18 something occurs that is unknown to us over which we have
19 no control, we have to act as any reasonable prudent
20 person would have acted given the same circumstances and
21 yes, seven years later you might look back and try to
22 criticize what Mr. VanLier did or didn't do, but that's
23 the benefit of hindsight. That's the benefit of having
24 seven years to look back and see what was done or not
25 done.

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1 Mr. VanLier was forced to act within the moment. He
2 was forced to take action given the peril and the
3 emergency with which he was faced and the law simply says
4 that if he acted as any reasonable person would have
5 acted in the same situation, he is not guilty of
6 negligence. His actions must be based upon what a
7 reasonable and prudent person's actions would have been
8 if they were faced with sudden and imminent peril.

9 Ladies and gentlemen, I would suggest to you and urge to
10 you that the evidence in this case shows that Mr. VanLier
11 was not negligent and that he was faced as the trooper
12 found with a catastrophic mechanical failure that he had
13 no reason to know about until the time that it occurred.

14 Now, the only evidence of any injuries are that Mr.
15 Klotz had his vehicle repaired. You will have that
16 there. And that he had a visit the next day to the
17 emergency room and that's all the testimony in the case
18 about any injuries or damages that's in the record for
19 you to consider. Fortunately my client was not injured
20 in the accident. But what simply I would ask that you do
21 is to consider all the evidence and listen to the Judge's
22 charge and use your own common sense because as jurors
23 you don't leave your common sense at the door when you go
24 in the jury room. Use your own life experiences to view
25 this case. Let everybody have their say and do the right

1 thing, the correct thing based on the law and based on
2 the evidence in the case.

3 Mr. Klotz in his opening statement presented to you
4 his great intelligence. I don't doubt that at all. He's
5 a smart gentleman. He's in all these intelligence clubs
6 and Mensa and all these other things that you've seen.
7 He's a very well educated man, but I don't think it takes
8 simply that degree of education to understand what
9 happened in this case. Mr. Klotz had had three back
10 surgeries before this accident with my client had even
11 occurred.

12 So all we ask that you do is listen to the Judge's
13 charge. I'm gonna sit down. You probably say good. I'm
14 tired of listening to that lawyer. I'm ready for him to
15 sit down. That's understandable. My point in telling
16 you this is Mr. Klotz has an opportunity, if he so
17 wishes, to get up and respond to what I have just told
18 you. He gets two shots at you. I only get one so I have
19 to say everything that I think I need to tell you in this
20 one time so if he gets up and starts saying, oh, you
21 don't believe anything Mr. Lybrand says. He's trying to
22 confuse you. He's trying to distract you, whatever, I
23 don't get another chance to get up here and rebut, so
24 understand this is my one and only opportunity and
25 sometimes people remember the first thing they hear and

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1 they remember the last thing they hear and sometimes it's
2 the part in between that sometimes is lost. Well, we're
3 that part in between. He goes first, he goes last.
4 We're in between. Just try to remember some of the
5 points that we've tried to make. Go in the jury room and
6 do the right and correct and just thing. Thank you very
7 much.

8 THE COURT: Mr. Klotz, if you wish you can rebut
9 specific arguments made by Mr. Lybrand.

10 MR. KLOTZ: Thank you. Ladies and gentlemen, first
11 of all, Mr. Lybrand has just brought up my three back
12 surgeries 30 years ago they were. If you read the
13 charges as we have that the Judge is going to present to
14 you, prior surgeries, prior back injuries are not
15 relevant in assessing damages here. So that would be the
16 first item. The second item, I guess Mr. VanLier said
17 that I tried to get the trooper to say something. I
18 didn't do that. I asked the trooper what he knew for the
19 jury to evaluate. I have a high respect for our state
20 highway patrol. But I'm a professional engineer. I'm in
21 a position to evaluate things I think as well as the
22 state trooper who has worked on cars. We don't know what
23 training the state trooper had because that's not in
24 evidence. He doesn't present any course record of
25 training in cars. We have to take on faith what he's

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1 testified and the trooper got there at least 30 minutes
2 after the collision, so he wasn't able to see what
3 happened and he was called, we don't know who he was
4 called by. Mr. VanLier testified that he just showed up.
5 So we have no idea where that came from.

6 Perhaps -- Well, I'm not gonna speculate on it. I'm
7 sure other drivers were aware of the accident because it
8 was pretty heavy traffic there as shown in the photograph
9 here. You can see it's a large number of cars. And I
10 think I would have been a lot happier if I had some
11 warning or some interaction with Mr. VanLier, but he
12 never spoke to me. The crash was a complete surprise and
13 the element of surprise is a big factor in damages and
14 had a significant effect on my back and my shoulder
15 damages. So that would conclude my remarks relating to
16 that.

17 THE COURT: Thank you, Mr. Klotz. All right.
18 Members of the jury, does anybody need a break? Okay.
19 Members of the jury, it's now my duty as the trial Judge
20 to instruct you on the law applicable to this case and in
21 that regard it's your duty as jurors to accept and apply
22 the law as I now state it to you. Furthermore, it is
23 exclusive duty to decide all issues of fact in this case,
24 and to determine the effect, value, weight, and truth of
25 the evidence. All the parties have a right to expect

1 that you will carefully consider and evaluate the
2 evidence and apply the law of this case to it so that in
3 the end all parties will receive a fair and impartial
4 trial.

5 Now, during this trial you and I have separate
6 duties to perform. As the trial Judge it is my
7 responsibility to preside over this trial and rule upon
8 the admissibility of evidence offered during the trial.
9 In that regard you are to consider only the evidence
10 before you. Thus, you are to consider only the testimony
11 which has been presented from the witness stand together
12 with any exhibits admitted into the record of this case.

13 In this trial you are the sole and exclusive judge
14 of the facts. Do not infer that I have an opinion about
15 the facts in this case from anything I have said or done
16 during the course of this trial. In this regard, the law
17 simply does not permit me to have an opinion about the
18 facts. As jurors, it is your duty alone to determine the
19 effect, value, weight, and truth of the evidence
20 presented during the course of this trial.

21 Furthermore, it is your job as jurors to determine
22 the credibility or believability of the witnesses who
23 have testified in this case. You must evaluate the
24 evidence and determine which evidence convinces you of
25 its truth.

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1 In determining the believability of witnesses who
2 have testified in this case you may believe one witness
3 over many or many over one. You may believe a part of
4 the testimony of a witness and reject the remaining part.
5 You may believe the testimony of a witness in its
6 entirety or reject it in full. You may consider whether
7 the witness has an interest in the result of the trial,
8 whether the witness is prejudiced toward either party,
9 the opportunity for the witness to have seen the matters
10 and things about which the witness may testify, and the
11 way the witness acts on the witness stand.

12 Now, evidence may be direct or circumstantial.
13 Direct evidence is testimony by a witness about what the
14 witness personally saw, heard or did. Circumstantial
15 evidence is indirect evidence. In other words, it is
16 proof of one or more facts from which one can find
17 another fact. You may consider both direct and
18 circumstantial evidence equally.

19 Now, the following things are not evidence and you
20 must not consider them as evidence in deciding the facts
21 of the case. (1), statements and arguments of the
22 parties. Ordinarily I would say the attorneys, but that
23 would be Mr. Lybrand here and Mr. Klotz. Questions and
24 objections of the parties being Mr. Lybrand and Mr.
25 Klotz. Testimony that I instruct you to disregard.

1 While argument of counsel between the parties is a
2 beneficial part of every trial, you should remember that
3 the statements made by the parties are not evidence. In
4 presenting arguments, the parties and counsel often refer
5 to evidence. However, you should base your verdict on
6 the evidence as you remember it. Therefore, if there are
7 any conflicts between the recollection of counsel about
8 the evidence and your own recollection, you should rely
9 upon your understanding of the evidence.

10 Now, the plaintiff has decided to represent himself
11 in this trial and not use the services of an attorney.
12 He has a constitutional right to do that. His decision
13 has no bearing on the merits of this case and you are not
14 to consider this whatsoever. The only evidence to be
15 considered in this case comes from the witnesses who
16 testify under oath on the witness stand and from exhibits
17 that are admitted into evidence.

18 Now, attorneys are officers of the court. Attorneys
19 have the absolute right to bring matters to the attention
20 of the Court by way of objection. Do not inferentially,
21 or otherwise, become upset or disturbed by counsel by
22 virtue of an objection. Our trial procedure includes the
23 objection process as a means of control of evidence, in
24 other words, letting in proper evidence and keeping out
25 improper evidence. Counsel, by objecting, are simply

1 performing their role in the trial of the case. In that
2 regard the jury must not under any circumstances derive
3 any inference from any ruling made by the Court on
4 objections as to any opinion the Court may have on the
5 case.

6 Now, the burden of proof in this case is by a
7 preponderance of the evidence. A preponderance of the
8 evidence simply means the greater weight of the evidence.
9 It is evidence which as a whole shows that a fact sought
10 to be proved is more likely true than not true.

11 This can be illustrated by imagining a set of
12 scales. When the case begins, the scales are even.
13 After all the evidence has been presented, if the scales
14 remain even or if they tip slightly in favor of the
15 defendant, then the plaintiff has failed to meet the
16 burden of proof and would not be entitled to recovery in
17 this case. If, on the other hand, the scales tip even
18 slightly in favor of the plaintiff, the plaintiff will
19 have met the burden of proof and you should return a
20 verdict for the plaintiff.

21 The plaintiff claims that the defendant was
22 negligent and should compensate the plaintiff for the
23 injuries the plaintiff suffered as a result of the
24 defendant's negligence. A plaintiff's right of recovery
25 may not rest on the mere fact that an accident or injury

1 occurred. Instead, in order to prove that the defendant
2 was negligent, the plaintiff must prove by a
3 preponderance, or greater weight, of the evidence the
4 following things.

5 First, the plaintiff must prove by a preponderance,
6 or greater weight, of the evidence that the defendant
7 owed the plaintiff a duty of care. This is a question of
8 law that I decide, and in this case, there was a duty of
9 care.

10 Negligence means that a person has done something
11 that a reasonable person would not have done or has
12 failed to do something that a reasonable person would
13 have done in the same situation.

14 The plaintiff must also prove by a preponderance, or
15 greater weight, of the evidence that he suffered damages
16 as a result of the defendant's breach of duty. The
17 plaintiff must prove by a preponderance, or greater
18 weight, of the evidence that the damages were proximately
19 caused by the defendant's breach of duty. There is no
20 countervailing burden on the defendant to prove that his
21 negligence did not cause the plaintiff's injuries.

22 Proximate cause is something that produces a natural
23 chain of events which, in the end, brings about the
24 injury. It is the direct cause of the injury.

25 To prove that the defendant's negligence proximately

1 caused the plaintiff's injury, the plaintiff must first
2 prove causation in fact. This is proven by showing that
3 the injury would not have occurred but for the
4 defendant's negligence.

5 The plaintiff must also prove legal cause. Legal
6 cause is proven by showing that the injury was
7 foreseeable. This means that the injury occurred as a
8 natural and probable consequence of the defendant's
9 negligence. The plaintiff must prove that some injury
10 from the defendant's negligence was foreseeable, but does
11 not have to prove the particular injury that occurred was
12 foreseeable. However, the defendant cannot be held
13 responsible for things which could not be expected to
14 happen.

15 Proximate cause does not mean the only cause. The
16 defendant's act can be a proximate cause of the
17 plaintiff's injury if it was at least one of the direct,
18 concurring causes of the injury.

19 Damages. The plaintiff must prove the amount of
20 damages with a reasonable degree of certainty by a
21 preponderance of the evidence. Proof of the amount of
22 damages does not require absolute or mathematical
23 certainty, but it cannot be based upon a mere guess. The
24 existence, cause and amount of damage cannot be based
25 upon guess, conjecture, or speculation.

1 If you deem damages are appropriate, I charge you
2 that the law seeks to compensate for damage to the
3 person, or property of an individual, but it cannot and
4 does not undertake to compensate for mere hurt or
5 embarrassment alone.

6 The amount of damages to a motor vehicle is the
7 difference between the value of the vehicle immediately
8 before it was truck and the value of the vehicle
9 immediately after it was struck.

10 If repairing the vehicle would put it in as good a
11 condition as before the accident, then the measure of
12 damages would be the cost of repair plus any amount by
13 which the value of the vehicle was decreased due to its
14 involvement in a collision. This also called
15 depreciation.

16 If the vehicle cannot be repaired, the measure of
17 damages would be the value of the vehicle before it was
18 struck, minus any salvage value.

19 Now, the operator of a motor vehicle must act with
20 care and diligence to see that his vehicle is safe and
21 not dangerous by reason of mechanical effect, if because
22 of some latent defect, unknown to the operator he is not
23 able to control the movement of his car, he is not
24 negligent, and for that reason not liable for injuries
25 directly resulting from such a loss of control. The

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1 injuries result from an unavoidable accident.

2 When the driver of an automobile is confronted with
3 a sudden peril be it brought about by the negligence of
4 another or not, he is not held to the exercise of the
5 same degree of care as when he has time for reflection.
6 A person who, by the negligence of another and not by his
7 own negligence, is suddenly placed in an emergency and
8 compelled to act instantly to avoid a collision or an
9 injury is not guilty of negligence if he makes a choice
10 that a person of ordinary prudence placed in such a
11 position might make, even though he did not make the
12 wisest choice.

13 Persons who have to act in the face of sudden and
14 imminent peril are not to be judged in the light of later
15 events, but are to be judged under all the circumstances
16 which surround them at the time, even though it might
17 afterwards appear the injury could have been avoided if
18 he pursued a different course, provided the defendant
19 acted reasonably in light of the emergency.

20 Now, the mere fact that physical problems followed
21 an accident is not sufficient proof that the accident
22 complained of caused the physical problems; the plaintiff
23 must establish, by the preponderance of the evidence, a
24 natural and obvious relationship between the accident and
25 that the physical problems not merely followed the

1 accident but resulted from it.

2 Now, if you find that the plaintiff received an
3 injury as a result of the negligence of the defendant and
4 is entitled to recover for that injury, the fact that the
5 plaintiff had a pre-existing injury or condition would
6 not prevent the plaintiff from recovering. The defendant
7 is responsible for all ill effects which, considering the
8 plaintiff's condition of health when the plaintiff was
9 injured, naturally and necessarily follow the injury.
10 The defendant takes the plaintiff as the plaintiff is
11 found whether the plaintiff is in perfect health, in poor
12 health, or somewhere in between.

13 A defendant's liability is no way lessened or
14 affected because of the fact that the injury would not
15 have resulted or would not have been as serious or severe
16 had the plaintiff been in good health, or that the
17 injuries were aggravated or rendered more difficult to
18 cure by reason of the fact that the plaintiff was not in
19 good health. In other words, if the presence of a
20 pre-existing injury or condition aggravates and prolongs
21 the injury and increases the damages, the plaintiff
22 should be compensated for the increased or added damages.

23 Now, a verdict in this case cannot be based upon
24 sympathy, passion, prejudice or emotion, or some other
25 consideration not found in the evidence. I charge you

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1 that as jurors you must decide the issues involved in
2 this proceeding based solely upon the evidence which you
3 hear during the course of the trial. Your verdict must
4 be without bias and without prejudice to any party. You
5 cannot allow yourselves to be governed by sympathy, by
6 prejudice, by passion, by public opinion, or by some
7 other consideration not found in the evidence.

8 Let me say something about your deliberations.
9 Deliberation is defined as "careful consideration,
10 weighing up with a view to decision."

11 The genius of our jury system is it allows 12 good
12 men and women, from 12 different backgrounds, life
13 experiences, and perspectives to consider the evidence,
14 talk about it, and ultimately, reach a verdict.

15 We call them deliberations for a reason - You are to
16 consider the evidence in this case carefully and
17 deliberately - and discuss it in a calm, thorough, and
18 courteous manner.

19 Listen to the views of all your fellow jurors;
20 consider other people's points and points of view, and
21 talk through and discuss the evidence. And remember, if
22 you are doing something deliberately, you are not a big
23 hurry, and you should not be a big hurry here. This
24 case is very important to both sides, and this is their
25 only day in court.

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1 When you retire to the jury room, you should discuss
2 the case with your fellow jurors to reach an agreement if
3 you can do so. Your verdict must be unanimous.

4 Each of you must decide the case for yourself, but
5 you should do so only after you have impartially
6 considered all of the evidence, discussed it fully with
7 the other jurors, and listened to the views of your
8 fellow jurors.

9 Do not be afraid to change your opinion if the
10 discussion persuades you that you should. But do not
11 come to a decision simply because other jurors think it
12 is right.

13 Ladies and gentlemen, your verdict must be a
14 unanimous one. Madam Forelady, when the jury agrees on
15 the verdict, you will write the verdict on the verdict
16 form and sign your name as foreperson. Then knock on the
17 jury room door and inform the bailiff that you have
18 reached a verdict. At that time, we will receive you
19 back into the courtroom.

20 Now, I ask that you now return to your jury room but
21 do not begin deliberations until you are told by the
22 clerk or the bailiff to do so. There are some matters
23 which I need to discuss with the attorneys before you can
24 begin your deliberations. So at this time if you could
25 go back to your jury room but do not begin deliberations,

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1 do not discuss this case yet. I'll give you further
2 instructions shortly. Thank you.

3 (Whereupon, the jury entered the jury room at 12:00
4 p.m.)

5 THE COURT: Anything before we begin deliberations
6 and dismiss the alternate? Anything from counsel or the
7 parties?

8 MR. LYBRAND: None, Your Honor. Are you bringing
9 the jury back to explain the verdict form or are you just
10 going to send it in?

11 THE COURT: Ordinarily I just send in the verdict
12 form.

13 MR. LYBRAND: I think that's fine. I think it's
14 pretty simple.

15 THE COURT: Nobody has told me that they couldn't
16 understand it yet in trials I've used it, but no.

17 MR. LYBRAND: That's fine.

18 THE COURT: If we were in a big comparative case,
19 maybe, but I think it's okay.

20 MR. LYBRAND: We have nothing from the defendant,
21 Your Honor.

22 THE COURT: Mr. Klotz?

23 MR. KLOTZ: Yeah. Will the jury have access to the
24 exhibits?

25 THE COURT: Certainly. We will send all the

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1 exhibits back to the jury along with the verdict form and
2 a copy of the jury instructions. So anything else? I'm
3 gonna bring the alternate up here. So the next step, Mr.
4 Klotz, is to let the alternate go.

5 MR. KLOTZ: Okay.

6 THE COURT: We don't need them so and our alternate
7 was juror number, Ms. Anderson, juror number 5. Have her
8 brought up. Okay. And while we have a moment, you got
9 all of the documents and everything.

10 Okay. Ms. Anderson, you're our alternate and we've
11 reached the point we didn't lose anybody in the last 24
12 hours so we're gonna begin deliberations, but I have to
13 dismiss you before they begin those deliberations. So
14 thank you for your service. Thank you for paying
15 attention throughout the trial. I hope you had an okay
16 experience on jury duty. You're certainly welcome to
17 stay as long as you like, but you're free to go if you
18 like as well. Thank you on behalf of all of us. Thank
19 you for your service.

20 MS. ANDERSON: Thank you.

21 THE COURT: All right. Mr. court reporter,
22 exhibits.

23 (Whereupon, jury deliberations began at 12:05 p.m.)

24 (Deliberations break.)

25 BAILIFF: Court is back in session.

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1 THE COURT: Thank you. Please be seated. Okay.
2 I'm informed we have a verdict. Anything before we bring
3 the jury up?

4 MR. LYBRAND: Nothing from us, Your Honor.

5 THE COURT: All right. Let's bring them up.

6 (Whereupon, the jury entered the courtroom at 1:10
7 p.m.)

8 THE COURT: All right. Madam Forelady, it's my
9 understanding you have reached verdict; is that correct?

10 FORELADY: Yes, sir.

11 THE COURT: Is your verdict unanimous?

12 FORELADY: Yes, sir.

13 THE COURT: Please hand it to the bailiff.

14 FORELADY: (Complies.)

15 THE COURT: Madam clerk.

16 THE CLERK: 2020-CP-32-01461, William Klotz versus
17 General Joe VanLier, did you, the jury, find that the
18 defendant was negligent. The box for no is checked. It
19 is signed and dated by the foreperson of the jury.

20 THE COURT: All right. Mr. Lybrand, anything for
21 the jury before they're dismissed?

22 MR. LYBRAND: No, Your Honor.

23 THE COURT: Mr. Klotz, anything for the jury before
24 they're dismissed?

25 MR. KLOTZ: No, Your Honor.

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1 THE COURT: All right. Thank you. Ladies and
2 gentlemen, thank you go for rendering public service here
3 the last two days. Appreciate your time being here and
4 paying attention throughout this trial. I hope serving
5 on jury duty was a good experience for you. Hopefully
6 we'll see you back here in three years to serve again.
7 If you get summoned before then, you can still come back
8 sooner. Anyway. Y'all have nice day. You're free to
9 talk about the case now and I thank you for your work
10 this week.

11 (Whereupon, the jury was released from further jury
12 duty at 3:15 p.m.)

13 THE COURT: Okay. Any post trial motions before we
14 adjourn?

15 MR. LYBRAND: None from the defendant, Your Honor.

16 THE COURT: Anything from the plaintiff?

17 MR. KLOTZ: Beg your pardon.

18 THE COURT: Anything else from the plaintiff? Any
19 post trial motions from the plaintiff?

20 MR. KLOTZ: No.

21 THE COURT: All right. Well, we will adjourn. It
22 was nice working with you the last two days. Best of
23 luck to you in the future, Mr. Klotz. Nice seeing you,
24 Mr. VanLier and Mr. Lybrand. Court's adjourned.

25 WHEREUPON, THE TRIAL WAS CONCLUDED.

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1 CERTIFICATE OF REPORTER

2 (STATE OF SOUTH CAROLINA)

3 (COUNTY OF LEXINGTON)

4

5 I, THE UNDERSIGNED, Steven E. LeBlanc, Sr., R.P.R.,
6 and Official Circuit Court Reporter for the Eleventh Judicial
7 Circuit in and for the State of South Carolina, do hereby
8 certify that I reported the proceedings in the before
9 captioned case in the Court of Common Pleas in and for the
10 State of South Carolina on the 14th and 15th day of February,
11 2022.

12 I FURTHER CERTIFY that the forgoing 240 pages
13 constitute a true and accurate record of said proceedings.

14 I FURTHER CERTIFY that I am neither related, counsel
15 to, nor of interest to any party hereto.

16 IN WITNESS WHEREOF, I have hereunto set my hand at
17 Lexington County, this 22nd day of July, 2022.

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By:s/Steven E. LeBlanc

Steven E. LeBlanc, Sr., R.P.R.
Eleventh Circuit Court Reporter
State of South Carolina.

Steven E. LeBlanc, R.P.R., Circuit Court Reporter
P.O. Box 184, Lexington, South Carolina 29071

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STATE OF SOUTH CAROLINA,	)	
	)	
COUNTY OF LEXINGTON	)	IN THE COURT OF COMMON PLEAS
	)	CASE NO. 2018-CP-32-00527
	)	
WILLIAM KLOTZ,	)	
	)	
Plaintiff,	)	
	)	
vs.	)	
	)	PLAINTIFF'S RESPONSE TO DEFENDANT'S
	)	FIRST INTERROGATORIES
GENERAL JOE VANLIER,	)	
	)	
	)	
	)	
	)	
Defendants.	)	

COMES NOW, William Klotz, Plaintiff, in the above-styled Civil Action, and files these Answers/Responses to Defendant's Interrogatories as follows:

NOTE A: The information supplied in these answers is not based solely on the knowledge of the executing party but includes knowledge of the party, his/her agents, representatives and attorneys, unless privileged.

NOTE B: The word usage and sentence structure may be that of the attorneys assisting in the preparation of the answers and, thus, does not purport to be the precise language of the executing party.

Plaintiff generally objects to Defendant's Interrogatories to the extent that the same seek disclosure of facts or information prepared by Plaintiff or his/her representatives in anticipation of litigation or preparation for trial. Plaintiff further objects to the extent that these Interrogatories seek disclosure of information protected by the attorney-client privilege and the attorney work-product doctrine. Plaintiff objects to any obligation to supplement his/her responses to Defendant's Interrogatories other than the requirements set forth in the South Carolina Rules of Civil Procedure, and to any requirements sought to be imposed on Plaintiff greater than those imposed by the same.

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1. Give the names and addresses of persons known to the parties or counsel to be witnesses concerning the facts of the case and indicate whether or not written or recorded statements have been taken from the witnesses and indicate who has possession of such statements.

Response: There are no witnesses that I am aware of other than myself and the Defendant.

2. Set forth a list of photographs, plats, sketches or other prepared documents in possession of the party that relate to the claim or defense in the case.

Response: The MVA report with diagram (W. KLOTZ 000001 -000003) is attached.

3. In cases involving personal injury set forth the names and addresses of all physicians who have treated the party and all hospitals to which the party has been committed in connection with said injuries and also set forth a statement of all medical costs involved.

Response:

Aiken Regional Medical Center, Dr. Suzanne Echemendia-Wirth, 302 University Parkway, Aiken, SC 29801; \$6,911.00

Carolina Chiropractic of Aiken, Dr. Lynsey Beheler, 673 Silver Bluff Road, Aiken, South Carolina 29803; \$830.00

Carolina Radiological Associates (for Treatment at Aiken Regional Medical center), 302 University Parkway, Aiken, SC 29801; \$460.00

Mecklenburg Medical Group, Dr. Daniel Aquino, 332 N. Trade Street, Suite 2000, Matthews, North Carolina 28105-1728; Waiting for bill.

Sanger Heart & Vascular Institute-Charlotte, Dr. Rohit Mehta, 1001 Blythe Blvd., Charlotte, NC 28203; Waiting for bill.

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4. Set forth the names and addresses of all insurance companies which have liability insurance coverage relating to the claim and set forth the number or numbers of the policies involved and the amount or amounts of liability coverage provided in each policy.

Response: State Farm, P.O. Box 106171, Atlanta, Georgia 30348, Policy No. 044-7961-D150-111, \$250,00.000 in liability coverage.

5. Set forth an itemized statement of all damages, exclusive of pain and suffering, claimed to have been sustained by the party.

Response:

Aiken Regional Medical Center	\$6,911.00
Aiken Physicians Services	\$790.00
Carolina Chiropractic of Aiken	\$830.00
Carolina Radiological Associates	\$460.00
Mecklenburg Medical Group	Waiting for bill

I reserve the right to supplement this response as additional documents are received.

6. List the names and addresses of any expert witnesses whom the party proposes to use as a witness at the trial of the case.

Response: Officer A.L. Antley (Badge No. T780) of the South Carolina Department of Public Safety; Dr. Suzanne Echemendia-Wirth, treating physician at Aiken Regional Medical Center, 302 University Parkway, Aiken, SC 29801; Carolina Chiropractic of Aiken, Dr. Lynsey Beheler, 673 Silver Bluff Road, Aiken, South Carolina 29803; Dr. Daniel Aquino, Mecklenburg Medical Group, 332 N. Trade Street, Suite 2000, Matthews, North Carolina 28105-1728; Dr. Rohit Mehta, Sanger Heart & Vascular Institute-Charlotte, 1001 Blythe Blvd., Charlotte, NC 28203.

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7. For each person known to the parties or counsel to be witness concerning the facts of the case, set forth either a summary sufficient to inform the other party of the important facts known to or observed by such witness, or provide a copy of any written or recorded statements taken from such witnesses.

Response: None at this time. I reserve the right to supplement this response if future witnesses become known to me.

8. Please list your social security number.

Response: xxx-xx-9103.

9. State where you had been just prior to the collision, where you were going at the time of the collision, and the purpose of the trip.

Response: I had been at my residence in Matthews, NC and was going to my residence in Aiken SC where I work, to begin my work week, driving south on I-20

10. If you had consumed any alcohol or drugs of any kind during the twelve hours prior to the accident, please give details.

Response: I had only consumed my prescription metformin in the 12 hours prior to the wreck.

11. Describe in detail what damage, if any, was done to your vehicle in the collision, and give the cost or repair of your vehicle.

Response: See attached Maaco invoice and repair invoice from Scott Clark's Toyota.

12. Please state in detail all injuries and damages you claim to have sustained as a result of the incident referred to in the Complaint.

Response:

Sprain of neck
Sprain of lumbar
Sacroiliitis
Sciatica
Stress-induced or "Takotsubo" cardiomyopathy

13. Please describe in full detail how the incident referred to in the Complaint occurred, giving all events in detail as they occurred including the exact location of the incident, and describing all event in detail in the order in which they occurred before, at the time of, or after the incident which had some bearing on the case and manner of the happening of the accident.

Response: I was driving near the speed limit in the right southbound lane of US 20 in my 2002 4-door Prius. A large pickup truck in the passing lane crashed at an angle into the driver side rear of my Prius which suffered severe impact, on February 22, 2015. The impact crushed the left rear and locked the left rear wheel so that the Prius veered across US 20 towards the trees in the median. I braked strongly and when I reached the median my tires dug into the mud with a sudden stop because it had rained previously. I was restrained by my seat belt. The driver continued on down US 20 for about 0.1 mi but was forced to stop when his left rear wheel came off. I observed him retrieve the wheel from the highway median. The police were called, and an ambulance was called from a nearby town, Gilbert SC. I declined ambulance transport to the town because I wanted to go to the USC ER in Aiken, not far away, which I did the next day. The police told me the driver told them his axle had broken.

14. If you received any medical treatment with respect to the injuries allegedly sustained:

- a) State the name and address of each hospital at which you were treated or admitted;
- b) State the dates on which said treatment was rendered, including the dates of entry into and discharge from said hospital or hospitals;
- c) State the name and address of each doctor or medical practitioner of any type whatsoever who has examined or treated you or conferred with you with respect to the injuries alleged; and
- d) Itemize the charges rendered by each of the hospitals listed above and the cost and expense of such examinations or treatments by the doctors or medical practitioners listed above.

Response:

(a) See response to Interrogatory number 3.

(b) Aiken Regional Medical Center – Admitted and discharged 02-23-2015

Carolina Chiropractic of Aiken – Treated from 06-10-2015 through 09-16-15

Mecklenburg Medical Group/Carolinas HealthCare System – Treated 05-15-15 to present.

(c) See response to Interrogatory number 3.

(d) See response to Interrogatory number 5.

15. If since the date of the incident referred to in the Complaint, you have been treated by or examined by or have conferred or consulted with any other doctor or medical practitioner of any type whatsoever for any reason whose name you have not heretofore supplied, state:

- a) The name and address of each doctor or medical practitioner of any type whatsoever who has examined, treated, conferred with or consulted with you and the dates of the same; and
- b) The condition for which such care or treatment or attention was rendered

Response: See response to Interrogatory Number 14.

16. Provide the name of each and every doctor, physician, chiropractor or other medical or health care provider whom the Plaintiff saw or was evaluated by in the ten years preceding the accident referred to in the Complaint. In that regard, list the physician's complete name, address and telephone number and provide the reasons or purposes for which the Plaintiff sought treatment or evaluation from the persons identified in this interrogatory.

Response: I object to this question in that it is overbroad, vague, overly burdensome. Subject to and without waiving this objection: Primary Care Physician Dr. Edward Knish (332 Sam Newell Rd., Matthews, NC 28105, 704-321-7500) can provide prior care details for the past 10 years but I do not recollect 10 years of past treatment

17. Prior to the accident referred to in the Complaint, state whether or not the Plaintiff had ever experienced any symptoms, injuries or other problems identical or similar to the injuries and physical problems Plaintiff sustained in the accident referred to in the Complaint. If the answer to this question is in the affirmative, please describe in detail the nature of said problems, the date or dates such problems occurred, the frequency and the nature of any treatment rendered or results of evaluations, the nature of any diagnostic testing with regard to said problems, and the names, addresses and telephone numbers of any physicians who rendered such treatment, care or evaluation.

Response: Over 25 years previous I had surgery for an automobile crash induced herniated disc which left me susceptible to future back injury, but do not have any details recollection or detailed records because of the long period of time involved. No identical or similar symptoms to the current have been experienced.

18. Prior to the accident referred to in the Complaint, state whether or not the Plaintiff had ever experienced any of the following problems:

- a) headaches;
- b) neck pain or discomfort;
- c) shoulder or arm problems;
- d) back pain or discomfort;
- e) leg, knee, ankle or foot problems or discomfort; and
- f) depression, anxiety, stress or other psychological problems.

If so, provide the names, addresses and telephone numbers of any medical doctors, chiropractors, therapists or other health care providers who had examined or rendered treatment or care to the Plaintiff for such problems, giving the approximate dates of such treatment.

Response: I object to this question in that it is overbroad, vague, overly burdensome. Subject to and without waiving this objection: No psychological problems have been experienced. Items a) to e) may have been experienced during my 67 years prior to the car crash, but I have no clear recollection or details of any of them.

19. In the five (5) years prior to the incident/accident referred to in the Complaint, identify all prescription drug or medication you took or prescriptions you had filled and identify the location (pharmacy, drug store, hospital, etc.) and address where such medication was filled.

Response: I object to this question in that it is overbroad, vague, overly burdensome. Subject to and without waiving this objection: Metformin and simvastatin, CVS Pharmacy at multiple addresses.

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20. If you claim the defendant or its agent(s) made any verbal or written statement after the accident which was against the interest of the defendant, please state the name and address of the person to whom such statement was made and the substance of the statement and whether it was written or oral. If it was a written statement, state the name and address of the person in custody of the original or any copy.

Response: I am not aware of any; therefore, I have none to provide at this time but I reserve the right to supplement.

21. If you are claiming loss of income in this action, please state:

- a) the amount of such lost income;
- b) your sources of income and the approximate amount you were receiving just prior to the time of the accident;
- c) whether you have returned to work since the accident, and if so, the date you returned to work and the salary you are now being paid; and
- d) all your current sources of income and the approximate amount you receive each month.

Response: No loss of income at this time but I reserve the right to supplement this response because loss may occur in the future because of stress cardiomyopathy resulting from the violence of the car crash and my advanced age.

22. State your date of birth, driver's license number, social security number, and what other names you have gone by during your lifetime.

Response: DOB: 09-08-1947; Driver's license number: 102388365; SSN: xxx-xx-9103; Other names: None.

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23. Describe any criminal record you may have, including the nature of the charge, date and place of arrest, and conviction if any.

Response: None.

24. Has Plaintiff been involved in any motor vehicle collisions before the date of the occurrence made the basis of this suit, and if so, give details as to where, when, how, with whom, whether a lawsuit resulting therefrom, and the style and number of the case and the court in which it was filed.

Response: About 25 years ago I sustained a herniated disc from a rear end collision and a lawsuit resulted but I do not have the requested details because of the considerable time that has elapsed.

25. List your employment history for the ten (10) years preceding the accident referred to in the Complaint. In that regard please list the following:

- a) Name, address, places and dates of employment;
- b) Job title, duties and description of each job;
- c) Method and rate of compensation for each job (hourly employee, salary);
- d. Name of immediate supervisor or boss for each job;
- e. Reason for changing jobs or leaving each position.

Response:

I worked for Shaw Areva Mox Services at the Savannah River Site, Aiken SC from 2007 to October 2010, then for Savannah River Nuclear Solutions at the Savannah River Site from November 2010 to present. Job change was for lack of work at Shaw Areva. In both positions I

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was/am a Nuclear Safety Engineer performing Safety calculations. Compensation ranged from \$120,000 annually salaried to current \$138,000 annually salaried. I had multiple immediate supervisors during this 10 year period most of whom are no longer with these companies.

24.(sic) For Plaintiffs give the cellular telephone number and carrier for any cell phone, smart phone or similar device used by the Plaintiffs on the day of the wreck?

Response: Cell: 704-249-8665 Verizon

25.(sic) At the time of the wreck, were Plaintiffs texting, text messaging, emailing or otherwise utilizing a cell phone, smart phone or similar device? If your answer is anything but an unqualified "no" explain in detail what the Defendant was doing.

Response: No.

26.(sic) List and describe each social media website and/or blog utilized by each Plaintiff including but not limited to Facebook, Myspace, Twitter, Pinterest, Google, Instagram, Linkedin and/or Reddit, and provide Defendant's user name to each such site.

Response: None at this time. Will supplement this response as needed.

Dated this 14th day of May 2018.



Marion Chace Hawk
South Carolina Bar #102046
Attorney for Plaintiff

338 Telfair Street
Augusta Ga 30901
chawk@vichawklaw.com

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STATE OF SOUTH CAROLINA,	)	
	)	
COUNTY OF LEXINGTON	)	IN THE COURT OF COMMON PLEAS
	)	CASE NO. 2018-CP-32-00527
	)	
WILLIAM KLOTZ,	)	
Plaintiff,	)	
	)	
vs.	)	
	)	
GENERAL JOE VANLIER,	)	
	)	
	)	
	)	
Defendants.	)	

1. All narrative medical or chiropractic reports, bills, hospital records, diagnostic tests, evaluations, or any other bills, reports or records relating to any alleged personal injury.

Response: At this time the only bills and records received are attached. I reserve the right to supplement additional documents as they are received. (W. KLOTZ 000004 - 000160)

2. All statements or any other written or printed documents concerning any claims for lost wages, income or for any other damages allegedly resulting from the incident as set forth in the Complaint.

Response: None.

3. All photographs, diagrams, drawings, or other similar material relating to the claims set forth in the Complaint.

Response: The MVA report with diagram (W. KLOTZ 000001-000003) is attached.

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4. All affidavits and statements of possible witnesses, whether written, oral, summarized, or otherwise reproduced in any manner, relating to the incident as set forth in the Complaint.

Response: None at this time. I reserve the right to supplement this response if any affidavits or statements are received.

5. All tax returns of the Plaintiff both Federal and State returns, for the three (3) years preceding the incident set forth in the Complaint as well as any returns made subsequent to I the incident set forth in the Complaint.

Response: I am not claiming lost wages but will supplement if needed.

6. All repair bills, estimates, reports, or other written or printed documents relating to any claimed damage to personal or real property.

Response: Maaco invoice and repair invoice from Scott Clark's Toyota (W. KLOTZ 000161-000173) attached as well as medical records and bills referred to in Response Number 1 of this Request to Produce (W. KLOTZ 000004-000160).

Dated this 14th day of May, 2018.



Marion Chace Hawk
South Carolina Bar #102046
Attorney for Plaintiff

338 Telfair Street
Augusta Ga 30901
chawk@vichawklaw.com

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STATE OF SOUTH CAROLINA,	)	
	)	
COUNTY OF LEXINGTON	)	IN THE COURT OF COMMON PLEAS
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vs.	)	
	)	
GENERAL JOE VANLIER,	)	
	)	
	)	
	)	
Defendants.	)	

CERTIFICATE OF SERVICE

The undersigned hereby certify that a copy of the Plaintiff's Response to Defendant's First Set of Interrogatories and Request for Production of Documents has been served upon:

McDONALD, McKENZIE, RUBIN, MILLER
AND LYBRAND, LLC
P.O. BOX 58
Columbia, SC 29202
Attorneys for Defendant

by depositing in the United States Mail this 14th day of May 2018, postage prepaid.


Marion Chace Hawk
South Carolina Bar #102046
Attorney for Plaintiff

338 Telfair Street
Augusta Ga 30901
chawk@vichawklaw.com

ORIGINAL

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SOUTH CAROLINA TRAFFIC COLLISION REPORT FORM										Page 1 of 1		SOUTH CAROLINA TRAFFIC COLLISION REPORT FORM		TR-310 (Rev. 11/2011)		# Of Units		Number of Copies of Original Report		Notified		Arrived					
Date: 02-22-2015										Time of Collision: 1 5 15		County: 32		1- Interstate 2- US Primary 3- SC Primary 4- Secondary 5- County 6- PP		Collision Location (Rt. # / Name): 5 20 / 120		1- Main Line 2- Alternate 3- Spur		6- Connection 7- Business		Miles: 4.78		Dir.: N E S W		In (Near) City or Town of: GILBERT	
Lane # / Dir.: 1 4 N E S W		Distance Off: 1.50 Feet		Direction: N E S W		1- Interstate 2- US Primary 3- SC Primary 4- Secondary 5- County 6- Other		Base Intersection (Rt. # / Name): 34 / POND BRANCH RD		1- Main Line 2- Alternate 3- Spur		6- Connection 7- Business		GPS COORDINATES (if available)		DEGREES MINUTES SECONDS		Latitude: 33 50 30.34		Longitude: 81 25 04.98							
R.R. Id.		From: N E S W		Ramp Only: 1- Entrance 2- Exit		To: N E S W		1- Interstate 2- US Primary 3- SC Primary 4- Secondary 5- County 6- Other		Second Intersection (Rt. # / Name): 178 / FAIRVIEW RD		1- Main Line 2- Alternate 3- Spur		6- Connection 7- Business													
E-700950										E-700951																	
Driver's Full Name: KLOTZ WILLIAM LEE										Driver's Full Name: VANLIER GENERAL JOE																	
Unit # 01 Sex M Race W Street 157 ASHEPOD DR										Unit # 02 Sex M Race B Street 491 PLANTATION BLVD																	
Birth Date: [REDACTED] City, State, & Zip: AIKEN SC 298038590										Birth Date: [REDACTED] City, State, & Zip: LAWRENCEVILLE GA 300466203																	
State: SC Driver's License #: 102388365 Class: D Insurance Company: ENCOMPASS										State: GA Driver's License #: 035650000 Class: A Insurance Company: STATE FARM																	
Year: 2002 Body: 4S Vehicle Make: TOYT VIN #: JT2BK18U820062533										Year: 2008 Body: PK Vehicle Make: DODG VIN #: 1D7HA16KX8J195065																	
State: NC Year: 2016 License Plate #: RTD2204 Owners D.L. #: NONE										State: GA Year: 2015 License Plate #: PER8801 Owners D.L. #: 035650000																	
Home Telephone: (704) 2498665 Owner's Full Name: KLOTZ LYNDIA BOGGS										Home Telephone: (770) 5002923 Owner's Full Name: VANLIER GENERAL JOE																	
Bus. Telephone: [REDACTED] Street: 115 CHESNEY GLEN DR										Bus. Telephone: [REDACTED] Street: 491 PLANTATION BLVD																	
Contributed To Collision: Yes (No) City, State, & Zip: MATTHEWS NC 281055809										Contributed To Collision: Yes (No) City, State, & Zip: LAWRENCEVILLE GA 300466203																	
Estimated Speed: 70 Speed Limit: 70 C.D.L. Req. Yes (No) T.O.S. Req. Yes (No) Acc./Drg. Info. (see back) Yes (No)										Estimated Speed: 70 Speed Limit: 70 C.D.L. Req. Yes (No) T.O.S. Req. Yes (No) Acc./Drg. Info. (see back) Yes (No)																	
Driver's Full Name: [REDACTED]										Driver's Full Name: [REDACTED]																	
Unit # 01 Sex M Race W Street [REDACTED]										Unit # 02 Sex M Race B Street [REDACTED]																	
Birth Date: [REDACTED] City, State, & Zip: [REDACTED]										Birth Date: [REDACTED] City, State, & Zip: [REDACTED]																	
State: [REDACTED] Driver's License #: [REDACTED] Class: [REDACTED] Insurance Company: [REDACTED]										State: [REDACTED] Driver's License #: [REDACTED] Class: [REDACTED] Insurance Company: [REDACTED]																	
Year: [REDACTED] Body: [REDACTED] Vehicle Make: [REDACTED] VIN #: [REDACTED]										Year: [REDACTED] Body: [REDACTED] Vehicle Make: [REDACTED] VIN #: [REDACTED]																	
Dir. Of Travel: Unit 1: N S E W Unit 2: N S E W Unit 3: N S E W										Dir. Of Travel: Unit 1: N S E W Unit 2: N S E W Unit 3: N S E W																	
Unit 1 Dam. \$ 3500 Unit 2 Dam. \$ 5000 Unit 3 Dam. \$ 750 Prop. Dam. 1 GUARDRAIL \$										Unit 1 Dam. \$ 3500 Unit 2 Dam. \$ 5000 Unit 3 Dam. \$ 750 Prop. Dam. 1 GUARDRAIL \$																	
Property Owner's Name: SCDOT Address: 955 PARK ST COLUMBIA State: SC Zip: 29201 Phone: 8037372314										Property Owner's Name: SCDOT Address: 955 PARK ST COLUMBIA State: SC Zip: 29201 Phone: 8037372314																	
Photo: Describe What Happened (Refer to Units by Number)										Photo: Describe What Happened (Refer to Units by Number)																	
Y (N)										Y (N)																	
Unit 1 and 2 were traveling west on I-20. The right rear axle broke on Unit 2 and caused the driver to lose control. The right side of Unit 2 sideswiped the left side of Unit 1. Unit 1 traveled off the left side of the roadway. Unit 2 traveled off the right side of the roadway and the front of Unit 1 struck the guardrail.										Unit 1 and 2 were traveling west on I-20. The right rear axle broke on Unit 2 and caused the driver to lose control. The right side of Unit 2 sideswiped the left side of Unit 1. Unit 1 traveled off the left side of the roadway. Unit 2 traveled off the right side of the roadway and the front of Unit 1 struck the guardrail.																	
NOTICE - THE TR-310 IS FOR STATISTICAL RECORDING PURPOSES ONLY AND IS A REFLECTION OF THE OFFICER'S BEST KNOWLEDGE, OPINION AND BELIEF COVERING THE COLLISION BUT NO WARRANTY IS MADE AS TO THE FACTUAL ACCURACY THEREOF.										NOTICE - THE TR-310 IS FOR STATISTICAL RECORDING PURPOSES ONLY AND IS A REFLECTION OF THE OFFICER'S BEST KNOWLEDGE, OPINION AND BELIEF COVERING THE COLLISION BUT NO WARRANTY IS MADE AS TO THE FACTUAL ACCURACY THEREOF.																	
Investigating Officer's Name: ANTLEY - AL Rank: LCPL Badge #: T 780 Jurisdiction Code: H P O 1 Review Date: 02-23-2015 Reviewer's Name: R D Martin Rank: Cpl Agency Code: 15B W039027										Investigating Officer's Name: ANTLEY - AL Rank: LCPL Badge #: T 780 Jurisdiction Code: H P O 1 Review Date: 02-23-2015 Reviewer's Name: R D Martin Rank: Cpl Agency Code: 15B W039027																	

W. KLOTZ 000001

Unit	Date of Birth	Sex	Race	NU	SA	RS	AS	EL	LA	LA	Name	Street Address	City	State	Zip Code																																																																																																																																																																																																				
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W. KLOTZ 000002

460

Form FR-10 to Office of Financial Responsibility (403-896-5000) PO Box 1459, Southwood, SC 29586-0459		SOUTH CAROLINA DEPARTMENT OF MOTOR VEHICLES NOTICE OF REQUIREMENT		South Carolina: Agents of Company Representatives can submit your insurance information at WFO SC-ALM-CCM	
Date 02-22-2015	Time 16:15	County 32 1-Primary 2-Secondary 3-County 4-Primary	Collision Location (R/S Name) #20 / I 20	Signaling 1-Primary 2-Alternate 3-Business 4-School	Address 4.78 In (City, State, & Zip) GILBERT
To Vehicle Operator: Failure to return this form to the Department of Motor Vehicles within 15 days from the date of the collision could result in the suspension of your driver license and registration privileges pursuant to South Carolina Code of Laws 56-9-351 and 56-10-530.					
E-700950 KLOTZ		WILLIAM LEE		E-700951 VANLIER	
01 H W Street 157 ASHEPOND DR		02 M R Street 491 PLANTATION BLVD			
City, State, & Zip AIKEN SC 298038590		City, State, & Zip LAWRENCEVILLE GA 300466203			
State SC		State GA		Insurance Company ENCOMPASS	
Year 2002		Year 2008		Vehicle Make BUICK	
Model 4S		Model PK		VIN 1G7HA16KX8J195085	
Year 2016		Year 2015		License Plate PER8891	
Home Telephone 704-2498665		Home Telephone 770-5007923		Owner's Full Name GENERAL JOE	
Owner's Full Name LYNDA BOGGS		Owner's Full Name VANLIER			
Street 115 CHESNEY GLEN DR		Street 491 PLANTATION BLVD			
City, State, & Zip MATTHEWS NC 281055899		City, State, & Zip LAWRENCEVILLE GA 300466203			
Contributed To Collision Yes					
Driver's Full Name					
State Year License Plate					
Business Telephone					
City, State, & Zip					
Contributed To Collision No					
Area Code Phone Number 770-922-084					
To be completed by Investigating Officer TODD SHAMBO 044 / 9 / 1 015 111					
Accident Location (City, State, & Zip) AIKEN SC 298038590					
Company Name ENCOMPASS					
Agency Name 381522514					
Automobile Liability Insurance Information					
Notice of Requirement Accepted					
To be Completed Before Filing: If the vehicle is insured by a company, the form should be completed before filing. If the vehicle is not insured, the form should be completed after filing.					
Reference to Court: Hereby affirm that to the best of my knowledge the vehicle owner above says insured by the above insurance company on the date of the collision.					
Insurance Company					
Policy Number					
Beginning Date					
Ending Date					
Policy Holder					
Notice: If liability insurance was not in effect for your vehicle involved in the collision, the Department of Motor Vehicles could suspend your driver license and registration privileges pursuant to South Carolina Code of Laws 56-9-351 and 56-10-530.					
If any of the below are applicable, Disregard the above portion.					
Form FR-10 Not Issued: Section 56-10-520					
Check here if the vehicle is insured by a company, the form should be completed before filing.					
Check here if the vehicle is not insured, the form should be completed after filing.					
Check here if the vehicle is insured by a company, the form should be completed before filing.					
Check here if the vehicle is not insured, the form should be completed after filing.					
Investigating Officer's Name ANTLEY - A L					
Rank L/CPL					
Badge # T780					
Unit HPO1					
Date					
Signature					
Internal Agency Code 158W049027					

W. KLOTZ 000003

Jan. 14, 2016 9:48AM PMD - PFS

No. 0097 P. 2/2



DEMAND CLAIM

HEALTH INSURANCE CLAIM FORM

APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

PICA BC02		PICA	
1. MEDICARE MEDICAID TRICARE CHAMPVA GROUP HEALTH PLAN FECA BLK LUNG OTHER (Medicare#) (Medicaid#) (ID#/DoD#) (Member ID#) (ID#)		1a. INSURED'S I.D. NUMBER (For Program in Item 1)	
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) KLOTZ WILLIAM		3. PATIENT'S BIRTH DATE SEX MM DD YY M F 09 08 1947 M X F	
5. PATIENT'S ADDRESS (No., Street) 115 CHESNEY GLEN DR		6. PATIENT RELATIONSHIP TO INSURED Self X Spouse Child Other	
CITY STATE MATTHEWS NC		7. INSURED'S ADDRESS (No., Street)	
ZIP CODE TELEPHONE (Include Area Code) 28105-5899 (704) 249-8665		CITY STATE	
8. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)		10. IS PATIENT'S CONDITION RELATED TO:	
a. OTHER INSURED'S POLICY OR GROUP NUMBER		a. EMPLOYMENT? (Current or Previous) ☐ YES ☒ NO	
d. RESERVED FOR NUCC USE		b. AUTO ACCIDENT? ☒ YES ☐ NO PLACE (State) LSC	
c. RESERVED FOR NUCC USE		c. OTHER ACCIDENT? ☐ YES ☒ NO	
d. INSURANCE PLAN NAME OR PROGRAM NAME		10d. CLAIM CODES (Designated by NUCC)	
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below. SIGNED SIGNATURE ON FILE DATE 02-23-2015		11. INSURED'S POLICY GROUP OR FECA NUMBER	
13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below. SIGNED SIGNATURE ON FILE		d. IS THERE ANOTHER HEALTH BENEFIT PLAN? ☒ YES ☐ NO If yes, complete items 9, 9a, and 9d.	
14. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP) MM DD YY QUAL 02 23 15 431		15. OTHER DATE QUAL MM DD YY 439 02 23 2015	
17. NAME OF REFERRING PROVIDER OR OTHER SOURCE DN SUZANNE ECHEMENDIA-WIRT		16. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION FROM MM DD YY TO MM DD YY	
18. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)		18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY	
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Releas A-L to service line below (24E) A. 847.0 B. 847.2 C. 1338.11 D. E. F. G. H. I. J. K. L.		20. OUTSIDE LAB? \$ CHARGES ☐ YES ☐ NO	
24. A. DATE(S) OF SERVICE From To B. PLACE OF SERVICE C. D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) E. DIAGNOSIS POINTER F. G. DAYS OR UNITS H. EPSON/Parity Plan I. ID. QUAL J. RENDERING PROVIDER ID. #		22. RESUBMISSION CODE ORIGINAL REF. NO.	
25. FEDERAL TAX I.D. NUMBER SSN EIN 45-3007863 X 116473117 X YES NO		23. PRIOR AUTHORIZATION NUMBER	
26. PATIENT'S ACCOUNT NO. 116473117		24. TOTAL CHARGE \$ 790.00 29. AMOUNT PAID \$ 139.94	
27. ACCEPT ASSIGNMENT? For govt. claims, see 0200 X YES NO		30. Rsvd for NUCC Use	
31. SERVICE FACILITY LOCATION INFORMATION AIKEN REGIONAL MEDICAL CEN 302 UNIVERSITY PARKWAY AIKEN SC 29801-1117		32. BILLING PROVIDER INFO & PH # AIKEN PHYSICIAN SERVICES PO BOX 11407 DEPT 2055 BIRMINGHAM AL 35246-2055	
33. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.) SUZANNE ECHEMENDIA-WM SIGNED 02/23/2015		34. SIGNATURE OF PATIENT OR AUTHORIZED PERSON SIGNED 02/23/2015	

NUCC Instruction Manual available at: www.nucc.org

1. DIRECTIONAL PRINT OR TELEPHONE

(877) 477-5093 or (877) 477-5093-1197 FORM 1500 (02-12)

W. Klotz 000004

UFG-01 CR-5-1450

APPROVED DMR NO. 0938-0357

NUBC National Urban Black Caucus

THE CERTIFICATIONS ON THE REVERSE APPLY TO THIS BILL AND ARE MADE A PART HEREOF.

W. KLOTZ 000005

06/24/2015 11:09 FAX 7066677455

MCBS, LLC.

00003


 463
 BCBS SC PPO
 PO BOX 100300

HEALTH INSURANCE CLAIM FORM

COLUMBIA, SC 29202

APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

☐ PICA		☐ PICA	
1. MEDICARE ☐ MEDICAID ☐ TRICARE ☐ CHAMPVA ☐ GROUP HEALTH PLAN ☐ FECA ☐ BULK LUNG ☒ OTHER ☐ (If other, specify)		1a. INSURED'S I.D. NUMBER (For Program in Item 1) SRS132074922384	
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM		3. PATIENT'S BIRTH DATE MM DD YY 09 08 1947 SEX M ☒ F ☐	
4. INSURED'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM		5. PATIENT'S ADDRESS (No., Street) 115 CHESNEY GLEN DR	
6. PATIENT RELATIONSHIP TO INSURED Self ☒ Spouse ☐ Child ☐ Other ☐		7. INSURED'S ADDRESS (No., Street) 115 CHESNEY GLEN DR	
8. RESERVED FOR NUCC USE		9. RESERVED FOR NUCC USE	
10. IS PATIENT'S CONDITION RELATED TO: a. EMPLOYMENT? (Current or Previous) ☐ YES ☐ NO b. AUTO ACCIDENT? ☐ YES ☐ NO c. OTHER ACCIDENT? ☐ YES ☐ NO		11. INSURED'S POLICY GROUP OR FECA NUMBER a. INSURED'S DATE OF BIRTH MM DD YY 09 08 1947 SEX M ☒ F ☐ b. OTHER CLAIM ID (Designated by NUCC) c. INSURANCE PLAN NAME OR PROGRAM NAME	
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below. SIGNED SIGNATURE ON FILE DATE 03/03/2015		13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below. SIGNED SIGNATURE ON FILE	
14. DATE OF CURRENT ILLNESS, INJURY, OR PREGNANCY (LMP) 02 22 2015 QUAL 431		15. OTHER DATE MM DD YY 17a. NPI 1821377318	
16. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION FROM MM DD YY TO MM DD YY		17. NAME OF REFERRING PROVIDER OR OTHER SOURCE DR GREGORY FINCH	
18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY		19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)	
20. OUTSIDE LAB? ☐ YES ☒ NO \$ CHARGES		21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) A. 723 1 B. 959 09 C. 724 5 D. 959 19 E. F. G. H. I. J. K. L.	
22. RESUBMISSION CODE ORIGINAL REF. NO.		23. PRIOR AUTHORIZATION NUMBER	
24. A. DATE(S) OF SERVICE From MM DD YY To MM DD YY B. PLACE OF SERVICE C. D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) E. DIAGNOSIS F. \$ CHARGES G. DAYS OF UNITS H. SPECIAL PAY I. ID. QUAL J. RENDERING PROVIDER ID. #		25. FEDERAL TAX I.D. NUMBER SSN EIN 202148722 ☒ 361354 26. PATIENT'S ACCOUNT NO. 361354 27. ACCEPT ASSIGNMENT? ☒ YES ☐ NO 28. TOTAL CHARGE \$ 460.00 29. AMOUNT PAID \$ 0.00 30. Paid for NUCC Use	
31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.) ALFONZO GAY, MD SIGNED 03/03/2015		32. SERVICE FACILITY LOCATION INFORMATION AIKEN REGIONAL MEDICAL CENTER 302 UNIVERSITY PARKWAY AIKEN, SC 29801-6302 a. 1467448498 b. 1356443683	
33. BILLING PROVIDER INFO & PH # (706) 737-4575 CAROLINA RADIOLOGICAL ASSOC 1125 TROUPE STREET AUGUSTA GA 30904-4480		34. BILLING PROVIDER INFO & PH # (706) 737-4575 CAROLINA RADIOLOGICAL ASSOC 1125 TROUPE STREET AUGUSTA GA 30904-4480	

NUCC Instruction Manual available at: www.nucc.org

PLEASE PRINT OR TYPE

APPROVED OMB-0938-1197 FORM 1500 (02-12)

43051

03 03 2015

W. KLOTZ 000006



464
GILPINLAW OFFICES, PLLC
126 NORTH MCDOWELL ST.,
CHARLOTTE, NC 28204

HEALTH INSURANCE CLAIM FORM

APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) (02/11)

PATIENT AND INSURED INFORMATION														
1. MEDICARE ☐ MEDICAID ☐ HICARE ☐ CHAMPVA ☐ GROUP HEALTH PLAN ☐ HEALTH SAVING PLAN ☒ OTHER ☐														
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM					3. PATIENT'S BIRTH DATE 09 08 1947 SEX ☒ M ☐ F					4. INSURED'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM				
5. PATIENT'S ADDRESS (No., Street) 157 ASHEPOO DR					6. PATIENT RELATIONSHIP TO INSURED Self ☒ Spouse ☐ Child ☐ Other ☐					7. INSURED'S ADDRESS (No., Street) 157 ASHEPOO DR				
CITY AIKEN					STATE SC					CITY AIKEN				
ZIP CODE 29803					TELEPHONE (Include Area Code) (704) 249-8665					ZIP CODE 29803				
TELEPHONE (Include Area Code) (704) 249-8665					8. RESERVED FOR NUCC USE					9. RESERVED FOR NUCC USE				
10. IS PATIENT'S CONDITION RELATED TO: a. EMPLOYMENT? (Current or Previous) YES ☐ NO ☒ b. AUTO ACCIDENT? YES ☒ NO ☐ c. OTHER ACCIDENT? YES ☐ NO ☒ 10d. CLAIM CODES (Designated by NUCC)					11. INSURED'S POLICY GROUP OR PLCA NUMBER					12. INSURED'S DATE OF BIRTH 09 08 1947 SEX ☒ M ☐ F				
13. INSURED'S POLICY OR GROUP NUMBER					14. INSURED'S DATE OF BIRTH 09 08 1947 SEX ☒ M ☐ F					15. OTHER CLAIM ID (Designated by NUCC)				
16. INSURANCE PLAN NAME OR PROGRAM NAME					17. IS THERE ANOTHER HEALTH BENEFIT PLAN? YES ☐ NO ☒ If yes, complete items 9, 10, and 11.					18. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE (I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits other to myself or to the party who accepts assignment below.) Signature on File SIGNED 02/05/16				
19. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP) 06 10 15 QUAL. 439					20. OTHER DATE QUAL. 02 22 15					21. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY				
22. NAME OF REFERRING PROVIDER OR OTHER SOURCE					23. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY					24. PRIOR AUTHORIZATION NUMBER				
25. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)					26. PRIOR AUTHORIZATION NUMBER					27. PRIOR AUTHORIZATION NUMBER				
28. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Print A-L to service line below (24C) A. 7393 B. 72252 C. 7249 D. 7243 E. 7344 F. 7202 G. 7341 H. 7224 I. 7234 J. 7231 K. 7249					29. PRIOR AUTHORIZATION NUMBER					30. PRIOR AUTHORIZATION NUMBER				
31. A. DATE(S) OF SERVICE From MM DD YY To MM DD YY					32. B. PLACE OF SERVICE RMS 99202 C. 25					33. D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 150 00				
34. E. DIAGNOSIS ICD-9 1689926628					35. F. CHARGE 60 00 1					36. G. REFERRING PROVIDER ID # 1689926628				
37. H. DATE(S) OF SERVICE From MM DD YY To MM DD YY					38. I. PLACE OF SERVICE RMS 98942 C. AT					39. J. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
40. K. DIAGNOSIS ICD-9 1689926628					41. L. CHARGE 25 00 1					42. M. REFERRING PROVIDER ID # 1689926628				
43. N. DATE(S) OF SERVICE From MM DD YY To MM DD YY					44. O. PLACE OF SERVICE RMS 97012 C. GP					45. P. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 25 00 1				
46. Q. DIAGNOSIS ICD-9 1689926628					47. R. CHARGE 60 00 1					48. S. REFERRING PROVIDER ID # 1689926628				
49. T. DATE(S) OF SERVICE From MM DD YY To MM DD YY					50. U. PLACE OF SERVICE RMS 98942 C. AT					51. V. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
52. W. DIAGNOSIS ICD-9 1689926628					53. X. CHARGE 25 00 1					54. Y. REFERRING PROVIDER ID # 1689926628				
55. Z. DATE(S) OF SERVICE From MM DD YY To MM DD YY					56. AA. PLACE OF SERVICE RMS 98942 C. AT					57. AB. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
58. AC. DIAGNOSIS ICD-9 1689926628					59. AD. CHARGE 60 00 1					60. AE. REFERRING PROVIDER ID # 1689926628				
61. AF. DATE(S) OF SERVICE From MM DD YY To MM DD YY					62. AG. PLACE OF SERVICE RMS 98942 C. AT					63. AH. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
64. AI. DIAGNOSIS ICD-9 1689926628					65. AJ. CHARGE 25 00 1					66. AK. REFERRING PROVIDER ID # 1689926628				
67. AL. DATE(S) OF SERVICE From MM DD YY To MM DD YY					68. AM. PLACE OF SERVICE RMS 98942 C. AT					69. AN. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
70. AO. DIAGNOSIS ICD-9 1689926628					71. AP. CHARGE 25 00 1					72. AQ. REFERRING PROVIDER ID # 1689926628				
73. AR. DATE(S) OF SERVICE From MM DD YY To MM DD YY					74. AS. PLACE OF SERVICE RMS 98942 C. AT					75. AT. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
76. AU. DIAGNOSIS ICD-9 1689926628					77. AV. CHARGE 25 00 1					78. AW. REFERRING PROVIDER ID # 1689926628				
79. AX. DATE(S) OF SERVICE From MM DD YY To MM DD YY					80. AY. PLACE OF SERVICE RMS 98942 C. AT					81. AZ. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
82. BA. DIAGNOSIS ICD-9 1689926628					83. BB. CHARGE 25 00 1					84. BC. REFERRING PROVIDER ID # 1689926628				
85. BD. DATE(S) OF SERVICE From MM DD YY To MM DD YY					86. BE. PLACE OF SERVICE RMS 98942 C. AT					87. BF. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
88. BG. DIAGNOSIS ICD-9 1689926628					89. BH. CHARGE 25 00 1					90. BI. REFERRING PROVIDER ID # 1689926628				
91. BJ. DATE(S) OF SERVICE From MM DD YY To MM DD YY					92. BK. PLACE OF SERVICE RMS 98942 C. AT					93. BL. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
94. BM. DIAGNOSIS ICD-9 1689926628					95. BN. CHARGE 25 00 1					96. BO. REFERRING PROVIDER ID # 1689926628				
97. BP. DATE(S) OF SERVICE From MM DD YY To MM DD YY					98. BQ. PLACE OF SERVICE RMS 98942 C. AT					99. BR. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
100. BS. DIAGNOSIS ICD-9 1689926628					101. BT. CHARGE 25 00 1					102. BU. REFERRING PROVIDER ID # 1689926628				
103. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					104. BV. PLACE OF SERVICE RMS 98942 C. AT					105. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
106. BV. DIAGNOSIS ICD-9 1689926628					107. BV. CHARGE 25 00 1					108. BV. REFERRING PROVIDER ID # 1689926628				
109. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					110. BV. PLACE OF SERVICE RMS 98942 C. AT					111. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
112. BV. DIAGNOSIS ICD-9 1689926628					113. BV. CHARGE 25 00 1					114. BV. REFERRING PROVIDER ID # 1689926628				
115. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					116. BV. PLACE OF SERVICE RMS 98942 C. AT					117. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
118. BV. DIAGNOSIS ICD-9 1689926628					119. BV. CHARGE 25 00 1					120. BV. REFERRING PROVIDER ID # 1689926628				
121. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					122. BV. PLACE OF SERVICE RMS 98942 C. AT					123. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
124. BV. DIAGNOSIS ICD-9 1689926628					125. BV. CHARGE 25 00 1					126. BV. REFERRING PROVIDER ID # 1689926628				
127. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					128. BV. PLACE OF SERVICE RMS 98942 C. AT					129. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
130. BV. DIAGNOSIS ICD-9 1689926628					131. BV. CHARGE 25 00 1					132. BV. REFERRING PROVIDER ID # 1689926628				
133. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					134. BV. PLACE OF SERVICE RMS 98942 C. AT					135. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
136. BV. DIAGNOSIS ICD-9 1689926628					137. BV. CHARGE 25 00 1					138. BV. REFERRING PROVIDER ID # 1689926628				
139. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					140. BV. PLACE OF SERVICE RMS 98942 C. AT					141. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
142. BV. DIAGNOSIS ICD-9 1689926628					143. BV. CHARGE 25 00 1					144. BV. REFERRING PROVIDER ID # 1689926628				
145. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					146. BV. PLACE OF SERVICE RMS 98942 C. AT					147. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
148. BV. DIAGNOSIS ICD-9 1689926628					149. BV. CHARGE 25 00 1					150. BV. REFERRING PROVIDER ID # 1689926628				
151. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					152. BV. PLACE OF SERVICE RMS 98942 C. AT					153. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
154. BV. DIAGNOSIS ICD-9 1689926628					155. BV. CHARGE 25 00 1					156. BV. REFERRING PROVIDER ID # 1689926628				
157. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					158. BV. PLACE OF SERVICE RMS 98942 C. AT					159. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
160. BV. DIAGNOSIS ICD-9 1689926628					161. BV. CHARGE 25 00 1					162. BV. REFERRING PROVIDER ID # 1689926628				
163. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					164. BV. PLACE OF SERVICE RMS 98942 C. AT					165. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
166. BV. DIAGNOSIS ICD-9 1689926628					167. BV. CHARGE 25 00 1					168. BV. REFERRING PROVIDER ID # 1689926628				
169. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					170. BV. PLACE OF SERVICE RMS 98942 C. AT					171. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
172. BV. DIAGNOSIS ICD-9 1689926628					173. BV. CHARGE 25 00 1					174. BV. REFERRING PROVIDER ID # 1689926628				
175. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					176. BV. PLACE OF SERVICE RMS 98942 C. AT					177. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
178. BV. DIAGNOSIS ICD-9 1689926628					179. BV. CHARGE 25 00 1					180. BV. REFERRING PROVIDER ID # 1689926628				
181. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					182. BV. PLACE OF SERVICE RMS 98942 C. AT					183. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
184. BV. DIAGNOSIS ICD-9 1689926628					185. BV. CHARGE 25 00 1					186. BV. REFERRING PROVIDER ID # 1689926628				
187. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					188. BV. PLACE OF SERVICE RMS 98942 C. AT					189. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
190. BV. DIAGNOSIS ICD-9 1689926628					191. BV. CHARGE 25 00 1					192. BV. REFERRING PROVIDER ID # 1689926628				
193. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					194. BV. PLACE OF SERVICE RMS 98942 C. AT					195. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
196. BV. DIAGNOSIS ICD-9 1689926628					197. BV. CHARGE 25 00 1					198. BV. REFERRING PROVIDER ID # 1689926628				
199. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					200. BV. PLACE OF SERVICE RMS 98942 C. AT					201. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
202. BV. DIAGNOSIS ICD-9 1689926628					203. BV. CHARGE 25 00 1					204. BV. REFERRING PROVIDER ID # 1689926628				
205. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					206. BV. PLACE OF SERVICE RMS 98942 C. AT					207. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
208. BV. DIAGNOSIS ICD-9 1689926628					209. BV. CHARGE 25 00 1					210. BV. REFERRING PROVIDER ID # 1689926628				
211. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					212. BV. PLACE OF SERVICE RMS 98942 C. AT					213. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
214. BV. DIAGNOSIS ICD-9 1689926628					215. BV. CHARGE 25 00 1					216. BV. REFERRING PROVIDER ID # 1689926628				
217. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					218. BV. PLACE OF SERVICE RMS 98942 C. AT					219. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
220. BV. DIAGNOSIS ICD-9 1689926628					221. BV. CHARGE 25 00 1					222. BV. REFERRING PROVIDER ID # 1689926628				
223. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					224. BV. PLACE OF SERVICE RMS 98942 C. AT					225. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
226. BV. DIAGNOSIS ICD-9 1689926628					227. BV. CHARGE 25 00 1					228. BV. REFERRING PROVIDER ID # 1689926628				
229. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					230. BV. PLACE OF SERVICE RMS 98942 C. AT					231. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
232. BV. DIAGNOSIS ICD-9 1689926628					233. BV. CHARGE 25 00 1					234. BV. REFERRING PROVIDER ID # 1689926628				
235. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					236. BV. PLACE OF SERVICE RMS 98942 C. AT					237. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
238. BV. DIAGNOSIS ICD-9 1689926628					239. BV. CHARGE 25 00 1					240. BV. REFERRING PROVIDER ID # 1689926628				
241. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					242. BV. PLACE OF SERVICE RMS 98942 C. AT					243. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
244. BV. DIAGNOSIS ICD-9 1689926628					245. BV. CHARGE 25 00 1					246. BV. REFERRING PROVIDER ID # 1689926628				
247. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					248. BV. PLACE OF SERVICE RMS 98942 C. AT					249. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
250. BV. DIAGNOSIS ICD-9 1689926628					251. BV. CHARGE 25 00 1					252. BV. REFERRING PROVIDER ID # 1689926628				
253. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					254. BV. PLACE OF SERVICE RMS 98942 C. AT					255. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
256. BV. DIAGNOSIS ICD-9 1689926628					257. BV. CHARGE 25 00 1					258. BV. REFERRING PROVIDER ID # 1689926628				
259. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					260. BV. PLACE OF SERVICE RMS 98942 C. AT					261. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
262. BV. DIAGNOSIS ICD-9 1689926628					263. BV. CHARGE 25 00 1					264. BV. REFERRING PROVIDER ID # 1689926628				
265. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					266. BV. PLACE OF SERVICE RMS 98942 C. AT					267. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
268. BV. DIAGNOSIS ICD-9 1689926628					269. BV. CHARGE 25 00 1					270. BV. REFERRING PROVIDER ID # 1689926628				
271. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					272. BV. PLACE OF SERVICE RMS 98942 C. AT					273. BV. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS ABCD MODIFIER 60 00 1				
274. BV. DIAGNOSIS ICD-9 1689926628					275. BV. CHARGE 25 00 1					276. BV. REFERRING PROVIDER ID # 1689926628				
277. BV. DATE(S) OF SERVICE From MM DD YY To MM DD YY					278. BV. PLACE OF SERVICE									



HEALTH INSURANCE CLAIM FORM

APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

465 GILPINLAW OFFICES, PLLC
126 NORTH McDOWELL ST.,
CHARLOTTE, NC 28204

1. MEDICARE ☐ (Medicare) MEDICAID ☐ (Medicaid) HICARE ☐ (HICARE) CHAMPVA ☐ (Member ID#) GROUP HEALTH PLAN ☐ (ID#) FECA/RK/LONG ☒ (ID#) OTHER ☐ (ID#)		18. INSURED'S ID. NUMBER (For Program in Item 1) KLOTZ	
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM		4. INSURED'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM	
3. PATIENT'S BIRTH DATE 09 08 1947 SEX ☒ M ☐ F		7. INSURED'S ADDRESS (No., Street) 157 ASHEPOO DR	
5. PATIENT'S ADDRESS (No., Street) 157 ASHEPOO DR		8. INSURED'S CITY AIKEN STATE SC	
6. PATIENT'S RELATIONSHIP TO INSURED ☒ Self ☐ Spouse ☐ Child ☐ Other		9. INSURED'S CITY AIKEN STATE SC	
10. IS PATIENT'S CONDITION RELATED TO: a. EMPLOYMENT? (Current or Previous) ☐ YES ☒ NO b. AUTO ACCIDENT? ☒ YES ☐ NO PLACE (State) NC c. OTHER ACCIDENT? ☐ YES ☒ NO 10J. CLAIM CODES (Designated by NUCC)		11. INSURED'S POLICY GROUP OR FECA NUMBER	
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE (I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below.) Signature on File 02/05/16		13. INSURED'S DATE OF BIRTH 09 08 1947 SEX ☒ M ☐ F	
14. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP) 06 10 15 QUAL 439		15. OTHER DATE 02 22 15	
17. NAME OF REFERRING PROVIDER OR OTHER SOURCE		16. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY	
18. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)		19. PRIOR AUTHORIZATION NUMBER	
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate A-L to service line below (24F)) A. 7393 B. 72252 C. 7249 D. 7243 E. 7344 F. 7202 G. 7391 H. 7224 I. 7234 J. 7231 K. 7249		20. OUTSIDE LAB ☒ YES ☐ NO	
24. A. DATE(S) OF SERVICE From MM DD YY To MM DD YY B. PLACE OF SERVICE 11 C. D. PROCEDURE, SERVICE, OR SUPPLIER (Explain Unusual Circumstances) 97012 GP E. DIAGNOSIS HICARE ABCD F. CHARGES 25 00 1 G. DATE OF BILL 08 12 15 H. PAYMENT (Show Date) 08 12 15 I. ID CLAIM 1689926628 J. REFERRING PROVIDER ID. # 1689926628		22. TOTAL CHARGE 255 00 23. AMOUNT PAID 0 00 24. BILLING PROVIDER INFO & PII # (803) 649-4747	
25. FEDERAL TAX ID. NUMBER 460886251 SSN CIN ☒ 26. PATIENT'S ACCOUNT NO. 11546225167 27. ACCEPT ASSIGNMENT? ☒ YES ☐ NO		28. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.) Signature on File 02/05/16 LYNSEY BEHELER, DC	
29. SERVICE FACILITY LOCATION INFORMATION LYNSEY BEHELER, LLC 673 SILVER BLUFF RD AIKEN, SC 29803-7889		30. BILLING PROVIDER INFO & PII # (803) 649-4747	
31. SIGNATURE OF PATIENT OR AUTHORIZED PERSON Signature on File 02/05/16		32. SIGNATURE OF PHYSICIAN OR SUPPLIER Signature on File 02/05/16	

NUCC Instruction Manual available at: www.nucc.org

PLEASE PRINT OR TYPE

CR061653

APPROVED OMB-0136-1197 FORM 1800 (02-12)

1200/610002

02/05/2016 12:26PM FAX
W. KLOTZ 000008



HEALTH INSURANCE CLAIM FORM

APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 09/12

466

GILPINLAW OFFICES, PLLC
126 NORTH MCDOWELL ST.,
CHARLOTTE, NC 28204

PICA

PICA

1. MEDICARE ☐ (Medicare #) MEDICAID ☐ (Medicaid #) TRICARE ☐ (TRICARE #) CHAMPVA ☐ (Member ID #) GROUP HEALTH PLAN ☐ (ID #) HSA ☐ (ID #) OTHER ☒ (ID #)		1. INSURER'S I.D. NUMBER (For Program in Item 1) KLOTZ	
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM		4. INSURED'S NAME (Last Name, First Name, Middle Initial) KLOTZ, WILLIAM	
3. PATIENT'S BIRTH DATE 09 08 1947 SEX ☒ M ☐ F		7. INSURED'S ADDRESS (No., Street) 157 ASHEPOO DR	
5. PATIENT'S ADDRESS (No., Street) 157 ASHEPOO DR		CITY AIKEN STATE SC	
6. PATIENT RELATIONSHIP TO INSURED Self ☒ Spouse ☐ Child ☐ Other ☐		ZIP CODE 29803 TELEPHONE (Include Area Code) (704) 249-8665	
8. RESERVED FOR NUCC USE		11. INSURED'S POLICY GROUP OR PICA NUMBER	
9. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)		10. IS PATIENT'S CONDITION RELATED TO: a. EMPLOYMENT? (Current or Previous) ☐ YES ☒ NO b. AUTO ACCIDENT? ☒ YES ☐ NO c. OTHER ACCIDENT? ☐ YES ☒ NO 10d. CLAIM CODES (Designated by NUCC)	
a. OTHER INSURED'S POLICY OR GROUP NUMBER		11. INSURED'S DATE OF BIRTH 09 08 1947 SEX ☒ M ☐ F	
b. RESERVED FOR NUCC USE		12. OTHER CLAIM ID (Designated by NUCC)	
c. RESERVED FOR NUCC USE		13. INSURANCE PLAN NAME OR PROGRAM NAME	
d. INSURANCE PLAN NAME OR PROGRAM NAME		14. IS THERE ANOTHER HEALTH BENEFIT PLAN? ☐ YES ☒ NO // yes, complete items 1, 10, and 11d.	

READ BACK OF FORM BEFORE COMPLETING & SIGNING THIS FORM.
15. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE (I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts management below.)Signature on File **02/05/16**14. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP)
06 20 15 QUAL: **439** 02 22 15Y17. NAME OF REFERRING PROVIDER OR OTHER SOURCE
17a. **7393** 17b. NPI **72252**

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate A-E to service line below (249)

A. **7393** B. **72252** C. **7249** D. **7243**
E. **7394** F. **7202** G. **7391** H. **7224**
I. **7234** J. **7231** K. **7249** L.

24. A. DATE OF SERVICE From To B. PLACE OF SERVICE C. D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) E. DIAGNOSIS POINT-TO-POINT

1 08 12 15 08 12 15 11 97012 GP ABCD 25 00 1 NPI 1689926628

2 08 26 15 08 26 15 11 98942 AT ABCD 60 00 1 NPI 1689926628

3 08 26 15 08 26 15 11 97012 GP ABCD 25 00 1 NPI 1689926628

4 09 16 15 09 16 15 11 98942 AT ABCD 60 00 1 NPI 1689926628

5 09 16 15 09 16 15 11 97012 GP ABCD 25 00 1 NPI 1689926628

6

25. FEDERAL TAX ID. NUMBER **460886251** SSN FIN ☒26. PATIENT'S ACCOUNT NO. **11546225167** 27. ACCEPT ASSIGNMENT? ☒ YES ☐ NO28. SERVICE FACILITY LOCATION INFORMATION
LYNSEY BEHELER, LLC
673 SILVER BLUFF RD
AIKEN, SC 29803-7889

29. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREE(S) OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made in part thereof.)

Signature on File **LYNSEY BEHELER, DC** **02/05/16**30. BILLING PROVIDER INFO & PHONE **(803) 849-4747**

31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREE(S) OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made in part thereof.)

Signature on File **LYNSEY BEHELER, DC** **02/05/16**32. BILLING PROVIDER INFO & PHONE **(803) 849-4747**

33. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREE(S) OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made in part thereof.)

Signature on File **LYNSEY BEHELER, DC** **02/05/16**34. BILLING PROVIDER INFO & PHONE **(803) 849-4747**

CARRIER

PATIENT AND INSURED INFORMATION

PHYSICIAN OR SUPPLIER INFORMATION

NUCC Instruction Manual available at: www.nucc.org

PLEASE PRINT OR TYPE CR061653 APPROVED OMB-0938-1197 FORM 1500 (02-12)

1200/02002

02/05/2016 12:27PM FAX
W. KLOTZ 000009

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Imaging**PROCEDURE**

CT Spine Lumbar w/o Contrast

EXAM DATE/TIME

2/23/2015 15:05 EST

Report

CT lumbar spine:

Clinical History: Trauma by motor vehicle accident, back pain

Technique: 3 mm contiguous axial images are obtained through the lumbar spine. Additional coronal and sagittal multiplanar reformation was performed.

Findings: No soft tissue hematoma is identified. The lumbar spine is normally aligned. No fracture is identified. There is fusion of L4-L5 disc space. Vacuum phenomenon is noted at L5-S1 from disc degeneration. Severe facet degenerative changes are noted on the left at L5-S1. There are bilateral facet degenerative changes at L3-L4, more severe on the left.

CONCLUSION:

No acute osseous abnormality.

Dictated By: ALFONSO GAY, MD
DID 45302D:/T:/12100463 /Job ID 13088789 /DT:02/23/2015 15:35:18/TD:02/23/2015 15:30:48 /Rev:
02/23/2015 15:30:48
cc:This document was electronically signed by ALFONSO GAY, MD on
02/23/2015 15:35:19 .

***** Final *****

Dictated by: Gay, Alfonso MD
Transcribed By: AG
Electronically Signed by: Gay, Alfonso MDDictated DT/TM: 02/23/2015 3:35 pm
Transcribed DT/TM: 02/23/15 15:30:00
Signed DT/TM: 02/23/2015 3:35 pm

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Admit: 2/23/2015
MRN: AIK179607 Disch: 2/23/2015
DOB/Sex: 9/8/1947 / Male FIN: AIK0000116473117
Attending: Echemendia-Wirth MD,Suzanne M

Imaging

PROCEDURE
CT Spine Cervical w/o Contrast

EXAM DATE/TIME
2/23/2015 15:05 EST

Report

CT CERVICAL SPINE:

Clinical History: Trauma, neck pain

Technique: 2 mm contiguous axial images are obtained through the cervical spine.
Additional coronal and sagittal multiplanar reformation was performed.

Findings: No soft tissue hematoma is identified. The cervical spine is normally aligned.
No fracture is identified. There is degenerative disc space narrowing and C4-C5, C5-C6 and
C6-C7. There is fusion of the left C2-C3 facet joint. Facet degenerative changes are noted
at C4-C5 level bilaterally.

CONCLUSION:

No acute osseous abnormality.

Dictated By:ALFONSO GAY, MD
DID 45302

D:/T:/12100421 /Job ID 13088750 /DT:02/23/2015 15:27:56/TD:02/23/2015 15:24:14 /Rev:
02/23/2015 15:24:14
cc:

This document was electronically signed by ALFONSO GAY, MD on
02/23/2015 15:27:57 .

***** Final *****

Dictated by: Gay, Alfonso MD
Transcribed By: AG Transcribed by:
Electronically Signed by: Gay, Alfonso MD

Dictated DT/TM: 02/23/2015 3:27 pm
Transcribed DT/TM: 02/23/15 15:24:00
Signed DT/TM: 02/23/2015 3:27 pm

From: ARMC MEDICAL RECORDS

803 641 5030

03/27/2015 16:47

#590 P.004/004

469

Patient Name:		Birth Date:		Social Security No. (optional)	
Patient name at time of treatment if different than above:		Requester's Name:			
Purpose of disclosure: ☐ Medical treatment ☐ Insurance Company ☐ Personal Reasons ☐ Attorney ☐ Military ☐ Other		Address 1:			
		City:		State:	Zip:
		Name and address of recipient if different than above:			
This authorization will automatically expire 90 days from the date of the authorization is signed, unless the individual specifies an earlier date. Upon the conclusion of that time period, this authorization is automatically revoked and no further use or disclosure of the patient's PHI is permitted beyond that date.					
I authorize _____ to release the following health information: (healthcare provider)					
Description:	Date(s):	Description:	Date(s):	Description:	Date(s):
☐ All PHI* in medical record ☐ Admission facesheet ☐ Discharge Summary ☐ History & Physical ☐ Consultation Reports ☐ Operative Reports ☐ Anesthesia Record		☐ ED Information ☐ Physician Orders ☐ Progress Notes ☐ Labor/Delivery Summary ☐ Nursing Information ☐ Transfer Forms ☐ Radiology Reports		☐ Laboratory Tests ☐ EKG ☐ Therapy Notes ☐ Billing Record: ☐ Other: ☐ Other: ☐ Other:	
I acknowledge, and hereby consent to such, that the released information may contain alcohol, drug abuse, psychiatric, HIV testing, HIV results or AIDS information. (Initial)					
I understand that: 1. I may refuse to sign this authorization and that it is strictly voluntary. 2. If I do not sign this form, my health care and the payment for my health care will not be affected. 3. I may revoke this authorization at any time in writing, but if I do, it will not have any affect on any actions taken prior to receiving the revocation. Further details may be found in the Notice of Privacy Practices. 4. If the requester or received is not a health plan or health care provider, the released information may no longer be protected by federal privacy regulations and may be disclosed. 5. I will receive a copy of this form after I sign it.					
FEES:					
\$.65/page for the first 30 pages (plus tax) \$.50/page thereafter (plus tax)					
If the entire record is requested the requester will be notified of the total charge and prepayment may be required.					
SIGNATURES:					
I have read the above and authorize the disclosure of the protected health information as stated:					
Signature of Patient/Guardian/Patient Representative:				Date:	
Print Name:				Relationship to Patient:	
Signature of Witness:			Print Name of Witness:		

Aiken Regional Medical Center
302 University Parkway
Aiken, SC 29801

**AUTHORIZATION
FOR RELEASE OF
PROTECTED
HEALTH
INFORMATION (PHI)**



R00010

10-1038
002.03
Rev. 5/07

Patient Identification

W. KLOTZ 000012

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Admit: 2/23/2015
MRN: AIK179607 Disch: 2/23/2015
DOB/Sex: 9/8/1947 / Male FIN: AIK0000116473117
Attending: Echemendia-Wirth MD,Suzanne M

Emergency Dept

DOCUMENT NAME: ED Physician Record
SERVICE DATE/TIME: 2/23/2015 14:24 EST
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Finch PA-C,Gregory (2/23/2015 14:31 EST)
SIGN INFORMATION: Echemendia-Wirth MD,Suzanne M (2/25/2015 02:10 EST); Finch
PA-C,Gregory (2/23/2015 15:41 EST)

Back ache, Injury of neck

Patient: KLOTZ, WILLIAM MRN: AIK179607 FIN: AIK0000116473117
Age: 67 years Sex: Male DOB: 09/08/47
Associated Diagnoses: None
Author: Finch PA-C, Gregory

Basic Information

Time seen: Date & time 02/23/15 14:27:00, Provider Assignment
Finch PA-C, Gregory assigned at 02/23/2015 14:18

Additional information: Chief Complaint from Nursing Triage Note : Chief Complaint
02/23/15 14:12 EST Chief Complaint Chief Complaint .

History of Present Illness

The patient presents with back pain. The onset was 1 days ago. The course/duration of symptoms is intermittent. Location: Bilateral lumbar neck. Radiating pain: none. The character of symptoms is achy. The degree at onset was minimal. The degree at present is minimal. The exacerbating factor is movement. The relieving factor is none. Risk factors consist of none. Associated symptoms: denies bowel dysfunction, denies bladder dysfunction and denies saddle numbness. 67-year-old male presents to the ER status post MVC yesterday where he was restrained driver of vehicle without airbags deployment. Patient states he was going about 60 mi./h l eye 20 she rounded he thinks by something going 70 miles per hour causing him to spin out and push him into a mud pile but did not hit median or anything else. no blood thionner use and only on 81 mg ASA> denies headache, only compaling on neck and lower badck pain.

Review of Systems

Constitutional symptoms: Negative except as documented in HPI, No fever,
Skin symptoms: Negative except as documented in HPI.
Eye symptoms: Negative except as documented in HPI.
ENMT symptoms: Negative except as documented in HPI.
Respiratory symptoms: Negative except as documented in HPI, No shortness of breath,
Cardiovascular symptoms: Negative except as documented in HPI, No chest pain,
Gastrointestinal symptoms: Negative except as documented in HPI.
Genitourinary symptoms: Negative except as documented in HPI.
Musculoskeletal symptoms: Negative except as documented in HPI.
Neurologic symptoms: Negative except as documented in HPI, No headache,
Psychiatric symptoms: Negative except as documented in HPI.
Endocrine symptoms: Negative except as documented in HPI.
Hematologic/Lymphatic symptoms: Negative except as documented in HPI.
Allergy/immunologic symptoms: Negative except as documented in HPI.
Additional review of systems information: All other systems reviewed and otherwise negative.

Health Status

Allergies:

Allergic Reactions (Selected)

No Known Medication Allergies.

Past Medical/ Family/ Social History

Print Date/Time 4/15/2015 11:56 EDT

Medical Record

Page 6 of 59

W. KLOTZ 000013

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Admit: 2/23/2015
MRN: AIK179607 Disch: 2/23/2015
DOB/Sex: 9/8/1947 / Male FIN: AIK0000116473117
Attending: Echemendia-Wirth MD,Suzanne M

Emergency Dept

Medical history: PMH/Problems ST
No problems documented.

Surgical history:
No active procedure history items have been selected or recorded..

Family history:
No family history items have been selected or recorded..

Social history: Social History ST

Social & Psychosocial Habits

Tobacco

08/28/2014 Patient Smoked Cigarettes During Last 12 Months: No

08/28/2014 Smoking History: Never smoker.

Physical Examination

Vital Signs

Vital Signs (ST)

<u>Vital Signs (24 hrs)</u>	<u>Last Charted</u>		<u>Minimum</u>		<u>Maximum</u>	
Temp	36.7	(FEB 23 14:11)	36.7	(FEB 23 14:11)	36.7	(FEB 23 14:11)
Peripheral Pulse Rate	82	(FEB 23 14:11)	82	(FEB 23 14:11)	82	(FEB 23 14:11)
Resp Rate	16	(FEB 23 14:11)	16	(FEB 23 14:11)	16	(FEB 23 14:11)
SBP	H 172	(FEB 23 14:11)	H 172	(FEB 23 14:11)	H 172	(FEB 23 14:11)
DBP	87	(FEB 23 14:11)	87	(FEB 23 14:11)	87	(FEB 23 14:11)
SpO2	99	(FEB 23 14:11)	99	(FEB 23 14:11)	99	(FEB 23 14:11)

Room air

Room air

Room air

General: Alert, no acute distress.

Skin: Warm, dry.

Head: Normocephalic, atraumatic.

Neck: Supple, trachea midline, generalized tenderness to palpation.

Eye: Pupils are equal, round and reactive to light, non-icteric.

Cardiovascular: Regular rate and rhythm, No murmur, No edema.

Respiratory: Lungs are clear to auscultation, respirations are non-labored, breath sounds are equal.

Back: Lumbar: Diffuse, lateral, no vertebral point tenderness.

Musculoskeletal: Normal ROM, normal strength, no tenderness.

Neurological: Alert and oriented to person, place, time, and situation, No focal neurological deficit observed, normal motor observed, normal coordination observed, I4,I5,S1 intact, Patient able to dorsiflex and extend bilateral feet and extend and flex legs equal strength.

Psychiatric: Cooperative, appropriate mood & affect, normal judgment, non-suicidal.

Medical Decision Making

Radiology results: Computed tomography, interpretation: l spine and c spine no acute.

Impression and Plan

Diagnosis

Back pain 724.5 - ICD9 724.5,

Lumbar sprain 847.2 - ICD9 847.2,

Diagnosis

Print Date/Time 4/15/2015 11:56 EDT

Medical Record

Page 7 of 59

W. KLOTZ 000014

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Admit: 2/23/2015
MRN: AIK179607 Disch: 2/23/2015
DOB/Sex: 9/8/1947 / Male FIN: AIK0000116473117
Attending: Echemendia-Wirth MD,Suzanne M

Emergency Dept

Neck strain 847.0 - ICD9 847.0,
Plan
Condition: Stable.
Prescriptions: Launch PrescriptionWriter
Pharmacy:
orphenadrine 100 mg oral tablet, extended release (Prescribe): 100 mg, 1 Tabs, Oral, BID, 14 Tabs
Ultram 50 mg oral tablet (Prescribe): 50 mg, 1 Tabs, Oral, q4H, 12 Tabs, PRN, for pain
naproxen 500 mg oral tablet (Prescribe): 500 mg, 1 Tabs, Oral, BID, 10 Tabs, PRN, for pain
Admit/Transfer/Discharge:
Discharge Request (Order): 02/23/15 15:40 EST, Home Routine.
Patient was given the following educational materials: BACK PAIN (Acute or Chronic).
Follow up with: Dr No pcp no family Within 1-2 days; return sooner if worse or other concerning signs or symptoms Within 1-2 days; AIK- Margaret J. Weston Health Clinic Within 1-2 days.
Counseled: Patient, Regarding diagnosis, Regarding diagnostic results, Regarding treatment plan, Regarding prescription, Patient indicated understanding of instructions.

Electronically Signed By: Finch, Gregory PA-C
On: 02.23.2015 15:41 EST

Electronically Signed On: 02.25.2015 02:10 EST
Echemendia-Wirth, Suzanne MD

DOCUMENT NAME:	Triage Note
SERVICE DATE/TIME:	2/23/2015 15:23 EST
RESULT STATUS:	Auth (Verified)
PERFORM INFORMATION:	Menze RN,Theresa (2/23/2015 15:23 EST)
SIGN INFORMATION:	Menze RN,Theresa (2/23/2015 15:23 EST)

ED Social History Entered On: 2/23/2015 15:23 EST
Performed On: 2/23/2015 15:23 EST by Menze RN, Theresa

Social History

Smoking History--MU : Never smoker
Tobacco Use Last 30 Days : Yes

Menze RN, Theresa - 2/23/2015 15:23 EST

Social History

(As Of: 2/23/2015 15:23:45 EST)

Tobacco Use Screening

Tobacco Use Screening : No tobacco use of any form

Menze RN, Theresa - 2/23/2015 15:23 EST

DOCUMENT NAME:	Triage Note
SERVICE DATE/TIME:	2/23/2015 15:23 EST
RESULT STATUS:	Auth (Verified)
PERFORM INFORMATION:	Menze RN,Theresa (2/23/2015 15:23 EST)
SIGN INFORMATION:	Menze RN,Theresa (2/23/2015 15:23 EST)

ED Triage General/Screening Adult Entered On: 2/23/2015 15:23 EST

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Emergency Dept**Performed On: 2/23/2015 15:23 EST by Menze RN, Theresa****General/Screenings Adult***Suicide Assessment* : None*Document Fall Risk Screening* : Pass*Pneumococcal Vaccine Status* : Received prior to admission, less than 5 years*Influenza Vaccine Status* : Received prior to admission, during current flu season

Menze RN, Theresa - 2/23/2015 15:23 EST

DOCUMENT NAME:

Triage Note

SERVICE DATE/TIME:

2/23/2015 15:23 EST

RESULT STATUS:

Auth (Verified)

PERFORM INFORMATION:

Menze RN,Theresa (2/23/2015 15:23 EST)

SIGN INFORMATION:

Menze RN,Theresa (2/23/2015 15:23 EST)

ED Languages Entered On: 2/23/2015 15:24 EST**Performed On: 2/23/2015 15:23 EST by Menze RN, Theresa****Languages***Preferred Mode of Communication* : Verbal*Primary**Language* : English*Mode of Communication for Preferred Lang* : Verbal*Preferred Languages* : English

Menze RN, Theresa - 2/23/2015 15:23 EST

DOCUMENT NAME:

Triage Note

SERVICE DATE/TIME:

2/23/2015 15:23 EST

RESULT STATUS:

Auth (Verified)

PERFORM INFORMATION:

Menze RN,Theresa (2/23/2015 15:23 EST)

SIGN INFORMATION:

Menze RN,Theresa (2/23/2015 15:23 EST)

ED Abuse/Neglect Adult Entered On: 2/23/2015 15:23 EST**Performed On: 2/23/2015 15:23 EST by Menze RN, Theresa****Abuse/Neglect Assessment***Threatened/Physically Hurt in past year* : No*ED DV Harm or Neglect Question* : No*Abuse and Neglect Types* : None

Menze RN, Theresa - 2/23/2015 15:23 EST

DOCUMENT NAME:

Triage Note

SERVICE DATE/TIME:

2/23/2015 15:22 EST

RESULT STATUS:

Auth (Verified)

PERFORM INFORMATION:

Menze RN,Theresa (2/23/2015 15:22 EST)

SIGN INFORMATION:

Menze RN,Theresa (2/23/2015 15:22 EST)

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM
MRN: AIK179607
DOB/Sex: 9/8/1947 / Male

Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
Disch: 2/23/2015
FIN: AIK0000116473117

Emergency Dept

ED Triage RFV/Problems Entered On: 2/23/2015 15:23 EST
Performed On: 2/23/2015 15:22 EST by Menze RN, Theresa

Reason for Visit/Medical History ED

Reviewed Past Medical HX with Patient : Yes

Menze RN, Theresa - 2/23/2015 15:22 EST
(As Of: 2/23/2015 15:23:22 EST)

Problems(Active)

Diabetes (SNOMED CT
:0B9425BE-172E-47A1-9E8E-
453E443E66F6)

Name of Problem: Diabetes ; *Recorder:* Menze RN, Theresa;
Confirmation: Confirmed ; *Classification:* Medical ; *Code:*
0B9425BE-172E-47A1-9E8E-453E443E66F6 ; *Contributor*
System: PowerChart ; *Last Updated:* 2/23/2015 15:22 EST ;
Life Cycle Date: 2/23/2015 ; *Life Cycle Status:* Active ;
Vocabulary: SNOMED CT

Hypercholesteremia (SNOMED
CT
:29843A3F-87C1-4D89-A20B-
08C3C2B82F81)

Name of Problem: Hypercholesteremia ; *Recorder:* Menze
RN, Theresa; *Confirmation:* Confirmed ; *Classification:*
Medical ; *Code:* 29843A3F-87C1-4D89-A20B-08C3C2B82F81
; *Contributor System:* PowerChart ; *Last Updated:* 2/23/2015
15:23 EST ; *Life Cycle Date:* 2/23/2015 ; *Life Cycle Status:*
Active ; *Vocabulary:* SNOMED CT

Hypertension (SNOMED CT
:ED58A4E9-45FF-4070-A7A1-
E9EC6FB96A74)

Name of Problem: Hypertension ; *Recorder:* Menze RN,
Theresa; *Confirmation:* Confirmed ; *Classification:* Medical ;
Code: ED58A4E9-45FF-4070-A7A1-E9EC6FB96A74 ;
Contributor System: PowerChart ; *Last Updated:* 2/23/2015
15:22 EST ; *Life Cycle Date:* 2/23/2015 ; *Life Cycle Status:*
Active ; *Vocabulary:* SNOMED CT

Diagnoses(Active)

Back ache

Date: 2/23/2015 ; *Diagnosis Type:* Reason For Visit ;
Confirmation: Confirmed ; *Clinical Dx:* Back ache ;
Classification: Medical ; *Clinical Service:* Emergency
medicine ; *Code:* PNED ; *Probability:* 0 ; *Diagnosis Code:*
50B1549C-18FE-434D-A2CE-87DD25CDC5BD

Injury of neck

Date: 2/23/2015 ; *Diagnosis Type:* Reason For Visit ;
Confirmation: Confirmed ; *Clinical Dx:* Injury of neck ;
Classification: Medical ; *Clinical Service:* Emergency
medicine ; *Code:* PNED ; *Probability:* 0 ; *Diagnosis Code:*
D8C909E0-A751-416A-AE1A-CCBF51623E9D

DOCUMENT NAME:
SERVICE DATE/TIME:
RESULT STATUS:
PERFORM INFORMATION:
SIGN INFORMATION:

Triage Note
2/23/2015 14:11 EST
Auth (Verified)
Frank RN,Alyce N (2/23/2015 14:11 EST)
Frank RN,Alyce N (2/23/2015 14:11 EST)

ED Triage Vitals Entered On: 2/23/2015 14:11 EST
Performed On: 2/23/2015 14:11 EST by Frank RN, Alyce N

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Admit: 2/23/2015
MRN: AIK179607 Disch: 2/23/2015
DOB/Sex: 9/8/1947 / Male FIN: AIK0000116473117
Attending: Echemendia-Wirth MD,Suzanne M

Emergency Dept

ED Vitals

Systolic Blood Pressure : 172 mmHg (HI)
Diastolic Blood Pressure : 87 mmHg
BP Site : Right arm
Peripheral Pulse Rate : 82 bpm
O2 Therapy : Room air
Respiratory Rate : 16 br/min
SpO2 : 99 %
Temperature : 36.7 DegC
Temperature Convert C to F : 98.1 DegF
Temperature Method : Oral

Frank RN, Alyce N - 2/23/2015 14:11 EST

DOCUMENT NAME:	Triage Note
SERVICE DATE/TIME:	2/23/2015 14:11 EST
RESULT STATUS:	Auth (Verified)
PERFORM INFORMATION:	Frank RN,Alyce N (2/23/2015 14:11 EST)
SIGN INFORMATION:	Frank RN,Alyce N (2/23/2015 14:11 EST)

ED Triage Primary Pain Assessment Entered On: 2/23/2015 14:11 EST
Performed On: 2/23/2015 14:11 EST by Frank RN, Alyce N

Primary Pain

Numeric Rating : 3
Pain Level Acceptable to Patient : No

Frank RN, Alyce N - 2/23/2015 14:11 EST

DOCUMENT NAME:	ED Patient Education Note
SERVICE DATE/TIME:	2/23/2015 15:47 EST
RESULT STATUS:	Auth (Verified)
PERFORM INFORMATION:	Kirkland RN,Justin (2/23/2015 15:47 EST)
SIGN INFORMATION:	Kirkland RN,Justin (2/23/2015 15:47 EST)

ED Patient Education Note

SPECIAL INSTRUCTIONS FOR HANDLING YOUR MEDICATIONS

It is very important to take your medications as directed. In addition, you should provide a list of your medications to your primary care Physician. Your medication list should be updated when medications are changed or discontinued and when new medications are added (including over the counter medications). Carry your medication list with you at all times as this can provide very valuable information in the event you are involved in an emergency situation.

Please be sure to bring your medication list with you anytime you visit the Emergency Department.

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

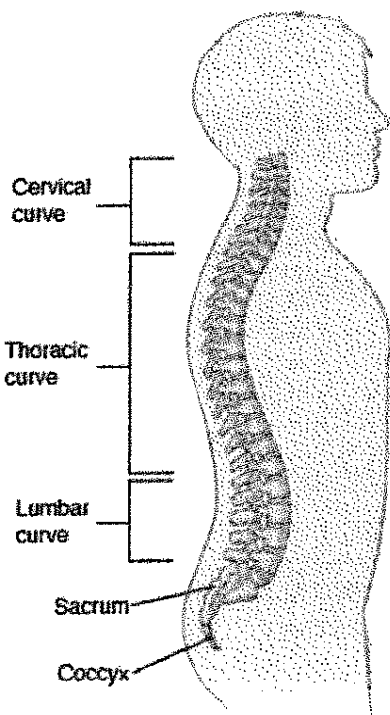
FOLLOW UP with your doctor or as advised by our staff. If you do not have your own doctor, we can recommend one for you.

To find additional information about the medications you are taking, you can visit the following website - ConsumerMedSafety.org.

Diagnosis

BACK PAIN [acute or chronic]

11570140



Back pain is usually caused by an injury to the muscles or ligaments of the spine. Sometimes the disks that separate each bone in the spine may bulge and cause pain by pressing on a nearby nerve. Back pain may also appear after a sudden twisting/bending force (such as in a car accident), after a simple awkward movement, or lifting something heavy with poor body positioning. In either case, muscle spasm is often present and adds to the pain.

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

Acute back pain usually gets better in one to two weeks. Back pain related to disk disease, arthritis in the spinal joints or spinal stenosis (narrowing of the spinal canal) can become chronic and last for months or years.

Unless you had a physical injury (for example, a car accident or fall) X-rays are usually not ordered for the initial evaluation of back pain. If pain continues and does not respond to medical treatment, x-rays and other tests may be performed at a later time.

HOME CARE:

1. You may need to stay in bed the first few days. But, as soon as possible, begin sitting or walking to avoid problems with prolonged bed rest (muscle weakness, worsening back stiffness and pain, blood clots in the legs).
2. When in bed, try to find a position of comfort. A firm mattress is best. Try lying flat on your back with pillows under your knees. You can also try lying on your side with your knees bent up towards your chest and a pillow between your knees.
3. Avoid prolonged sitting. This puts more stress on the lower back than standing or walking.
4. During the first two days after injury, apply an ICE PACK to the painful area for 20 minutes every 2-4 hours. This will reduce swelling and pain. HEAT (hot shower, hot bath or heating pad) works well for muscle spasm. You can start with ice, then switch to heat after two days. Some patients feel best alternating ice and heat treatments. Use the one method that feels the best to you.
5. You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]
6. Be aware of safe lifting methods and do not lift anything over 15 pounds until all the pain is gone.

FOLLOW UP with your doctor or this facility if your symptoms do not start to improve after one week. Physical therapy may be needed.

[NOTE: If X-rays were taken, they will be reviewed by a radiologist. You will be notified of any new findings that may affect your care.]

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Pain becomes worse or spreads to your legs
- Weakness or numbness in one or both legs
- Loss of bowel or bladder control

Numbness in the groin or genital area

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Medication**MEDICATION: NAPROXEN**

Print Date/Time 4/15/2015 11:56 EDT

Medical Record

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W. KLOTZ 000020

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

Naproxen (brand names: Naprosyn, Anaprox, Aleve, Naprelan, Pamprin, Midol) is an anti-inflammatory drug which is very useful for pain and inflammatory conditions.

DIRECTIONS FOR USE:

You may take this medicine with food to reduce stomach upset.

WHAT TO WATCH FOR:

POSSIBLE SIDE EFFECTS: Nausea, upper abdominal pain, drowsiness, dizziness, ringing in the ears (Contact your doctor if these symptoms persist or become severe). Bleeding from the stomach, which may appear as blood in vomit or stool (red or black color); rapid weight gain, leg swelling or easy bruising, change in the amount of urine, confusion/mood changes, very stiff neck, yellowing of the eyes/skin (Contact your doctor or return to this facility promptly).

ALLERGIC REACTION: Rash, itching, swelling, trouble breathing or swallowing (Contact your doctor or return to this facility promptly).

MEDICAL CONDITIONS: Before starting this medicine, be sure your doctor knows if you have any of the following conditions:

- Stomach ulcer (active or in the past), history of vomiting blood or bloody stools
- Allergic reaction to aspirin or other anti-inflammatory medicines
- Asthma, nasal polyps or angioedema; pregnancy or breastfeeding
- Liver or kidney disease; bleeding disorder, diabetes

DRUG INTERACTION: Before starting this medicine, be sure your doctor knows if you are taking any of the following drugs:

- Blood thinners [Coumadin (warfarin), low molecular weight heparins, heparin], cyclosporine, diuretics (water pills), blood pressure pills, ACE inhibitors (Lotensin, Capoten, Vasotec, Zestril, and others), diabetes pills, steroids (methylprednisolone, prednisone), aspirin or other anti-inflammatory drugs, methotrexate, probenecid, cidofovir, antiplatelet drugs such as Plavix (clopidogrel), desmopressin, drugs for osteoporosis [Fosamax(alendronate)], lithium, pemetrexed, bile acid binding resins, drotrecogin, SSRI antidepressants (fluoxetine, sertraline)

WARNINGS:

- Do not take with prednisone, other anti-inflammatory drugs, or alcohol since this increases the risk of getting a bleeding ulcer.

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

- Do not drive, ride a bicycle, or operate dangerous equipment while taking this medicine until you know how it will affect you.

[NOTE: This information topic may not include all directions, precautions, medical conditions, drug/food interactions, and warnings for this drug. Check with your doctor, nurse, or pharmacist for any questions that you may have.]

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MEDICATION: ORPHENADRINE

Orphenadrine (brand: Norflex) is a muscle relaxant used to relieve pain from muscle spasm.

DIRECTIONS FOR USE:

This medicine may be taken with or without food. If you find that it upsets your stomach, taking it with food will help. Take the medicine at regular intervals as described on the prescription label. If the label says "every 12 hours" this means twice a day.

WHAT TO WATCH FOR:

POSSIBLE SIDE EFFECTS: Dry mouth, drowsiness, dizziness, nausea, headache, tremor, blurred vision, constipation, fast/irregular heartbeats, mood changes, hallucinations, weakness (Contact your doctor if symptoms persist or become severe). Difficulty passing urine (Contact your doctor or return to this facility if your bladder feels full and you have been unable to pass urine for more than 8 hours).

ALLERGIC REACTION: Rash, itching, swelling, trouble breathing or swallowing (Contact your doctor or return to this facility promptly).

DRUG INTERACTIONS: Before starting this medicine, be sure your doctor knows if you are taking any of the following:

- Another muscle relaxant, sedative, sleeping pill, antihistamine, narcotic pain medicine, antidepressant
- Amantadine (Symmetrel, Symadine), conivaptan, methotrimeprazine, potassium chloride, pramlintide, secretin

MEDICAL CONDITIONS:

- Glaucoma, enlarged prostate (difficulty passing urine in men), stomach ulcer, myasthenia gravis, problems with your esophagus
- Liver, kidney or heart disease irregular heartbeat, heart failure
- History of alcohol or drug dependency
- Pregnancy or breastfeeding

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

WARNINGS:

- This drug may cause dizziness or drowsiness. Do not drive, ride a bicycle, or operate dangerous equipment while taking this medicine until you know how it will affect you.
- Avoid the use of alcohol when taking this medicine since it may cause extreme drowsiness or even unconsciousness.

[NOTE: This information topic may not include all directions, precautions, medical conditions, drug/food interactions, and warnings for this drug. Check with your doctor, nurse, or pharmacist for any questions that you may have.]

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MEDICATION: TRAMADOL

You have been prescribed a pain medicine called tramadol (brand: Ultram).

DIRECTIONS FOR USE:

Take this medicine with a full glass of water, with or without food. Pain medicine should be taken only if needed at the times prescribed. Unless told otherwise, do not take the medicine if you are not having pain.

Oral Disintegrating Tablet (ODT): Take with or without food. Remove tablet from blister pack by peeling the foil back. Do not try to push tablet through the foil. Do not break, chew, split, or crush the tablet. Place tablet in the mouth on the tongue. It will dissolve in one minute.

Extended-release tablets (ER): Take this medicine with a full glass of water, with or without food. Do not break, chew, dissolve, or crush tablets.

WHAT TO WATCH FOR:

POSSIBLE SIDE EFFECTS: Dizziness, drowsiness, or headache (Take a smaller dose or take it less often). Constipation (Drink lots of liquids, use small doses of a mild laxative like milk of magnesia, as needed). Nausea, vomiting (Take with food and a full glass of water). Nervousness, tremor, anxiety, sweating (Contact your doctor). Trouble passing urine, fast or irregular heartbeat, chest pain, fainting, blood in vomit or stools (red or black color), abdominal pain, yellow eyes or skin, dark urine, seizure (Contact your doctor or go to the Emergency Department).

ALLERGIC REACTION: Rash, itching, swelling, trouble breathing or swallowing (Contact your doctor or return to this facility promptly).

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

MEDICAL CONDITIONS: Before starting this medicine, be sure your doctor knows if you have any of the following conditions:

- History of a seizure disorder (epilepsy)
- History of alcohol or substance abuse
- Kidney or liver disease, heart disease (arrhythmia, heart attack, or angina)
- Lung disease (severe asthma, difficulty breathing)
- History of depression or other psychiatric illness
- Pregnancy or breastfeeding

DRUG INTERACTIONS: Before starting this medicine, be sure your doctor knows if you are taking any of the following medicines:

- Medicine for sleep, anxiety, muscle spasm
- Parkinson's medicines (rasagiline, selegiline)
- Quinaglute (quinidine), Coumadin (warfarin), Lanoxin (digoxin), Tegretol (carbamazepine)
- Antidepressants [Elavil (amitriptyline) and others], narcotic pain medicines
- Psychiatric medicine [Thorazine (chlorpromazine), and others], antihistamines, MAO inhibitors within 14 days [furazolidone, linezolid, procarbazine], St. John's wort

WARNINGS:

- Do not drive, ride a bicycle, or operate dangerous equipment while taking this medicine until you know how this drug will affect you.
- This drug may cause increased side effects when taken with alcohol, muscle relaxants, sedatives, anxiety medicines, antihistamines, antidepressants, MAO-inhibitors, seizure medicines, or another pain medicine.
- Prolonged use of this medicine can be habit forming and may lead to addiction.

[NOTE: This information topic may not include all directions, precautions, medical conditions, drug/food interactions, and warnings for this drug. Check with your doctor, nurse, or pharmacist for any questions that you may have.]

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DOCUMENT NAME:

ED Patient Summary

SERVICE DATE/TIME:

2/23/2015 15:47 EST

RESULT STATUS:

Auth (Verified)

PERFORM INFORMATION:

Kirkland RN, Justin (2/23/2015 15:47 EST)

SIGN INFORMATION:

Kirkland RN, Justin (2/23/2015 15:47 EST)

ED Patient Summary

AIKEN REGIONAL MEDICAL CENTER

Print Date/Time 4/15/2015 11:56 EDT

Medical Record

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W. KLOTZ 000024

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

Confirmation of Receipt of Instructions**Name: KLOTZ, WILLIAM****Age: 67 Years Date of Birth: 9/08/1947 12:00 AM****MRN: AIK179607 FIN: AIK0000116473117 Arrival Time: 2/23/2015 2:09 PM****Diagnosis: Back pain 724.5; Lumbar sprain 847.2; Neck strain 847.0****Patient Visit Summary:****KLOTZ, WILLIAM** has been provided patient education materials, follow-up instructions and prescriptions.**My Signature Below Indicates:**

- > I have received and understood the oral instructions regarding my current medical problem.
- > I will arrange follow-up care as instructed, outlined in this and any following page(s).
- > I acknowledge continuing medications prescribed by my regular doctor.
- > I acknowledge receipt of the written instructions as outlined in this and any previous page(s).
- > I will read and review these instructions.
- > I acknowledge that I will contact my Primary Care Physician or return to the Emergency Department immediately if symptoms worsen or persist.

☐ Patient Refuses to Sign☐ Patient Left Without Signing☐ Patient was informed of their non-emergent status

Patient Signature

Parent / Guardian (if patient is a minor)

Nurse Signature (if not patient signature)

Hospital Witness Signature (if no patient signature)**NOTE: Permanent Medical Record****AIKEN REGIONAL MEDICAL CENTER****302 University Parkway, Aiken, SC 29801**

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

www.aikenregional.com

(803) 641-5000

Name: KLOTZ, WILLIAM**Age:** 67 Years **Date of Birth:** 9/08/1947 12:00 AM**MRN:** AIK179607 **FIN:** AIK0000116473117 **Arrival Time:** 2/23/2015 2:09 PM**Diagnosis:** Back pain 724.5; Lumbar sprain 847.2; Neck strain 847.0**Emergency Department Care Team:****Provider:** ED AIK, Staff Physician

The Emergency Department physician has reviewed the information that you have provided concerning medications that have been prescribed previously and found there to be no conflict with any therapy recommended by the Emergency Department physicians. Unless instructed by the Emergency Department physician to discontinue specific medications, you should continue medications prescribed by your regular doctor and follow-up with your doctor or with the physician/facility recommended by the ED as appropriate.

If you plan on operating a motor vehicle or using any dangerous equipment within the next several hours, please check with your physician or nurse to make sure that none of the medicines that you received in the Emergency Department could interfere with your performance of these tasks.

The physicians and staff of the Aiken Regional Medical Center encourage you to lead a healthy lifestyle. If you smoke, we strongly urge you to quit. Contact your local American Lung Association for additional information.

Allergies:

No Known Medication Allergies

Vaccination/Immunologic Information**Prescriptions Given to Patient/Caregiver(s):**

Prescription	Display
naproxen (naproxen 500 mg oral tablet)	500 mg = 1 Tabs, Oral, BID, PRN for pain, # 10 Tabs, 0 Refill(s), Maintenance
orphenadrine (orphenadrine 100 mg oral tablet, extended release)	100 mg = 1 Tabs, Oral, BID, X 7 Days, # 14 Tabs, 0 Refill(s), Acute, 03/02/15

Print Date/Time 4/15/2015 11:56 EDT

Medical Record

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W. KLOTZ 000026

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

traMADol (Ultram 50 mg oral tablet)	50 mg = 1 Tabs, Oral, q4H, PRN for pain, # 12 Tabs, 0 Refill(s), Maintenance
Home Meds	Display
amLODIPine (Norvasc 5 mg oral tablet)	1 Tabs, Oral, Daily, # 30 Tabs, 0 Refill(s), Maintenance
amLODIPine-benazepril (Lotrel 5 mg-10 mg oral capsule)	1 Caps, Oral, Daily, # 30 Caps, 0 Refill(s), Maintenance
aspirin (Aspir 81)	81 mg =, Oral, Daily, 0 Refill(s), Maintenance
metFORMIN (metFORMIN 500 mg oral tablet)	1 Tabs, Oral, BID, # 60 Tabs, 0 Refill(s), Maintenance

*Medication Special Considerations:***Patient Education Materials Provided:**

BACK PAIN (Acute or Chronic); ARMC ED Safe Medication Management (Custom); NAPROSYN; ORPHENADRINE; TRAMADOL

*Comment:***Follow-up Instructions:****With:**

return sooner if worse or other concerning signs or symptoms

Address:**When:**

Within 1-2 days

Comments:**With:**

AIK- Margaret J. Weston Health Clinic

Address:4645 Augusta Rd Clearwater, SC 29822
8035939283 Business (1)**When:**

Within 1-2 days

Comments:**With:****Address:****When:**

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

Dr No pcp no family

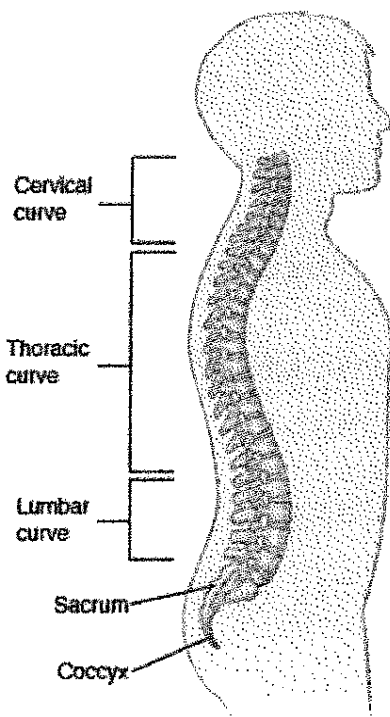
000000000

Within 1-2 days

Comments:

11575106

BACK PAIN [acute or chronic]



Back pain is usually caused by an injury to the muscles or ligaments of the spine. Sometimes the disks that separate each bone in the spine may bulge and cause pain by pressing on a nearby nerve. Back pain may also appear after a sudden twisting/bending force (such as in a car accident), after a simple awkward movement, or lifting something heavy with poor body positioning. In either case, muscle spasm is often present and adds to the pain.

Acute back pain usually gets better in one to two weeks. Back pain related to disk disease, arthritis in the spinal joints or spinal stenosis (narrowing of the spinal canal) can become chronic and last for months or years.

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

Unless you had a physical injury (for example, a car accident or fall) X-rays are usually not ordered for the initial evaluation of back pain. If pain continues and does not respond to medical treatment, x-rays and other tests may be performed at a later time.

HOME CARE:

1. You may need to stay in bed the first few days. But, as soon as possible, begin sitting or walking to avoid problems with prolonged bed rest (muscle weakness, worsening back stiffness and pain, blood clots in the legs).
2. When in bed, try to find a position of comfort. A firm mattress is best. Try lying flat on your back with pillows under your knees. You can also try lying on your side with your knees bent up towards your chest and a pillow between your knees.
3. Avoid prolonged sitting. This puts more stress on the lower back than standing or walking.
4. During the first two days after injury, apply an ICE PACK to the painful area for 20 minutes every 2-4 hours. This will reduce swelling and pain. HEAT (hot shower, hot bath or heating pad) works well for muscle spasm. You can start with ice, then switch to heat after two days. Some patients feel best alternating ice and heat treatments. Use the one method that feels the best to you.
5. You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]
6. Be aware of safe lifting methods and do not lift anything over 15 pounds until all the pain is gone.

FOLLOW UP with your doctor or this facility if your symptoms do not start to improve after one week. Physical therapy may be needed.

[NOTE: If X-rays were taken, they will be reviewed by a radiologist. You will be notified of any new findings that may affect your care.]

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Pain becomes worse or spreads to your legs
- Weakness or numbness in one or both legs
- Loss of bowel or bladder control

Numbness in the groin or genital area

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SPECIAL INSTRUCTIONS FOR HANDLING YOUR MEDICATIONS

It is very important to take your medications as directed. In addition, you should provide a list of your medications to your primary care Physician. Your medication list should be updated when medications are changed or discontinued

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

and when new medications are added (including over the counter medications). Carry your medication list with you at all times as this can provide very valuable information in the event you are involved in an emergency situation.

Please be sure to bring your medication list with you anytime you visit the Emergency Department.

FOLLOW UP with your doctor or as advised by our staff. If you do not have your own doctor, we can recommend one for you.

To find additional information about the medications you are taking, you can visit the following website -
ConsumerMedSafety.org.

11/17/2015

MEDICATION: NAPROXEN

Naproxen (brand names: Naprosyn, Anaprox, Aleve, Naprelan, Pamprin, Midol) is an anti-inflammatory drug which is very useful for pain and inflammatory conditions.

DIRECTIONS FOR USE:

You may take this medicine with food to reduce stomach upset.

WHAT TO WATCH FOR:

POSSIBLE SIDE EFFECTS: Nausea, upper abdominal pain, drowsiness, dizziness, ringing in the ears (Contact your doctor if these symptoms persist or become severe). Bleeding from the stomach, which may appear as blood in vomit or stool (red or black color); rapid weight gain, leg swelling or easy bruising, change in the amount of urine, confusion/mood changes, very stiff neck, yellowing of the eyes/skin (Contact your doctor or return to this facility promptly).

ALLERGIC REACTION: Rash, itching, swelling, trouble breathing or swallowing (Contact your doctor or return to this facility promptly).

MEDICAL CONDITIONS: Before starting this medicine, be sure your doctor knows if you have any of the following conditions:

- Stomach ulcer (active or in the past), history of vomiting blood or bloody stools
- Allergic reaction to aspirin or other anti-inflammatory medicines
- Asthma, nasal polyps or angioedema; pregnancy or breastfeeding
- Liver or kidney disease; bleeding disorder, diabetes

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

DRUG INTERACTION: Before starting this medicine, be sure your doctor knows if you are taking any of the following drugs:

- Blood thinners [Coumadin (warfarin), low molecular weight heparins, heparin], cyclosporine, diuretics (water pills), blood pressure pills, ACE inhibitors (Lotensin, Capoten, Vasotec, Zestril, and others), diabetes pills, steroids (methylprednisolone, prednisone), aspirin or other anti-inflammatory drugs, methotrexate, probenecid, cidofovir, antiplatelet drugs such as Plavix (clopidogrel), desmopressin, drugs for osteoporosis [Fosamax(alendronate)], lithium, pemetrexed, bile acid binding resins, drotrecogin, SSRI antidepressants (fluoxetine, sertraline)

WARNINGS:

- Do not take with prednisone, other anti-inflammatory drugs, or alcohol since this increases the risk of getting a bleeding ulcer.
- Do not drive, ride a bicycle, or operate dangerous equipment while taking this medicine until you know how it will affect you.

[NOTE: This information topic may not include all directions, precautions, medical conditions, drug/food interactions, and warnings for this drug. Check with your doctor, nurse, or pharmacist for any questions that you may have.]

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11/18/2019

MEDICATION: ORPHENADRINE

Orphenadrine (brand: Norflex) is a muscle relaxant used to relieve pain from muscle spasm.

DIRECTIONS FOR USE:

This medicine may be taken with or without food. If you find that it upsets your stomach, taking it with food will help. Take the medicine at regular intervals as described on the prescription label. If the label says "every 12 hours" this means twice a day.

WHAT TO WATCH FOR:

POSSIBLE SIDE EFFECTS: Dry mouth, drowsiness, dizziness, nausea, headache, tremor, blurred vision, constipation, fast/irregular heartbeats, mood changes, hallucinations, weakness (Contact your doctor if symptoms persist or become severe). Difficulty passing urine (Contact your doctor or return to this facility if your bladder feels full and you have been unable to pass urine for more than 8 hours).

ALLERGIC REACTION: Rash, itching, swelling, trouble breathing or swallowing (Contact your doctor or return to this facility promptly).

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

DRUG INTERACTIONS: Before starting this medicine, be sure your doctor knows if you are taking any of the following:

- Another muscle relaxant, sedative, sleeping pill, antihistamine, narcotic pain medicine, antidepressant
- Amantadine (Symmetrel, Symadine), conivaptan, methotrimeprazine, potassium chloride, pramlintide, secretin

MEDICAL CONDITIONS:

- Glaucoma, enlarged prostate (difficulty passing urine in men), stomach ulcer, myasthenia gravis, problems with your esophagus
- Liver, kidney or heart disease irregular heartbeat, heart failure
- History of alcohol or drug dependency
- Pregnancy or breastfeeding

WARNINGS:

- This drug may cause dizziness or drowsiness. Do not drive, ride a bicycle, or operate dangerous equipment while taking this medicine until you know how it will affect you.
- Avoid the use of alcohol when taking this medicine since it may cause extreme drowsiness or even unconsciousness.

[NOTE: This information topic may not include all directions, precautions, medical conditions, drug/food interactions, and warnings for this drug. Check with your doctor, nurse, or pharmacist for any questions that you may have.]

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MEDICATION: TRAMADOL

You have been prescribed a pain medicine called tramadol (brand: Ultram).

DIRECTIONS FOR USE:

Take this medicine with a full glass of water, with or without food. Pain medicine should be taken only if needed at the times prescribed. Unless told otherwise, do not take the medicine if you are not having pain.

Oral Disintegrating Tablet (ODT): Take with or without food. Remove tablet from blister pack by peeling the foil back. Do not try to push tablet through the foil. Do not break, chew, split, or crush the tablet. Place tablet in the mouth on the tongue. It will dissolve in one minute.

Extended-release tablets (ER): Take this medicine with a full glass of water, with or without food. Do not break, chew, dissolve, or crush tablets.

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

WHAT TO WATCH FOR:

POSSIBLE SIDE EFFECTS: Dizziness, drowsiness, or headache (Take a smaller dose or take it less often). Constipation (Drink lots of liquids, use small doses of a mild laxative like milk of magnesia, as needed). Nausea, vomiting (Take with food and a full glass of water). Nervousness, tremor, anxiety, sweating (Contact your doctor). Trouble passing urine, fast or irregular heartbeat, chest pain, fainting, blood in vomit or stools (red or black color), abdominal pain, yellow eyes or skin, dark urine, seizure (Contact your doctor or go to the Emergency Department).

ALLERGIC REACTION: Rash, itching, swelling, trouble breathing or swallowing (Contact your doctor or return to this facility promptly).

MEDICAL CONDITIONS: Before starting this medicine, be sure your doctor knows if you have any of the following conditions:

- History of a seizure disorder (epilepsy)
- History of alcohol or substance abuse
- Kidney or liver disease, heart disease (arrhythmia, heart attack, or angina)
- Lung disease (severe asthma, difficulty breathing)
- History of depression or other psychiatric illness
- Pregnancy or breastfeeding

DRUG INTERACTIONS: Before starting this medicine, be sure your doctor knows if you are taking any of the following medicines:

- Medicine for sleep, anxiety, muscle spasm
- Parkinson's medicines (rasagiline, selegiline)
- Quinaglute (quinidine), Coumadin (warfarin), Lanoxin (digoxin), Tegretol (carbamazepine)
- Antidepressants [Elavil (amitriptyline) and others], narcotic pain medicines
- Psychiatric medicine [Thorazine (chlorpromazine), and others], antihistamines, MAO inhibitors within 14 days [furazolidone, linezolid, procarbazine], St. John's wort

WARNINGS:

- Do not drive, ride a bicycle, or operate dangerous equipment while taking this medicine until you know how this drug will affect you.
- This drug may cause increased side effects when taken with alcohol, muscle relaxants, sedatives, anxiety medicines, antihistamines, antidepressants, MAO-inhibitors, seizure medicines, or another pain medicine.
- Prolonged use of this medicine can be habit forming and may lead to addiction.

[NOTE: This information topic may not include all directions, precautions, medical conditions, drug/food interactions, and warnings for this drug. Check with your doctor, nurse, or pharmacist for any questions that you may have.]

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Emergency Dept

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Major Tests and Procedures:

The following procedures and tests were performed during your ED visit.

Laboratory Orders

No laboratory orders were placed.

Radiology Orders

Name	Status	Details
CT Spine	Completed	02/23/15 14:23:00 EST, Stat, Neck Trauma, rearended at 70mph on I-20, 185.42 cm, 92.99
Cervical w/o		
Contrast		
CT Spine	Completed	02/23/15 14:23:00 EST, Stat, Back Pain - Trauma, 185.42 cm, 92.99
Lumbar w/o		
Contrast		

Cardiology Orders

No cardiology orders were placed.

DOCUMENT NAME:	ED Clinical Summary
SERVICE DATE/TIME:	2/23/2015 15:47 EST
RESULT STATUS:	Auth (Verified)
PERFORM INFORMATION:	Kirkland RN,Justin (2/23/2015 15:47 EST)
SIGN INFORMATION:	Kirkland RN,Justin (2/23/2015 15:47 EST)

ED Clinical Summary

AIK- Aiken Regional Medical Centers
302 University Parkway
Aiken, SC 29801
<http://www.aikenregional.com/>
(803) 641-5000

SUMMARY OF CARE

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

This document contains **CONFIDENTIAL** health information that is legally privileged. Please be sure to take this document to your follow-up appointment so that your provider has access to the necessary information about your recent hospitalization.

Patient Information:

Name: KLOTZ, WILLIAM

Age: 67 Years

DOB: 9/08/1947 12:00 AM

Sex: Male

Language: ENG-English

PCP: No pcp no family, Dr MD

MRN: AIK179607

FIN: AIK0000116473117

FC:

Arrival Date: 2/23/2015 2:09 PM

Disposition: ED Home, Routine

Discharge: 2/23/2015 3:47 PM

Diagnosis: Back pain 724.5; Lumbar

ED Depart Time:

sprain 847.2; Neck strain 847.0

2/23/2015 3:47 PM

Visit Summary For WILLIAM KLOTZ

We would like to thank you for allowing us to assist you with your healthcare needs. Our entire staff strives to provide an excellent experience for our patients and their families. The following includes information regarding your visit.

Age: 67 years **Sex:** Male **DOB:** 09/08/1947 **MRN:** 179607**Address:** 115 CHESNEY GLEN DR MATTHEWS, NC 281055899**Home:** 7042498665 **Work:** -- **Mobile:** --**Primary Care Provider:** No pcp no family, Dr MD**Race:** White **Ethnicity:** Non-Hispanic**Language:** ENG-English**Health Plan:** --**Problems****Active**

Hypercholesteremia

Diabetes

Hypertension

Follow Up**With:**

return sooner if worse or
other concerning signs or
symptoms

Address:**When:**

Within 1-2 days

Comments:

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Admit: 2/23/2015
MRN: AIK179607 Disch: 2/23/2015
DOB/Sex: 9/8/1947 / Male FIN: AIK0000116473117
Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

With:	Address:	When:
AIK- Margaret J. Weston Health Clinic	4645 Augusta Rd Clearwater, SC 29822 8035939283 Business (1)	Within 1-2 days

Comments:

With:	Address:	When:
Dr No pcip no family	0000000000	Within 1-2 days

Comments:

Care Team

Attending: ED AIK, Staff Physician

Admitting: ED AIK, Staff Physician

Consulting:

Allergies

No Known Medication Allergies

Medical Information

Prescriptions Given to Patient/Caregiver(s):**Fill New Prescriptions:**

naproxen (naproxen 500 mg oral tablet) 500 mg By Mouth 2 Times a Day as needed for for pain
orphenadrine (orphenadrine 100 mg oral tablet, extended release) 100 mg By Mouth 2 Times a Day 7 Days
traMADol (Ultram 50 mg oral tablet) 50 mg By Mouth Every 4 Hours as needed for for pain

Home Medications per Patient/Caregiver(s):**Home Meds**

aspirin (Aspir 81), 81 Milligrams, By Mouth, Daily
amLODIPine-benazepril (Lotrel 5 mg-10 mg oral capsule), 1 Capsules, By Mouth, Daily
amLODIPine (Norvasc 5 mg oral tablet), 1 Tabs, By Mouth, Daily
metFORMIN (metFORMIN 500 mg oral tablet), 1 Tabs, By Mouth, 2 Times a Day

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept

Smoking Status

Functional Status

Mode of Discharge: Ambulates without assistance

Home Equipment:

Level of Consciousness:

Affect/Behavior:

Activities of Daily Living:

Care Plan

Patient Education Information:

Instructions Provided:

BACK PAIN (Acute or Chronic); ARMC ED Safe Medication Management (Custom); NAPROSYN; ORPHENADRINE; TRAMADOL

Physician Documentation / Notes:

Patient: KLOTZ, WILLIAM MRN: AIK179607 FIN: AIK0000116473117
Age: 67 years Sex: Male DOB: 09/08/47
Associated Diagnoses: None
Author: Finch PA-C, Gregory

Basic Information

Time seen: Date & time 02/23/15 14:27:00, Provider Assignment
Finch PA-C, Gregory assigned at 02/23/2015 14:18

Additional information: Chief Complaint from Nursing Triage Note : Chief Complaint
02/23/15 14:12 EST Chief Complaint Chief Complaint .

History of Present Illness

The patient presents with back pain. The onset was 1 days ago. The course/duration of symptoms is intermittent. Location: Bilateral lumbar neck. Radiating pain: none. The character of symptoms is achy. The degree at onset was minimal. The degree at present is minimal. The exacerbating factor is movement. The relieving factor is none. Risk factors consist of none. Associated symptoms: denies bowel dysfunction, denies bladder dysfunction and denies saddle numbness. 67-year-old male presents to the ER status post MVC yesterday where he was restrained driver of vehicle without airbags deployment. Patient states he was going about 60 mi./h 1 eye 20 she rounded he thinks by something going 70 miles per hour causing him to spin out and push him into a mud pile but did not hit median or anything else. no blood thionner use and only on 81 mg ASA> denies headache, only compaling on neck and lower badck pain.

Review of Systems

Constitutional symptoms: Negative except as documented in HPI, No fever,

Print Date/Time 4/15/2015 11:56 EDT

Medical Record

Page 30 of 59

W. KLOTZ 000037

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Emergency Dept**Skin symptoms:** Negative except as documented in HPI.**Eye symptoms:** Negative except as documented in HPI.**ENMT symptoms:** Negative except as documented in HPI.**Respiratory symptoms:** Negative except as documented in HPI, No shortness of breath,**Cardiovascular symptoms:** Negative except as documented in HPI, No chest pain,**Gastrointestinal symptoms:** Negative except as documented in HPI.**Genitourinary symptoms:** Negative except as documented in HPI.**Musculoskeletal symptoms:** Negative except as documented in HPI.**Neurologic symptoms:** Negative except as documented in HPI, No headache,**Psychiatric symptoms:** Negative except as documented in HPI.**Endocrine symptoms:** Negative except as documented in HPI.**Hematologic/Lymphatic symptoms:** Negative except as documented in HPI.**Allergy/immunologic symptoms:** Negative except as documented in HPI.**Additional review of systems information:** All other systems reviewed and otherwise negative.**Health Status****Allergies:**Allergic Reactions (Selected)

No Known Medication Allergies.

Past Medical/ Family/ Social History**Medical history:** PMH/Problems ST

No problems documented.

Surgical history:

No active procedure history items have been selected or recorded..

Family history:

No family history items have been selected or recorded..

Social history: Social History ST**Social & Psychosocial Habits****Tobacco**08/28/2014 **Patient Smoked Cigarettes During Last 12 Months:** No08/28/2014 **Smoking History:** Never smoker.**Physical Examination****Vital Signs**

Vital Signs (ST)

Vital Signs (24 hrs)**Last Charted****Minimum****Maximum**

Temp	36.7	(FEB 23 14:11)	36.7	(FEB 23 14:11)	36.7	(FEB 23 14:11)
Peripheral Pulse Rate	82	(FEB 23 14:11)	82	(FEB 23 14:11)	82	(FEB 23 14:11)
Resp Rate	16	(FEB 23 14:11)	16	(FEB 23 14:11)	16	(FEB 23 14:11)
SBP	H 172	(FEB 23 14:11)	H 172	(FEB 23 14:11)	H 172	(FEB 23 14:11)
DBP	87	(FEB 23 14:11)	87	(FEB 23 14:11)	87	(FEB 23 14:11)
SpO2	99	(FEB 23 14:11)	99	(FEB 23 14:11)	99	(FEB 23 14:11)

Room air

Room air

Room air

General: Alert, no acute distress.**Skin:** Warm, dry.

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Emergency Dept**Head:** Normocephalic, atraumatic.**Neck:** Supple, trachea midline, generalized tenderness to palpation.**Eye:** Pupils are equal, round and reactive to light, non-icteric.**Cardiovascular:** Regular rate and rhythm, No murmur, No edema.**Respiratory:** Lungs are clear to auscultation, respirations are non-labored, breath sounds are equal.**Back:** Lumbar: Diffuse, lateral, no vertebral point tenderness.**Musculoskeletal:** Normal ROM, normal strength, no tenderness.**Neurological:** Alert and oriented to person, place, time, and situation, No focal neurological deficit observed, normal motor observed, normal coordination observed, I4,I5,s1 intact, Patient able to dorsiflex and extend bilateral feet and extend and flex legs equal strength.**Psychiatric:** Cooperative, appropriate mood & affect, normal judgment, non-suicidal.**Medical Decision Making****Radiology results:** Computed tomography, interpretation: l spine and c spine no acute.**Impression and Plan****Diagnosis**

Back pain 724.5 - ICD9 724.5,

Lumbar sprain 847.2 - ICD9 847.2,

Diagnosis

Neck strain 847.0 - ICD9 847.0,

Plan**Condition:** Stable.**Prescriptions:** Launch PrescriptionWriter

Pharmacy:

orphenadrine 100 mg oral tablet, extended release (Prescribe): 100 mg, 1 Tabs, Oral, BID, 14 Tabs

Ultram 50 mg oral tablet (Prescribe): 50 mg, 1 Tabs, Oral, q4H, 12 Tabs, PRN, for pain

naproxen 500 mg oral tablet (Prescribe): 500 mg, 1 Tabs, Oral, BID, 10 Tabs, PRN, for pain

Admit/Transfer/Discharge:

Discharge Request (Order): 02/23/15 15:40 EST, Home Routine.

Patient was given the following educational materials: BACK PAIN (Acute or Chronic).**Follow up with:** Dr No pcp no family Within 1-2 days; return sooner if worse or other concerning signs or symptoms Within 1-2 days; AIK-Margaret J. Weston Health Clinic Within 1-2 days.**Counseled:** Patient, Regarding diagnosis, Regarding diagnostic results, Regarding treatment plan, Regarding prescription, Patient indicated understanding of instructions.

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Coding

Patient Name: KLOTZ, WILLIAM
Date of Birth: 9/8/1947

MRN: AIK179607
FIN: AIK0000116473117

498
* Auth (Verified) *

Aiken Regional Medical Centers
302 University Parkway
Aiken, SC 29801

Outpatient Coding Summary

Account Number: 116473117						
Patient Name KLOTZ, WILLIAM			Sex Male	Birth Date 09/08/1947	Age 67	MR Number 179607
Admit Date 02/23/15 02:09 PM	Discharge Date 02/23/15 11:59 PM	LOS 1	Financial Class MANAGED CARE		Disposition 01 AHR ROUTINE DISCHARGE	
Attending Physician 807412		Coder LLoyd, Christina			Patient Type OP-TRAUMA/ER	
Admit Diagnosis						
7245 Backache, unspecified						
Diagnosis Reason for Visit						
Primary Diagnosis						
8470 Neck sprain						
Secondary Diagnosis						
8472 Lumbar sprain EB160 Motor vehicle accident due to loss of control, without collision on highway, driver (other than motorcycle) E8495 Injury or poisoning occurring at/in street and highway E0009 Unspecified external cause status						
Procedures			Provider		Date	
CPT Procedures and Modifiers			Provider		Date	
72125 CT cervical spine w/o contrast material 72131 CT lumbar spine w/o contrast material 99284 -25 Emergency department visit high/urgent severity; (-2					02/23/15 02/23/15 02/23/15	
APC	CPT	APC Text	APC Weight	APC Pct	APC Reimb	CMS Reimb
19937	72125	19937 Packaged service included in Composite APC rate	0.00	0.00	0.00	0.00
08005	72131	08005 CT and CTA without Contrast Composite	4.22	1.00	286.74	228.46
00615	99284	00615 Level 4 Type A Emergency Visits	4.50	1.00	305.43	243.34
APC Total Reimbursement 592.17		APC Total Weight 8.73		Total CMS Reimbursement 471.80		
Bill Type 131	Claim Type Other	Claim Disposition Only edits are 3M proprietary		Condition Code None		

8049

Outpatient Coding Summary

3M HRM APCFm_RfV_Port.doc 07/11/08

MR number: 179607
Admit date: 02/23/15 02:09 PM
Confidential

Account number: 116473117
Discharge date: 02/23/15 11:59 PM
Page 1 of 1

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Consents

Patient Name: KLOTZ, WILLIAM
Date of Birth: 9/8/1947

MRN: AIK179607
FIN: AIK0000116473117

500
* Transcribed *

Notice To All Persons Signing This Document:

By my signature on this document, I agree and consent to all terms and conditions detailed below regarding hospital care and treatment to be given to me by the hospital unless otherwise noted.

Consent to Hospital Procedures:

I consent to medical and surgical procedures that might be performed during this hospitalization or outpatient visit, including emergency treatment or services for the patient. These services may include but are not limited to laboratory tests, X-rays, medical or surgical treatment or procedures, anesthesia, and hospital services rendered to me under the general and special instructions of the attending physician or surgeon.

I hereby authorize Aiken Regional Medical Centers to recognize my attending physician as the manager of my medical and/or surgical care and treatment. I consent to and authorize my attending physician and/or his/her designee, to administer treatment (medical, surgical, anesthetic, obstetrical and/or any other therapeutic or diagnostic procedure) that he/she/they may dictate as advisable for my well being. I understand that Aiken Regional Medical Centers will provide medical and insurance information to my designated primary care provider and/or referred healthcare providers for the purpose of continuing care.

I understand that the hospital may have affiliations with a variety of health care related educational programs. These programs may include but are not limited to: Nursing, Medical, EMT, surgical technician and physical medicine. I consent to have students participate in my care under the supervision of their instructor(s) and understand that I must express any refusal to have them participate to a management representative such as charge nurse, nurse manager, shift manager, department director, senior manager, etc.

The nature of the operation/treatment has been explained to me. I am aware that the practice of medicine and surgery is not an exact science. **No** warranty or guarantee has been made to me as to a cure or the treatment's result.

I authorize Aiken Regional Medical Centers to retain, preserve, and to use for scientific or teaching purposes, and properly dispose of any specimen or tissue removed from my body during this hospitalization or outpatient visit.

I understand that pictures may be taken of my medical/surgical condition or treatment. I understand that pictures might be used for purposes of my diagnosis, treatment, or for educational training programs conducted by the hospital. These pictures will be part of the documentation in my medical record.

Special Consent for HIV Testing and Other Blood Borne Pathogens

I understand that this consent form covers testing for blood borne infectious diseases, including but not limited to hepatitis, acquired immune deficiency syndrome (AIDS), and human immunodeficiency virus (HIV). A physician may order such test(s) for diagnostic purposes to determine the appropriate treatment and/or treatment procedures for me or to protect the attending physician and/or any employee or agent of the hospital exposed to my bodily fluids in a manner which could transmit such disease.

Physician Providers Are Not Hospital Employees

I acknowledge and agree that Aiken Regional Medical Centers is not responsible for the judgment or conduct of any physician who treats or provides a professional service to me, but rather each physician is an independent contractor who is not the agent, servant, or employee of the hospital. The hospital or affiliate agency is not liable for any acts or omission made by any physician or in following the order of the physician.

Page 1 of 2

 Aiken Regional Medical Centers
302 University Pkwy
PO Drawer 1117
Aiken, SC 29801



CO0225

Treatment Authorization

UHS-9010
Rev. 1/11

Patient Identification



116473117-179607

KLOTZ, WILLIAM

DOB: 09/08/1947 67 Y SX: M EMR

MRN: 179607 ADM/REG DT: 02/23/2015

Aiken Regional Medical Centers

Patient Name: KLOTZ, WILLIAM
Date of Birth: 9/8/1947

MRN: AIK179607
FIN: AIK0000116473117

501
* Transcribed *

Signatures (Please read before signing.)

This is to certify that I, the undersigned, being the patient, or another person legally authorized to act for the patient, have carefully read and fully understand this treatment authorization and am duly authorized to execute the above and accept its terms.

The undersigned acknowledges having read and received a copy of this document. A copy of this authorization shall be as valid as the original.

William Klotz 2/23/15 15:49
Patient Signature Date Time

[Signature] Relationship to Patient

[Signature] 2nd Witness Signature for Verbal Consent

The patient could not sign because: _____

Page 2 of 2

 **Aiken Regional Medical Centers**
302 University Pkwy
PO Drawer 1117
Aiken, SC 29801



CO0225

**Treatment
Authorization**

UHS-9010
Rev. 1/11

Patient Identification



116473117-179607

KLOTZ, WILLIAM
DOB: 09/08/1947 67 Y SX: M EMR
MRN: 179607 ADM/REG DT: 02/23/2015
Aiken Regional Medical Centers

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM
MRN: AIK179607
DOB/Sex: 9/8/1947 / Male
Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
Disch: 2/23/2015
FIN: AIK0000116473117

Orders

Order: Discharge Request

Order Date/Time: 2/23/2015 15:40 EST

Signed Date/Time: 2/23/2015 15:40 EST

Order Status: Discontinued

Department Status:
DiscontinuedCatalog Type:
Admit/Transfer/DischargeActivity Type:
Admit/Transfer/Discharge
TransMedRec

End-state Date/Time: 2/24/2015 04:01 EST

End-state Reason:

Ordering Physician: Finch PA-C,Gregory

Consulting Physician:

Entered By: SYSTEM on 2/24/2015 04:01 EST

Order Details: 02/23/15 15:40:00 EST, Home Routine

Order Comment:

Action Type: Discontinue

Action Date/Time: 2/24/2015 04:01 EST

Action Personnel: SYSTEM

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type:

Order Details: 02/23/15 15:40:00 EST, Home Routine

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 2/23/2015 15:40 EST

Action Personnel: Finch PA-C,Gregory

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 15:40:00 EST, Home Routine

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 3/15/2015 23:50 EDT

Doctor Cosign: Not Required

Order Comment:

AIK- Aiken Regional Medical Centers⁵⁰³

Patient: KLOTZ, WILLIAM
MRN: AIK179607
DOB/Sex: 9/8/1947 / Male
Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
Disch: 2/23/2015
FIN: AIK0000116473117

Orders

Order: CT Spine Lumbar w/o Contrast (L-Spine CT w/o Contrast)

Order Date/Time: 2/23/2015 14:23 EST

Signed Date/Time: 2/23/2015 14:23 EST

Order Status: Completed Department Status: Completed Catalog Type: Radiology Activity Type: Radiology

End-state Date/Time: 2/23/2015 15:35 EST

End-state Reason:

Ordering Physician: Finch PA-C,Gregory

Consulting Physician:

Entered By: Gay,Alfonso MD on 2/23/2015 15:35 EST

Order Details: 02/23/15 14:23:00 EST, Stat, Back Pain - Trauma

Order Comment:

Action Type: Complete

Action Date/Time: 2/23/2015 15:35 EST

Action Personnel: Gay,Alfonso MD

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Back Pain - Trauma

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 2/23/2015 15:05 EST

Action Personnel: Furnas,Monica

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Back Pain - Trauma

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 2/23/2015 14:53 EST

Action Personnel: Furnas,Monica

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Back Pain - Trauma

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 2/23/2015 14:24 EST

Action Personnel: Finch PA-C,Gregory

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Back Pain - Trauma

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 3/15/2015 23:50 EDT

Doctor Cosign: Not Required

Order Comment:

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM
MRN: AIK179607
DOB/Sex: 9/8/1947 / Male
Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
Disch: 2/23/2015
FIN: AIK0000116473117

Orders

Order: CT Spine Cervical w/o Contrast (CT C-Spine w/o Contrast)

Order Date/Time: 2/23/2015 14:23 EST

Signed Date/Time: 2/23/2015 14:23 EST

Order Status: Completed Department Status: Completed Catalog Type: Radiology Activity Type: Radiology

End-state Date/Time: 2/23/2015 15:28 EST

End-state Reason:

Ordering Physician: Finch PA-C,Gregory

Consulting Physician:

Entered By: Gay,Alfonso MD on 2/23/2015 15:28 EST

Order Details: 02/23/15 14:23:00 EST, Stat, Neck Trauma, rearended at 70mph on I-20

Order Comment:

Action Type: Complete

Action Date/Time: 2/23/2015 15:28 EST

Action Personnel: Gay,Alfonso MD

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Neck Trauma, rearended at 70mph on I-20

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 2/23/2015 15:05 EST

Action Personnel: Furnas,Monica

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Neck Trauma, rearended at 70mph on I-20

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Status Change

Action Date/Time: 2/23/2015 14:53 EST

Action Personnel: Furnas,Monica

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Neck Trauma, rearended at 70mph on I-20

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order

Action Date/Time: 2/23/2015 14:24 EST

Action Personnel: Finch PA-C,Gregory

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 02/23/15 14:23:00 EST, Stat, Neck Trauma, rearended at 70mph on I-20

Review Information:

Nurse Review: No Longer Needing Review, SYSTEM on 3/15/2015 23:50 EDT

Doctor Cosign: Not Required

Order Comment:

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM
 MRN: AIK179607
 DOB/Sex: 9/8/1947 / Male
 Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
 Disch: 2/23/2015
 FIN: AIK0000116473117

Orders

Order: ED Triage Mobile

Order Date/Time: 2/23/2015 14:09 EST

Signed Date/Time: 2/23/2015 14:09 EST

Order Status: Canceled Department Status: Canceled Catalog Type: Patient Care Activity Type: Basic Care

End-state Date/Time: 2/23/2015 14:09 EST End-state Reason: Duplicate Order

Ordering Physician: SYSTEM Consulting Physician:

Entered By: SYSTEM on 2/23/2015 14:09 EST

Order Details: 02/23/15 14:09:42 EST, Routine, Constant order

Order Comment: Ordered by Discern Expert.

Action Type: Cancel Action Date/Time: 2/23/2015 14:09 EST Action Personnel: SYSTEM

Electronically Signed by: SYSTEM Supervising Provider: Communication Type: Discern Expert

Order Details: 02/23/15 14:09:42 EST, Routine, Constant order

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order Action Date/Time: 2/23/2015 14:09 EST Action Personnel: SYSTEM

Electronically Signed by: SYSTEM Supervising Provider: Communication Type: Discern Expert

Order Details: 02/23/15 14:09:42 EST, Routine, Constant order

Review Information:

Doctor Cosign: Not Required

Order Comment: Ordered by Discern Expert.

Order: Vital Signs Mobile

Order Date/Time: 2/23/2015 14:09 EST

Signed Date/Time: 2/23/2015 14:09 EST

Order Status: Discontinued Department Status: Discontinued Catalog Type: Patient Care Activity Type: Basic Care

End-state Date/Time: 2/23/2015 18:01 EST End-state Reason:

Ordering Physician: SYSTEM Consulting Physician:

Entered By: SYSTEM on 2/23/2015 18:01 EST

Order Details: 02/23/15 14:09:42 EST, Routine

Order Comment: Ordered by Discern Expert.

Action Type: Discontinue Action Date/Time: 2/23/2015 18:01 EST Action Personnel: SYSTEM

Electronically Signed by: SYSTEM Supervising Provider: Communication Type:

Order Details: 02/23/15 14:09:42 EST, Routine

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Order Action Date/Time: 2/23/2015 14:09 EST Action Personnel: SYSTEM

Electronically Signed by: SYSTEM Supervising Provider: Communication Type: Discern Expert

Order Details: 02/23/15 14:09:42 EST, Routine

Review Information:

Doctor Cosign: Not Required

Order Comment: Ordered by Discern Expert.

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM
MRN: AIK179607
DOB/Sex: 9/8/1947 / Male
Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
Disch: 2/23/2015
FIN: AIK0000116473117

Orders - Medications

Documented medications

Order: aspirin (Aspir 81)

Order Date/Time: 2/23/2015 15:22 EST

Signed Date/Time: 2/23/2015 15:22 EST

Order Status: Documented

Clinical Category: Medications

Medication Type: Documented

Ordering Physician:

Consulting Physician:

Entered By: Menze RN,Theresa on 2/23/2015 15:22 EST

Order Details: 81 mg =, Oral, Daily, 0 Refill(s), Maintenance

Order Comment:

Action Type: Document

Action Date/Time: 2/23/2015 15:22 EST

Action Personnel: Menze RN,Theresa

Electronically Signed by:

Supervising Provider:

Communication Type:

Order Details: 81 mg =, Oral, Daily, 0 Refill(s), Maintenance

Review Information:

Doctor Cosign: Not Required

Order Comment:

Order: amLODIPine (Norvasc 5 mg oral tablet)

Order Date/Time: 2/23/2015 15:21 EST

Signed Date/Time: 2/23/2015 15:21 EST

Order Status: Documented

Clinical Category: Medications

Medication Type: Documented

Ordering Physician:

Consulting Physician:

Entered By: Menze RN,Theresa on 2/23/2015 15:22 EST

Order Details: 1 Tabs, Oral, Daily, # 30 Tabs, 0 Refill(s), Maintenance

Order Comment:

Action Type: Document

Action Date/Time: 2/23/2015 15:22 EST

Action Personnel: Menze RN,Theresa

Electronically Signed by:

Supervising Provider:

Communication Type:

Order Details: 1 Tabs, Oral, Daily, # 30 Tabs, 0 Refill(s), Maintenance

Review Information:

Doctor Cosign: Not Required

Order Comment:

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM
MRN: AIK179607
DOB/Sex: 9/8/1947 / Male
Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
Disch: 2/23/2015
FIN: AIK0000116473117

Orders - Medications

Documented medications

Order: amLODIPine-benazepril (Lotrel 5 mg-10 mg oral capsule)

Order Date/Time: 2/23/2015 15:21 EST

Signed Date/Time: 2/23/2015 15:21 EST

Order Status: Documented

Clinical Category: Medications

Medication Type: Documented

Ordering Physician:

Consulting Physician:

Entered By: Menze RN,Theresa on 2/23/2015 15:22 EST

Order Details: 1 Caps, Oral, Daily, # 30 Caps, 0 Refill(s), Maintenance

Order Comment:

Action Type: Document

Action Date/Time: 2/23/2015 15:22 EST

Action Personnel: Menze RN,Theresa

Electronically Signed by:

Supervising Provider:

Communication Type:

Order Details: 1 Caps, Oral, Daily, # 30 Caps, 0 Refill(s), Maintenance

Review Information:

Doctor Cosign: Not Required

Order Comment:

Order: metFORMIN (metFORMIN 500 mg oral tablet)

Order Date/Time: 2/23/2015 15:20 EST

Signed Date/Time: 2/23/2015 15:20 EST

Order Status: Documented

Clinical Category: Medications

Medication Type: Documented

Ordering Physician:

Consulting Physician:

Entered By: Menze RN,Theresa on 2/23/2015 15:22 EST

Order Details: 1 Tabs, Oral, BID, # 60 Tabs, 0 Refill(s), Maintenance

Order Comment:

Action Type: Document

Action Date/Time: 2/23/2015 15:22 EST

Action Personnel: Menze RN,Theresa

Electronically Signed by:

Supervising Provider:

Communication Type:

Order Details: 1 Tabs, Oral, BID, # 60 Tabs, 0 Refill(s), Maintenance

Review Information:

Doctor Cosign: Not Required

Order Comment:

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM
MRN: AIK179607
DOB/Sex: 9/8/1947 / Male
Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015
Disch: 2/23/2015
FIN: AIK0000116473117

Orders - Medications

Prescription

Order: naproxen (naproxen 500 mg oral tablet)

Order Date/Time: 2/23/2015 15:40 EST

Signed Date/Time: 2/23/2015 15:40 EST

Order Status: Prescribed

Clinical Category: Medications

Medication Type: Prescription

Ordering Physician: Finch PA-C,Gregory

Consulting Physician:

Entered By: Finch PA-C,Gregory on 2/23/2015 15:40 EST

Order Details: 500 mg = 1 Tabs, Oral, BID, PRN for pain, # 10 Tabs, 0 Refill(s), Maintenance

Order Comment:

Action Type: Prescribe

Action Date/Time: 2/23/2015 15:40 EST

Action Personnel: Finch PA-C,Gregory

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 500 mg = 1 Tabs, Oral, BID, PRN for pain, # 10 Tabs, 0 Refill(s), Maintenance

Review Information:

Doctor Cosign: Not Required

Order Comment:

Order: orphenadrine (orphenadrine 100 mg oral tablet,extended release)

Order Date/Time: 2/23/2015 15:40 EST

Signed Date/Time: 2/23/2015 15:40 EST

Order Status: Completed

Clinical Category: Medications

Medication Type: Prescription

End-state Date/Time: 3/2/2015 15:40 EST

End-state Reason:

Ordering Physician: Finch PA-C,Gregory

Consulting Physician:

Entered By: SYSTEM on 3/2/2015 15:47 EST

Order Details: 100 mg = 1 Tabs, Oral, BID, X 7 Days, # 14 Tabs, 0 Refill(s), Acute, 03/02/15

Order Comment:

Action Type: Status Change

Action Date/Time: 3/2/2015 15:47 EST

Action Personnel: SYSTEM

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type:

Order Details: 100 mg = 1 Tabs, Oral, BID, X 7 Days, # 14 Tabs, 0 Refill(s), Acute, 03/02/15

Review Information:

Doctor Cosign: Not Required

Order Comment:

Action Type: Prescribe

Action Date/Time: 2/23/2015 15:40 EST

Action Personnel: Finch PA-C,Gregory

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 100 mg = 1 Tabs, Oral, BID, X 7 Days, # 14 Tabs, 0 Refill(s), Acute, 03/02/15

Review Information:

Doctor Cosign: Not Required

Order Comment:

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Orders - Medications

Prescription

Order: traMADol (Ultram 50 mg oral tablet)

Order Date/Time: 2/23/2015 15:40 EST

Signed Date/Time: 2/23/2015 15:40 EST

Order Status: Prescribed

Clinical Category: Medications

Medication Type: Prescription

Ordering Physician: Finch PA-C, Gregory

Consulting Physician:

Entered By: Finch PA-C, Gregory on 2/23/2015 15:40 EST

Order Details: 50 mg = 1 Tabs, Oral, q4H, PRN for pain, # 12 Tabs, 0 Refill(s), Maintenance

Order Comment:

Action Type: Prescribe

Action Date/Time: 2/23/2015 15:40 EST

Action Personnel: Finch PA-C, Gregory

Electronically Signed by: Finch PA-C,
Gregory

Supervising Provider:

Communication Type: Written

Order Details: 50 mg = 1 Tabs, Oral, q4H, PRN for pain, # 12 Tabs, 0 Refill(s), Maintenance

Review Information:

Doctor Cosign: Not Required

Order Comment:

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Admit: 2/23/2015
MRN: AIK179607 Disch: 2/23/2015
DOB/Sex: 9/8/1947 / Male FIN: AIK0000116473117
Attending: Echemendia-Wirth MD,Suzanne M

Assessment Forms

DOCUMENT TYPE: ED Triage and Assessment Adult - Text
SERVICE DATE/TIME: 2/23/2015 15:15 EST
RESULT STATUS: Auth (Verified)
PERFORMED INFORMATION: Menze RN,Theresa (2/23/2015 15:15 EST)
SIGNED INFORMATION: Menze RN,Theresa (2/23/2015 15:15 EST)

ED Assessment Adult Entered On: 2/23/2015 15:20 EST
Performed On: 2/23/2015 15:15 EST by Menze RN, Theresa

Primary Pain

Numeric Rating : 3
Primary Pain Location : Other: Lower back and both shoulders and neck.
Laterality : Bilateral
Quality : Aching
Onset : Sudden
Pain Duration : Pick up truck behind pt broke an axil and ran into the car's rear end.. His truck was going about 70mph while pt was going about 60mph. Pt was restrained driver. No airbag deployment. Pt states his car spun in a 360 degree circle.
Time Pattern : Acute
Associated Symptoms : None
Aggravating Factors : Movement, Palpation
Alleviating Factors : None
Primary Pain Comment : No weakness of legs. Neck is stiff and sore. Pt has good ROM of arms. Good radial and pedal pulses. Good cap. refill.

Menze RN, Theresa - 2/23/2015 15:15 EST

Procedure History ED

Medical Devices : None

Menze RN, Theresa - 2/23/2015 15:15 EST

Procedure History

(As Of: 2/23/2015 15:20:32 EST)

Safety

Environmental Safety in Place : Adequate room lighting, Bed in low position, Call device within reach, Wheels locked
Patient Identified : Name, DOB
Participative in Fall Prevention : Yes

Menze RN, Theresa - 2/23/2015 15:15 EST

Social History

Cultural Practices to be honored? : No

Menze RN, Theresa - 2/23/2015 15:15 EST

Social History

(As Of: 2/23/2015 15:20:32 EST)

DOCUMENT TYPE: ED Vital Signs and Pain - Text
SERVICE DATE/TIME: 2/23/2015 15:43 EST
RESULT STATUS: Auth (Verified)
PERFORMED INFORMATION: Kirkland RN,Justin (2/23/2015 15:43 EST)
SIGNED INFORMATION: Kirkland RN,Justin (2/23/2015 15:43 EST)

Print Date/Time 4/15/2015 11:56 EDT

Medical Record

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W. KLOTZ 000053

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Assessment Forms**ED Reassess / Vital Signs and Pain Adult Entered On: 2/23/2015 3:44 PM EST****Performed On: 2/23/2015 3:43 PM EST by Kirkland RN, Justin****Respiratory***Respirations* : Unlabored

Kirkland RN, Justin - 2/23/2015 3:43 PM EST

Neurological*Orientation Assessment* : Oriented x 4*Level of Consciousness* : Alert

Kirkland RN, Justin - 2/23/2015 3:43 PM EST

ED Nurse Reassessment*Nursing Note* : Scripts given. Pt to follow up with Margaret j. weston clinic in 1-2 days

Kirkland RN, Justin - 2/23/2015 3:43 PM EST

Discharge Care Plan*Mode of Discharge* : Ambulates without assistance*Discharge Transportation* : Private vehicle*Accompanied By* : Alone

Kirkland RN, Justin - 2/23/2015 3:43 PM EST

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Education Forms

DOCUMENT TYPE:

ED Education - Text

SERVICE DATE/TIME:

2/23/2015 15:44 EST

RESULT STATUS:

Auth (Verified)

PERFORMED INFORMATION:

Kirkland RN, Justin (2/23/2015 15:44 EST)

SIGNED INFORMATION:

Kirkland RN, Justin (2/23/2015 15:44 EST)

ED Education Entered On: 2/23/2015 3:44 PM EST**Performed On: 2/23/2015 3:44 PM EST by Kirkland RN, Justin****Education History***Education History :* Education

No Data Available

Kirkland RN, Justin - 2/23/2015 3:44 PM EST

Education*Responsible Learner(s) :* No Data Available*Barriers To Learning :* None evident*Teaching Method :* Explanation, Printed materials

Kirkland RN, Justin - 2/23/2015 3:44 PM EST

ED Medication Education Grid*Impact of Noncompliance w/ Med Regime :* Verbalizes understanding*Med Dosage, Route, Scheduling :* Verbalizes understanding*Med Generic/Brand Name, Purpose, Action :* Verbalizes understanding*Medication Precautions :* Verbalizes understanding

Kirkland RN, Justin - 2/23/2015 3:44 PM EST

General Education Peds Ongoing*Activity Recommendations :* Verbalizes understanding*Pain Management :* Verbalizes understanding*Rest :* Verbalizes understanding

Kirkland RN, Justin - 2/23/2015 3:44 PM EST

ED Post Hospitalization Education Grid*Follow-Up Care/Appointment :* Verbalizes understanding*When to Call Health Care Provider :* Verbalizes understanding

Kirkland RN, Justin - 2/23/2015 3:44 PM EST

Education Referral Made To : Primary Care Physician

Kirkland RN, Justin - 2/23/2015 3:44 PM EST

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Problems

Problem Name: **Diabetes**

Last Updated: 2/23/2015

Problem Name: **Hypercholesteremia**

Last Updated: 2/23/2015

Problem Name: **Hypertension**

Last Updated: 2/23/2015

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

MRN: AIK179607

DOB/Sex: 9/8/1947 / Male

Attending: Echemendia-Wirth MD,Suzanne M

Admit: 2/23/2015

Disch: 2/23/2015

FIN: AIK0000116473117

Measurements

Recorded Date	2/23/2015	2/23/2015
Recorded Time	14:12 EST	14:12 EST
Recorded By	Frank RN,Alyce N	Frank RN,Alyce N
Procedure		
Height	-	185.42
Height Method	-	Stated
Weight	-	92.99
Daily Weight kg	-	92.99
Weight Method	-	Stated
		Stated
BSA	2.19	-
Body Mass Index Measured	-	27.05

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Vital Signs

Recorded Date	2/23/2015
Recorded Time	14:11 EST
Recorded By	Frank RN, Alyce N

Procedure

Temperature (Route Not Specified)	36.7
Temperature Convert C to F	98.1
Temperature Method	Oral
Peripheral Pulse Rate	82
Respiratory Rate	16
Systolic Blood Pressure	172 ^H
Diastolic Blood Pressure	87
BP Site	Right arm

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Pain Assessment

Recorded Date	2/23/2015	2/23/2015
Recorded Time	15:15 EST	14:11 EST
Recorded By	Menze RN, Theresa	Frank RN, Alyce N
Procedure		
Primary Pain Location	See Below ^{T1}	-
Primary Pain Laterality	Bilateral	-
Primary Pain Quality	Aching	-
Primary Pain Duration	See Below ^{T2}	-
Pain Level Acceptable to Patient	-	No
Numeric Pain Scale	3	3
Primary Pain Time Pattern	Acute	-
Primary Pain Onset	Sudden	-
Primary Pain Aggravating Factors	Movement, Palpation	-
Primary Pain Alleviating Factors	None	-
Primary Pain Comment	See Below ^{T3}	-
Pain Associated Symptoms	None	-

Textual Results

T1: 2/23/2015 15:15 EST (Primary Pain Location)

Other: Lower back and both shoulders and neck.

T2: 2/23/2015 15:15 EST (Primary Pain Duration)

Pick up truck behind pt broke an axil and ran into the car's rear end.. His truck was going about 70mph while pt was going about 60mph. Pt was restrained driver. No airbag deployment. Pt states his car spun in a 360 degree circle.

T3: 2/23/2015 15:15 EST (Primary Pain Comment)

No weakness of legs. Neck is stiff and sore. Pt has good ROM of arms. Good radial and pedal pulses. Good cap. refill.

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Assessments and Treatments

	Recorded Date	2/23/2015	2/23/2015	2/23/2015
	Recorded Time	15:43 EST	15:23 EST	15:15 EST
	Recorded By	Kirkland RN,Justin	Menze RN,Theresa	Menze RN,Theresa
Procedure				
Respirations	Unlabored		-	-
Level of Consciousness	Alert		-	-
Environmental Safety Implemented	-		-	See Below ^{T1}
Participative in Fall Prevention	-		-	Yes
Suicidal Ideation	-		None	-
Orientation Assessment	Oriented x 4		-	-
Threatened/Physically Hurt in Past Year	-		No	-
Cultural Practices to be honored?	-		-	No

Textual Results

T1: 2/23/2015 15:15 EST (Environmental Safety Implemented)

Adequate room lighting, Bed in low position, Call device within reach, Wheels locked

	Recorded Date	2/23/2015
	Recorded Time	14:11 EST
	Recorded By	Frank RN,Alyce N
Procedure		
Oxygen Therapy	Room air	
SpO2	99	

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Infection Control

Recorded Date	2/23/2015
Recorded Time	14:12 EST
Recorded By	Frank RN, Alyce N

Procedure

MRSA Screen Hx MRSA	No
Alcohol and Drug Use	No
Employee of Institutional Living	No
Health Care Employee	No
History of Exposure to TB	No
History of Positive Chest X-Ray for TB	No
History of Positive TB Skin Test	No
Homeless	No
Known Immunosuppression	No
Recent Immigrant	No
Resident of Institutional Living	No
Bloody Sputum	No
Fatigue	No
Fever	No
Loss of Appetite	No
Night Sweats	No
Persistent Cough > 3 Weeks	No
Weight Loss	No
Travel Out of Country	No

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Perioperative Documentation

Recorded Date	2/23/2015
Recorded Time	15:15 EST
Recorded By	Menze RN, Theresa
Procedure	
Patient Identified	Name, DOB

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Patient and Family Education

	Recorded Date	2/23/2015
	Recorded Time	15:44 EST
	Recorded By	Kirkland RN,Justin
Procedure		
Ed-Activity Recommendations		Verbalizes understanding
Barriers to Learning		None evident
Education Referral Made to		Primary Care Physician
Ed-Follow-Up Care/Appointment		Verbalizes understanding
Ed-Impact of Noncompliance w/Med Regime		Verbalizes understanding
Ed-Med Generic/Brand Name,Purpose,Action		Verbalizes understanding
Ed-Medication Dosage,Route,Scheduling		Verbalizes understanding
Ed-Medication Precautions		Verbalizes understanding
Ed-Pain Management		Verbalizes understanding
Responsible Learner/s Present		See Below ^{T1}
Ed-Rest		Verbalizes understanding
Teaching Method		Explanation, Printed materials
Ed-When to Call Health Care Provider		Verbalizes understanding

Textual Results

T1: 2/23/2015 15:44 EST (Responsible Learner/s Present)
No Data Available

AIK- Aiken Regional Medical Center

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD,Suzanne M

Quality Measure Info

	Recorded Date	2/23/2015	2/23/2015
	Recorded Time	15:23 EST	15:23 EST
	Recorded By	SYSTEM	Menze RN,Theresa
Procedure			
Tobacco Use Screening	-	No tobacco use of any form	
Tobacco Use Last 30 Days	-	Yes	
Reg PN Pneumo Vaccine 65 or Older Goal	Met	-	
Reg PN Flu Vaccine 50 or Older Goal	Met	-	

AIK- Aiken Regional Medical Centers
302 University Parkway
Aiken, SC 29801-6302

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

Disch Time: 15:47 EST

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Allergies

Substance	Allergy Type	Reaction Symptom	Reviewed Date/Time	Reaction Status
No Known Medication Allergies	Allergy		2/23/2015 14:26 EST	Active

Medical Record

Print Date/Time 4/15/2015 11:56 EDT

Report Request ID: 47370189

Page 1 of 59

W. KLOTZ 000065

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Facesheets

Patient Name: KLOTZ, WILLIAM
Date of Birth: 9/8/1947MRN: AIK179607
FIN: AIK0000116473117524
* Transcribed *

MED REC# 179607

PT# 116473117		PATIENT NAME KLOTZ, WILLIAM	
ADDRESS 115 CHESNEY GLEN DR		COUNTY 088	
CITY MATTHEWS	STATE NC	ZIP 281055899	PHONE (704)249-8665
PATIENT LANGUAGE ENGLISH			
AGE 67 Y	D.O.B. 09/08/1947	SEX M	RACE 1
NS M	ETHNICITY N	PREVIOUS NAME	RELIGION PRE
PT EMPLOYER SRNS	TELEPHONE (888)	EXT.	OCCUPATION SRNS
EMPLOYER ADDRESS			
CITY AIKEN	STATE SC	ZIP 29808	RETIREMENT DATE //
Contact Information			
NEAREST RELATIVE NAME KLOTZ, LYNDA			
R/TN U	ADDRESS 115 CHESNEY GLEN DR		
CITY MATTHEWS	STATE NC	ZIP 281055899	PHONE (704)847-7467
EXT.			
EMERGENCY CONTACT NAME KLOTZ, LYNDA			
R/TN U	ADDRESS 115 CHESNEY GLEN DR		
CITY MATTHEWS	STATE NC	ZIP 281055899	PHONE (704)847-7467
EXT.			
Guarantor Information			
GUARANTOR NAME KLOTZ, WILLIAM			
R/TN S			
ADDRESS 115 CHESNEY GLEN DR			
CITY MATTHEWS	STATE NC	ZIP 281055899	PHONE (704)847-7467
EXT.			
GUARANTOR EMPLOYER SRNS			
PHONE (704)			
EXT.			
ADDRESS			
CITY AIKEN	STATE SC	ZIP 29808	
Admitting Information			
ADM DATE 02/23/2015	TIME 1409	SRC EO	PT TYPE T
PRI X	ACCIDENT INFO B	02/22/2015 1600	VOLUNTARY ADM
ORGAN DNR	ISOL	PT STB EA	
ATTENDING PHYSICIAN FINCH GREGORY	ATTENDING # 049452	REF SRC	ADM BY
PREV ADM DATE	PREVIOUS FACILITY		
ADM DIAGNOSIS MVC	HOSP SYC EMR	DIAGNOSTIC CODE	SURGERY DATE //
BLDLESS NS	RMBED	EDWICKY	
ADMITTING PHYSICIAN FINCH GREGORY	ADMITTING # 049452	DISCHARGE DATE //	TIME
DISCHARGE DISP A	PREVIOUS DISCHARGE DATE		
PROCEDURE	CLINICAL COMMENT	MODE OF ARRIVAL / ACCOMPANIED BY	
REFERRING PHYSICIAN NO REFERRING DOCTOR		REFERRING # 999870	
REL OF	ADV DIR	LIVING WILL	LOCATION OF WILL / DIRECTIVE
FAMILY DOCTOR		FAMILY DOCTOR #	
DIV			

Aiken Regional Medical Centers
302 University Pkwy
PO Drawer 1117
Aiken, SC 29801

EL0012

MEDICAL
RECORDUHS-9002
Rev. 01/13

Patient Identification



116473117-179607

KLOTZ, WILLIAM

DOB: 09/08/1947 67 Y SX: M EMR

MRN: 179607 ADM/REG DT: 02/23/2015

Aiken Regional Medical Centers

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM

Admit: 2/23/2015

MRN: AIK179607

Disch: 2/23/2015

DOB/Sex: 9/8/1947 / Male

FIN: AIK0000116473117

Attending: Echemendia-Wirth MD, Suzanne M

Discharge instructions

Patient Name: KLOTZ, WILLIAM
Date of Birth: 9/8/1947

MRN: AIK179607
FIN: AIK0000116473117

526
* Auth (Verified) *

AIKEN REGIONAL MEDICAL CENTER

Confirmation of Receipt of Instructions

Name: KLOTZ, WILLIAM

Age: 67 Years Date of Birth: 9/08/1947 12:00 AM

MRN: AIK179607 FIN: AIK0000116473117 Arrival Time: 2/23/2015 2:09 PM

Diagnosis: Back pain 724.5; Lumbar sprain 847.2; Neck strain 847.0

Patient Visit Summary:

KLOTZ, WILLIAM has been provided patient education materials, follow-up instructions and prescriptions.

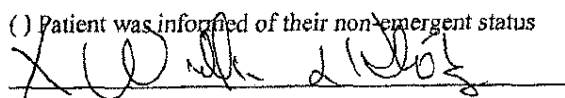
My Signature Below Indicates:

- > I have received and understood the oral instructions regarding my current medical problem.
- > I will arrange follow-up care as instructed, outlined in this and any following page(s).
- > I acknowledge continuing medications prescribed by my regular doctor.
- > I acknowledge receipt of the written instructions as outlined in this and any previous page(s).
- > I will read and review these instructions.
- > I acknowledge that I will contact my Primary Care Physician or return to the Emergency Department immediately if symptoms worsen or persist.

☐ Patient Refuses to Sign

☐ Patient Left Without Signing

☐ Patient was informed of their non-emergent status



Patient Signature

Parent / Guardian (if patient is a minor)

Nurse Signature (if not patient signature)

Hospital Witness Signature (if no patient signature)



116473117-179607
KLOTZ, WILLIAM
DOB: 09/08/1947 67 Y SX: M EMR
MRN: 179607 ADM/REG DT: 02/23/2015
Aiken Regional Medical Centers

Patient Name: KLOTZ, WILLIAM
MRN: AIK179607

FIN: AIK0000116473117

02/23/2015 3:43:22 PM

12/21/2017 11:06 FAX 7066677455

MCBS, LLC.

0010

PATIENT: KLOTZ, WILLIAM
DOB: 09/08/1947
SSN: 226-64-9103
Date of Service: 02/23/2015

527

AIK- Aiken Regional
Medical Centers
Aiken, SC 29801-6302
(803) 641-5000

Patient: KLOTZ, WILLIAM Date of Birth: 9
/8/1947

Ordering Physician: Finch PA-C, Gregory Patient Type: Emergency Patient Location: AIK
ED

Attending Physician: Finch PA-C, Gregory

Imaging

CT Spine Cervical w/o Contrast 2/23/2015 15:05

EST

Report

CT CERVICAL SPINE:

Clinical History: Trauma, neck pain

Technique: 2 mm contiguous axial
images are obtained through the cervical spine.

Additional coronal and sagittal multiplanar reformation
was performed.

Findings: No soft tissue hematoma is identified. The cervical spine is normally
aligned.

No fracture is identified. There is degenerative disc space narrowing and C4-C5, C5-C6 and
C6-C7.

There is fusion of the left C2-C3 facet joint. Facet degenerative changes are noted
at C4-C5 level
bilaterally.

CONCLUSION:

No acute osseous abnormality.

Dictated By: ALFONSO GAY, MD

DID 453

02

D:/T:/12100421 /Job ID 13088750 /DT:02/23/2015 15:27:56/TD:02/23/2015 15:24:14 /Rev:

02/23/2015

15:24:14

CC:

This document was electronically signed by ALFONSO GAY, MD on

02/23/2015 15:27:57 .

Final *****

Dictated by: Gay, Alfonso MD Dictated DT/TM: 02/23/2015 3:27 pm

Transcribed By:

AGTranscribed by: AG Transcribed DT/TM: 02/23/15 15:24:00

Electronically Signed by: Gay, Alfonso MD

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MRN:AIK179607 FIN:AIK0000116473117 Accession Number: 59-CT-15-002859 Page 1 of 1

12/21/2017 11:07 FAX 7066677455

MCBS, LLC.

0011

PATIENT: KLOTZ, WILLIAM
DOB: 09/08/1947
SSN: 226-64-9103
Date of Service: 02/23/2015

528

AIK- Aiken Regional
Medical Centers
Aiken, SC 29801-6302
(803) 641-5000
Patient: KLOTZ, WILLIAM Date of Birth: 9
/8/1947
Ordering Physician: Finch PA-C, Gregory Patient Type: Emergency Patient Location: AIK
ED
Attending Physician: Finch PA-C, Gregory
Imaging
CT Spine Lumbar w/o Contrast 2/23/2015 15:05
EST
Report

CT lumbar spine:

Clinical History: Trauma by motor vehicle accident, back pain

Technique: 3

mm contiguous axial images are obtained through the lumbar spine. Additional
coronal and sagittal
multiplanar reformation was performed.

Findings: No soft tissue hematoma is identified. The lumbar spine
is normally aligned. No
fracture is identified. There is fusion of L4-L5 disc space. Vacuum phenomenon is
noted at
L5-S1 from disc degeneration. Severe facet degenerative changes are noted on the left at
L5-S1.
There are bilateral facet degenerative changes at L3-L4, more severe on the left.

CONCLUSION:

No acute
osseous abnormality.

Dictated By: ALFONSO GAY, MD
DID 43302
D:/T:/12100463 /Job ID 13088789 /DT:02/23/2015
15:35:18/TD:02/23/2015 15:30:48 /Rev:
02/23/2015 15:30:48

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02/23/2015 15:35:19 .
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02/23/2015 3:35 pm

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00

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MRN: AIK179607

FIN: AIK0000116473117 Accession Number: 59-CT-15-002860 Page 1 of 1

12/21/2017 11:07 FAX 7066677455

MCBS, LLC.

0012

529

AIK- Aiken Regional Medical Centers

Aiken, SC 29801-6302

(803) 641-5000

Patient: KLOTZ, WILLIAM Date of

Birth: 9/8/1947

Ordering Physician: Meeks AHP, Jonathan Patient Type: Emergency Patient Location: AIK

ED

Attending Physician: Fabiano MD, Sarah

Imaging

XR Chest 2 Views 11/22/2015 14:36 EST

Report

PA AND LAT

CHEST:

Clinical History: Cough

Technique: PA and lateral views were obtained.

Comparison: 8/2

8/2014

Findings: The lungs are clear. No pneumothorax identified. Tiny left pleural effusion.

The

cardiomediastinal contours are within normal limits. No acute osseous abnormality

identif

ied.

Impression:

Tiny left pleural effusion. Lungs are otherwise clear.

Dictated By: DUSTIN JOHNSON, MD

DID

822015

D:/T:/13308627 /Job ID 14336654 /DT:11/22/2015 14:39:48/TD:11/22/2015 14:39:20 /Rev:

11/22/2015

14:39:20

cc:

This document was electronically signed by DUSTIN JOHNSON, MD on

11/22/2015 14:39:50 .

Final *****

Dictated by: Johnson MD, Dustin Dictated DT/TM: 11/22/2015 2:39 pm

Transcribed By:

DJ Transcribed by: DJ Transcribed DT/TM: 11/22/15 14:39:00

Electronically Signed by: Johnson MD, Dustin

Signed DT/TM: 11/22/2015 2:39 pm

MRN: AIK179607 FIN: AIK0000117693762 Accession Number: 59-XR-15-051914 Page 1 of 1

12/21/2017 11:08 FAX 7066677455

MCBS, LLC.

0013

530

AIK- Aiken Regional Medical Centers

Aiken, SC 29801-6302

(803) 641-5000

Patient: KLOTZ, WILLIAM Date of

Birth: 9/8/1947

Ordering Physician: Anderson, Jonathan MD Patient Type: Outpatient Patient Location: AIK
Radiology

Attending Physician: Anderson, Jonathan MD

Imaging

CT Abdomen/Pelvis w/o Contrast 4/29/2016

07:27 EDT

Report

CT ABDOMEN AND PELVIS WITHOUT CONTRAST:

Clinical History: Hematuria, kidney
stones

Technique: 5 mm contiguous axial images are obtained from the lung base through the pubic
symphysis

without IV contrast. The lack of IV contrast may limit the study, particularly in
assessment of the visceral
organs and vascular structures.

Comparison: 10/17/2005

Findings:

CT Lung Bases: Trace left pleural effusion
versus pleural thickening is noted.

CT Abdomen:

Liver: Unremarkable.

Spleen: Unremarkable.

Adrenal glands:

Unremarkable.

Pancreas: Unremarkable.

Gallbladder: Minimal layering densities in the gallbladder may
reflect gallstones. There

is no gallbladder wall thickening.

Kidneys: Punctate mid left calcification is
consistent with a renal calculus. No

hydronephrosis noted. There are several calcifications in the right
kidney, particularly

in the lower pole consistent with renal calculi. The largest calculus measures 5 mm.

There

are at least 2 calcifications in the right renal pelvis. A larger stone measures 9 mm.

There is,

however no significant hydronephrosis.

Aorta: Normal caliber. Atherosclerotic calcification is
noted.

Appendix: Not visualized.

There is no significant bowel loop distention or ascites. Diverticulosis
of the descending

colon is noted. No free air is identified. There is fusion of L4-L5 disc space.

CT

Pelvis: The urinary bladder is grossly unremarkable. No bladder calcifications are
identified. There is no

free pelvic fluid. Sigmoid diverticulosis is noted.

CONCLUSION:

1. Right nephrolithiasis with a 9 mm

calculus in the renal pelvis. No hydronephrosis
noted.

2. Punctate left renal calculus.

3. Colonic

diverticulosis.

MRN: AIK179607 FIN: AIK0000118401793 Accession Number: 59-CT-16-007282 Page 1 of 2

Report

Request Id: 66662933

AIK- Aiken Regional Medical Centers

Patient: KLOTZ, WILLIAM Date of Birth:

9/8/1947

Ordering Physician: Anderson, Jonathan MD Patient Type: Outpatient Patient Location: AIK
Radiology

Imaging

CT Abdomen/Pelvis w/o Contrast 4/29/2016 07:27 EDT

Report

Dictated By: ALFONSO GAY,

MD

DID 45302

D:/T:/13720547 /Job ID 14747106 /DT:04/29/2016 13:50:56/TD:04/29/2016 13:14:12

/Rev:

04/29/2016 13:14:12

12/21/2017 11:08 FAX 7066677455

MCBS, LLC.

0014

531

cc:

This document was electronically signed by ALFONSO GAY, MD on
04/29/2016

13:50:59 .

***** Final *****

Dictated by: Gay Jr. MD, Alfonso Dictated DT/TM: 04/29/2016 1:50

pm

Transcribed By: AGTranscribed by: AG Transcribed DT/TM: 04/29/16 13:14:00

Electronically Signed by: Gay Jr. MD, Alfonso Signed DT/TM: 04/29/2016 1:50 pm

MRN:AIK179607 FIN:AIK0000118401793 Accession Number: 59-CT-16-007282 Page 2 of 2

12/21/2017 11:09 FAX 7066677455

MCBS, LLC.

0015

532

AIK- Aiken Regional Medical Centers

Aiken, SC 29801-6302

(803) 641-5000

Patient: KLOTZ, WILLIAM Date of

Birth: 9/8/1947

Ordering Physician: Anderson, Jonathan MD Patient Type: Day Surgery Patient

Location:

Attending Physician: Anderson, Jonathan MD

Imaging

XR Abdomen AP 7/19/2016 06:59 E

DT

Report

ABDOMEN

CLINICAL HISTORY: Preop left side lithotripsy.

COMPARISON: CT 4/29/2016

TECHNIQUE:

Multiple views of the abdomen are provided.

FINDINGS:

The intestinal gas pattern is non-distended and

non-obstructive. Stool overlies the

bilateral renal shadows. There is no abnormal mass or organomegaly.

There is a 9 x 5 mm

calcification overlying the right renal hilum. There is a subtle 4 mm cal

cification

overlying the right lower pole. There is no nephrolithiasis the left identified. There

are

degenerative changes of the lumbar spine. There are postsurgical changes of lower

abdominal hernia

repair coils.

IMPRESSION:

1. Right nephrolithiasis.

2. No visualization of left nephrolithiasis.

3. Stool

overlying bilateral renal shadows.

Dictated By: Stefan Ploch, MD

DID 821991

D:/T:/13864937 /Job ID 14888693

/DT:07/19/2016 12:57:16/TD:07/19/2016 12:53:03 /Rev:

07/19/2016 12:53:03

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This document was

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07/19/2016 12:57:17 .

MRN:AIK179607 FIN:AIK0000118690833

Accession Number: 59-XR-16-032295 Page 1 of 2

Report Request Id: 71218377

AIK- Aiken Regional Medical

Centers

Patient: KLOTZ, WILLIAM Date of Birth: 9/8/1947

Ordering Physician: Anderson, Jonathan MD Patient

Type: Day Surgery Patient Location:

Imaging

XR Abdomen AP 7/19/2016 06:59 EDT

Report

***** Final

Dictated by: Ploch, Stefan MD Dictated DT/TM: 07/19/2016 12:57 pm

Transcribed By: SP Transcribed

by: SP Transcribed DT/TM: 07/19/16 12:53:00

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07/19/2016 12:57 pm

MRN:AIK179607 FIN:AIK0000118690833 Accession Number: 59-XR-16-032295 Page 2 of 2

12/21/2017 11:09 FAX 7066677455

MCBS, LLC.

0016

533

AIK- Aiken Regional Medical Centers

Aiken, SC 29801-6302

(803) 641-5000

Patient: KLOTZ, WILLIAM Date of

Birth: 9/8/1947

Ordering Physician: Anderson, Jonathan MD Patient Type: Outpatient Patient Location: AIK
ADC

Attending Physician: Anderson, Jonathan MD

Imaging

XR Abdomen AP 7/29/2016 09:09 EDT

Rep

ort

ABDOMEN

CLINICAL HISTORY: Status post right lithotripsy. Scheduled for stent removal.

COMPARISON:

7/19/2016

TECHNIQUE: Multiple views of the abdomen are provided.

FINDINGS:

The intestinal gas pattern is
non-distended and non-obstructive. There is no abnormal mass
or organomegaly. There is a right
nephroureteral stent. Amorphous mineralized density is
noted overlying the lower pole of the right kidney
the previously noted location of large
renal stone. There are degenerative changes of lumbar
spine.

IMPRESSION:

1. Endplates right nephroureteral stent.
2. Amorphous mineralized density overlying the
lower pole right kidney could reflect
residual calcifications status post lithotripsy or bowel
contents.

Dictated By: Stefan Ploch, MD

DID 821991

D:/T:/13883884 /Job ID 14906303 /DT:07/29/2016

18:21:17/TD:07/29/2016 18:19:22 /Rev:

07/29/2016 18:19:22

CC:

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Stefan Ploch, MD on

07/29/2016 18:21:19 .

***** Final *****

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07/29/2016 6:21 pm

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:00

Electronically Signed by: Ploch MD, Stefan Signed DT/TM: 07/29/2016 6:21 pm

MRN:AIK179607 FIN:AIK0000118833615 Accession Number: 59-XR-16-033911 Page 1 of 1

12/21/2017 11:10 FAX 7066677455

MCBS, LLC.

0017

534

AIK- Aiken Regional Medical Centers

Aiken, SC 29801-6332

(803) 641-5000

Patient: KLOTZ, WILLIAM Date of

Birth: 9/8/1947

Ordering Physician: Anderson, Jonathan MD Patient Type: Outpatient Patient Location: AIK

Radiology

Attending Physician: Anderson, Jonathan MD

Imaging

XR Abdomen AP 10/19/2016 14:57

EDT

Report

Abdomen

Indication: Gross hematuria.

Technique: Single view of the abdomen was obtained.

COMPARISON: 7/29/2016

Findings: Nonspecific, nonobstructive bowel gas pattern. Calcifications over the mid and lower pole region right kidney. Right ureteral stent has been removed in interval. There are stable degenerative changes of the spine. Postsurgical changes in the pelvis presumably from hernia repair.

IMPRESSION:

1. Right nephrolithiasis

2. Nonspecific, nonobstructive bowel gas pattern

***** Final

Dictated by: Toomer MD, Anthony Dictated DT/TM: 10/19/2016 3:53 pm

Transcribed By: ATTranscribed

by: AT Transcribed DT/TM: 10/19/16 15:53:14

Electronically Signed by: Toomer MD, Anthony Signed DT/TM:

10/19/2016 3:54 pm

MRN:AIK179607 FNN:AIK0000119224376 Accession Number: 59-XR-16-047311 Page 1 of 1

12/21/2017 11:10 FAX 7066677455

MCBS, LLC.

0018

535

AIK- Aiken Regional Medical Centers

Aiken, SC 29801-6302

(803) 641-5000

Patient: KLOTZ, WILLIAM Date of

Birth: 9/8/1947

Ordering Physician: Anderson, Jonathan MD Patient Type: Outpatient Patient Location: AIK

Radiology

Attending Physician: Anderson, Jonathan MD

Imaging

XR Abdomen AP 6/7/2017 08:42 ED

T

Report

SINGLE VIEW ABDOMEN:

CLINICAL HISTORY: Gross hematuria. Low abdominal pain

TECHNIQUE: Single

view of the abdomen was obtained.

FINDINGS: The bowel gas pattern is unremarkable. Right upper quadrant

calcifications

are noted consistent with renal calculi. The largest measures 3 mm. Degenerative

spondylosis of

the lumbar spine is noted.

CONCLUSION:

Right nephrolithiasis.

***** Final *****

Dictated by:

Gay, Alfonso MD Dictated DT/TM: 06/08/2017 10:26 am

Transcribed By: AG Transcribed by: AG Transcribed

DT/TM: 06/08/17 10:26:20

Electronically Signed by: Gay, Alfonso MD Signed DT/TM: 06/08/2017 10:27

am

MRN:AIK179607 FIN:AIK0000120299136 Accession Number: 59-XR-17-C25444 Page 1 of 1

536

Chief Complaint and History of Present Illness

Name: William KlotzDate: 4/15/15

#1 Complaint:

MVA - LBP65 mph; New to get GT scan (Sunday)
(Thursday), Cops called, did not go to EROnset: 2/2015 ☐ Sudden ☒ Trauma ☐ GradualMechanism: GT scan of Neck + USEx: 4mm. relaxed & anti-inflam.

Quality:

☒ Sharp ☐ Dull ☐ Burning ☐ Shooting ☐ Crushing☐ Throbbing ☒ Achy ☒ Stiff ☐ Numb ☐ Tingling☐ Other: _____Provokes: Sitting @ computerPalliative: hot shower, stretching, pain medsIs the condition getting worse? ☐ Yes ☒ No ☐ UnsureHad a similar problem before? ☒ Yes ☐ No ☐ Unsure

Severity:

now
@ worst
0-1-2-3-4-5-6-7-8-9-10Radiation: ☐ Yes ☒ NoTiming: ☐ Constant ☒ Intermittent ☐ Worse w/ activity☐ Better in am ☐ Better in pm ☒ Worse in am ☐ Worse in pm# of times per week you have this? ☒ Every day ☐ Most days

Other: _____

Restriction to ADL's: ☒ Yes ☐ No☐ Sleep ☐ Work ☐ Recreation ☒ Daily Routine putting on shoesPrevious Injury/Accident/Surgery: Revised in Charlotte(10-12 yrs): Back surgery - Herniated discAppendectomy (Summer)Hernia mesh 2011Social Hx: ☐ Drinker ☒ Non Drinker ☐ Smoker ☒ Non SmokerReview of Systems: ENT, Dermato, CV pt. denies any issues.MSK - DDD, facet fusion in Cervical + lumbar. Neu-scleraany, GT/GO diabetesMedications: Simvastatin, Naloxone (80), metformin

Other Complaints:

pt. denies anyConsultant!

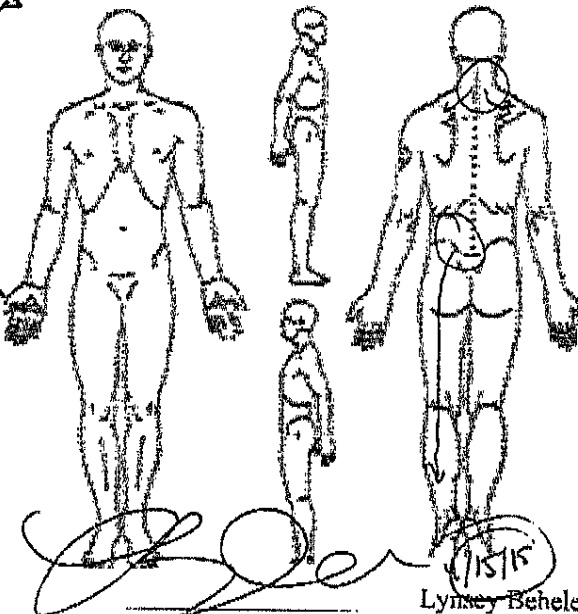
#2 Complaint:

Neck pain + tightnessOnset: 2/2015 ☐ Sudden ☒ Trauma ☐ GradualMechanism: MVA

Quality:

☐ Sharp ☐ Dull ☐ Burning ☐ Shooting ☐ Crushing☐ Throbbing ☒ Achy ☒ Stiff ☐ Numb ☐ Tingling☐ Other: tightProvokes: sitting @ computerPalliative: hot showerIs the condition getting worse? ☐ Yes ☒ No ☐ UnsureHad a similar problem before? ☒ Yes ☐ No ☐ Unsure

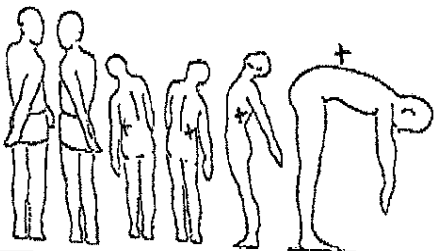
Severity:

0-1-2-3-4-5-6-7-8-9-10Radiation: ☒ Yes ☐ No "tight" into shoulderTiming: ☐ Constant ☒ Intermittent ☒ Worse w/ activity☐ Better in am ☐ Better in pm ☒ Worse in am ☐ Worse in pm# of times per week you have this? ☐ Every day ☒ Most daysOther: 2-3 x/wk

Lynsey Beheler

☒ Initial ☐ Follow-up ☐ ReactivationName: William KlotzDate: 4/15/15VITALS: ☒ Appear stable ☐ Abnormal ☐ Other: _____Patient is Alert and Oriented to: ☐ Time ☐ Person ☐ PlaceCranial Nerves: 2-12 Grossly intact ☒ Yes ☐ NoBody type: ☐ Ectomorph ☐ Endomorph ☐ Mesomorph ☐ Obese ☐ Gracile habitusProne leg short Extension: ☐ Rt ☒ LtFlexion: ☒ Rt ☐ LtLumbar Range of Motion

(+pain / -stretch)



		Active
Flexion	60	40
Extension	25	10
Lt Lat Flexion	25	10
Rt Lat Flexion	25	15
Lt Rotation	30	25
Rt Rotation	30	20

Cervical Range of Motion

(+pain / -stretch)



		Active
Flexion	50	30
Extension	60	40
Lt Lat Flexion	45	35
Rt Lat Flexion	45	20
Lt Rotation	80	70
Rt Rotation	80	60

Pain (P)/ Inflammation (I)/Fixation (F)/ Edema (E)C1 L C2 L C3 L C4 L C5 R C6 R C7 R
T1 R T2 R T3 L T4 L T5 R T6 R T7 R
T8 R T9 R T10 L T11 L T12 L L1 L L2 L
L3 L L4 L L5 R Sacrum BP/SAP/SAL
Rt SI L Lt SI L Rt Hip L Lt Hip L Other: _____Tenderness/Hypertonicity on Palpation

[1 minimum -5 extreme]

Suboccipitals 2 Cervical Parasp 4 Glutes L
Trapezius 3 Thoracic Parasp 3 Piriformis 3
Rhomboids 3 Lumbar Parasp 4 SCM's 2
Hams/Quads 4Orthopedic Tests:Soto Hall: ☐ Neg ☒ Local P* ☐ Radiating P* ☐ Inflexible
Sh. Depressor: (R) ☐ Neg ☒ Local P* ☐ Radiating P* ☐ Inflexible
Cervical Distraction: ☐ Neg ☒ Decrease P* ☐ Increase P*
Cervical Compress: ☐ Neg ☒ Local P* ☐ Radiating P*
Max Cervical Compress: ☐ Neg ☐ Local P* ☒ Radiating P* to both
Odonoghue: ☐ Neg ☒ CTD Positive ☐ AROM ☐ PROM
Adam's: ☐ Neg ☒ Positive... Humping: Left/Right
Thoracic Compression: ☐ Neg ☒ Positive... Loc: T6-8Valsalva: ☐ Neg ☒ Local P* ☐ Radiating P* ... Loc: L5-S1Kemps: (R) ☐ Neg ☒ Local P* ☐ Radiate P* ☐ InflexSLR/Bech: (R) ☐ Neg ☐ Local P* ☒ Radiate P* ☐ InflexBragard: (R) ☐ Neg ☐ Positive ☐ Radiate P* ☐ InflexFabere's: (R) ☐ Neg ☐ P* (Hip) ☐ P* (SI)Nachlas: (R) ☐ Neg ☐ P* (SI) ☐ P* (Lumbar)Hibbs: (R) ☐ Neg ☐ P* (Hip) ☐ P* (SI)Yeoman: (R) ☐ Neg ☐ P* (SI)Roo's/Adson's: R/L ☐ Neg ☐ P*Postural Notes: Gait: ☐ Normal ☒ Limp ☐ Toe-in ☐ Toe-out
Head Tilt/Translation: ☒ Right ☐ Left ☐ Forward ☐ Back
Shoulder High: ☐ Right ☐ Left
Hip High: ☒ Right ☐ Left
Foot Flare: ☐ External ☐ Internal

Muscle Testing:	L / S	R / S
Hip Flexion (T12-L3)	3 (4) 5	3 4 (5)
Foot inv/dorsi (L4)	3 (4) 5	3 4 (5)
Foot ever/dorsi (L5-S1)	3 4 (5)	3 4 (5)
Deltoid (C5)	3 4 (5)	3 4 (5)
Wr. Flexion (C7)	3 4 (5)	3 4 (5)
Finger Flexion (C8)	3 4 (5)	3 4 (5)
Finger Abd. (T1)	3 4 (5)	3 4 (5)

Lydney Beheler DC

Carolina Chiropractic of Aiken
Lynsey Beheler DC, LLC
CarolinaChiroAiken@gmail.com

Patient Name: William Klotz
Date: 4/15/15

673 Silver Bluff Rd, Aiken, SC 29803
(803) 649-4747

***ASSESSMENT:**

PROGNOSIS: ☐ EXCELLENT ☐ GOOD ☒ FAIR ☐ POOR ☐ UNKNOWN

DIAGNOSIS:

1. 739.3	2. 722.52	3. 81.0 724.9	4. 724.3	5. 739.4
6. 720.2	7. 739.1	8. 722.4	9. 723.4	10. 723.1

***PROCEDURES:**
ADJUSTMENT:

Pro Adj

81.0 724.9

	L	R	B
C1	X		
C2	X		
C3			
C4			
C5		X	
C6		X	
C7		X	

	L	R	B
T1		X	
T2		X	
T3			
T4			
T5	X		
T6	X		
T7	X		
T8			X
T9			
T10			
T11			
T12			

	L	R	B
L1	X		
L2	X		
L3			
L4		X	
L5		X	
Sac	SAL	SAR	BP
SI	X		
Occ			

	L	R	B
SHOULDER			
ELBOW			
WRIST			
HAND			
HIP			
KNEE			
FOOT/ANK			

ADJUSTMENT:

- 1- Activator
- 2- Cranial
- 3- Diversified
- 4- Drop/Thompson
- 5- SOT

***THERAPIES:**

- ☒ NEW PATIENT EXAM (99202)
- ☐ EXISTING PATIENT EXAM (99201)
- ☐ CMT 1-2 (98940)
- ☒ CMT 3-4 (98941)
- ☒ CMT 5 (98942)
- ☐ PHYSICAL THERAPY EXERCISES (97110)
- ☒ MECHANICAL TRACTION (97012)

- ☐ THERAPEUTIC ACTIVITIES (97530)
- ☐ ELECTRICAL STIMULATION- unattended (97014)
- ☐ HOT/COLD (97010)
- ☐ ULTRASOUND (97035)

EQUIPMENT/SUPPLIES: _____
SUPPLEMENTS: _____

***X-RAYS:**

X-rays Taken: ____/____/____	Findings: ☐ No significant findings
Cervical: ☒ AP ☒ ROM Obliq Flex/Ext	☐ No fracture dislocation, or active pathology
Thoracic: AP Lat	☐ Osteopenia ☐ Osteoporosis => ☐ Mild ☐ Mod ☐ Sev
Lum/Pelv: ☒ AP ☒ Lat Obliq Spot Flex/Ext	☒ Degenerative changes @ C4-5, C5-6, L3-4, L4-5
Other: _____	☐ Narrow disk(s) ☐ Ant/Post spurring ☐ Foram enc
MRI: ☒ none	☐ Lytic/Blastic changes @ _____
Other: _____	☐ Spine in midline, no lateral deviation
LDI: 48	☐ Scoliosis: ☐ Left ☐ Right => ☐ Mild ☐ Mod ☐ Sev
NDI: 32	☐ Hyper/Hypolordosis: ☐ Cerv ☐ Thorac ☐ Lumb
Fluor: C2-3 L4-5	☐ Hyper/Hypokyphosis: ☐ Cerv ☐ Thorac ☐ Lumb
	☐ Spondylolysis/Spondylolisthesis: Grade _____
	☐ Antero/Retro listhesis _____

***PLAN:**

SPINAL MANIPULATION:
☒ 1x/WK 3 WEEKS
☐ 2x/WK _____ WEEKS
☐ 3x/WK _____ WEEKS
☐ OTHER: _____

TREATMENTS:
☐ ICE/HEAT
☐ ELECTRICAL STIM
☐ MASSAGE/MANUAL TX
☐ ULTRASOUND
☐ OTHER: _____

HOME TX:

☒ ICE/HEAT ☐ TENS UNIT
☐ BRACE: _____
☐ OTHER: _____
☒ STRETCHES:

Cervical + lumbar stretches/ROM

RE-EXAM ON: _____

Lynsey Beheler DC

GOALS: ↓ LDI/NDI by 5%

Form BI100

539

rev 3/21/2003

Patient Name

William Klotz

Date

4/15/15

This questionnaire will give your provider information about how your back condition affects your everyday life. Please answer every section by marking the one statement that applies to you. If two or more statements in one section apply, please mark the one statement that most closely describes your problem.

Pain Intensity

- ☐ The pain comes and goes and is very mild.
- ☐ The pain is mild and does not vary much.
- ☐ The pain comes and goes and is moderate.
- ☐ The pain is moderate and does not vary much.
- ☐ The pain comes and goes and is very severe.
- ☐ The pain is very severe and does not vary much.

Sleeping

- ☐ I get no pain in bed.
- ☐ I get pain in bed but it does not prevent me from sleeping well.
- ☐ Because of pain my normal sleep is reduced by less than 25%.
- ☐ Because of pain my normal sleep is reduced by less than 50%.
- ☐ Because of pain my normal sleep is reduced by less than 75%.
- ☐ Pain prevents me from sleeping at all.

Sitting

- ☐ I can sit in any chair as long as I like.
- ☐ I can only sit in my favorite chair as long as I like.
- ☐ Pain prevents me from sitting more than 1 hour.
- ☐ Pain prevents me from sitting more than 1/2 hour.
- ☐ Pain prevents me from sitting more than 10 minutes.
- ☐ I avoid sitting because it increases pain immediately.

Standing

- ☐ I can stand as long as I want without pain.
- ☐ I have some pain while standing but it does not increase with time.
- ☐ I cannot stand for longer than 1 hour without increasing pain.
- ☐ I cannot stand for longer than 1/2 hour without increasing pain.
- ☐ I cannot stand for longer than 10 minutes without increasing pain.
- ☐ I avoid standing because it increases pain immediately.

Walking

- ☐ I have no pain while walking.
- ☐ I have some pain while walking but it doesn't increase with distance.
- ☐ I cannot walk more than 1 mile without increasing pain.
- ☐ I cannot walk more than 1/2 mile without increasing pain.
- ☐ I cannot walk more than 1/4 mile without increasing pain.
- ☐ I cannot walk at all without increasing pain.

Personal Care

- ☐ I do not have to change my way of washing or dressing in order to avoid pain.
- ☐ I do not normally change my way of washing or dressing even though it causes some pain.
- ☐ Washing and dressing increases the pain but I manage not to change my way of doing it.
- ☐ Washing and dressing increases the pain and I find it necessary to change my way of doing it.
- ☐ Because of the pain I am unable to do some washing and dressing without help.
- ☐ Because of the pain I am unable to do any washing and dressing without help.

Lifting

- ☐ I can lift heavy weights without extra pain.
- ☐ I can lift heavy weights but it causes extra pain.
- ☐ Pain prevents me from lifting heavy weights off the floor.
- ☐ Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned (e.g., on a table).
- ☐ Pain prevents me from lifting heavy weights off the floor, but I can manage light to medium weights if they are conveniently positioned.
- ☐ I can only lift very light weights.

Traveling

- ☐ I get no pain while traveling.
- ☐ I get some pain while traveling but none of my usual forms of travel make it worse.
- ☐ I get extra pain while traveling but it does not cause me to seek alternate forms of travel.
- ☐ I get extra pain while traveling which causes me to seek alternate forms of travel.
- ☐ Pain restricts all forms of travel except that done while lying down.
- ☐ Pain restricts all forms of travel.

Social Life

- ☐ My social life is normal and gives me no extra pain.
- ☐ My social life is normal but increases the degree of pain.
- ☐ Pain has no significant affect on my social life apart from limiting my more energetic interests (e.g., dancing, etc).
- ☐ Pain has restricted my social life and I do not go out very often.
- ☐ Pain has restricted my social life to my home.
- ☐ I have hardly any social life because of the pain.

Changing degree of pain

- ☐ My pain is rapidly getting better.
- ☐ My pain fluctuates but overall is definitely getting better.
- ☐ My pain seems to be getting better but improvement is slow.
- ☐ My pain is neither getting better or worse.
- ☐ My pain is gradually worsening.
- ☐ My pain is rapidly worsening.

Index Score = [Sum of all statements selected / (# of sections with a statement selected x 5)] x 100

Back
index
Score

48

540



673 Silver Bluff Rd. Aiken, SC 29803
Phone: (803) 649-4747
Fax: (803) 649-9719

FAX

To
Name: Theresa Jordan
CC: _____
Phone number: (704) 375-3641
Fax number: (704) 372-8783

From
Sender's Name: Doris
Fax: (803) 649-9719

Date sent: 2/5/16
Time sent: 11:59am
of pages including cover page: 21

- ☐ Urgent
- ☒ For Review
- ☐ Please Comment
- ☐ Please Reply

Message: _____

11/18/2015 13:37 7043728783

GILPIN LAW
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PAGE 01/02

GILPINLAW

OFFICES, PLLC

126 North McDowell Street
Charlotte, NC 28204
P: 704.375.8641
F: 704.372.8783
www.gilpinlawoffices.com

November 18, 2015

**ATTN: Medical Records and Itemized Billing Records
Carolina Chiropractic**

VIA FACSIMILE: (803) 649-9719

RE: My Client: William Klotz
Date of Birth: 09/08/1947
Date of Accident: 02/22/2015
SSN: xxx-xx-9103

Dear Sir or Madam:

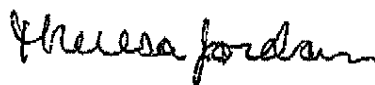
Our firm has been retained by the above-named client for representation in connection with personal injuries and damages which were sustained in an automobile accident. It is my understanding that the above client was treated at your facility.

We would appreciate you sending us a complete copy of your medical records as well as itemized billing records pertaining to this accident only. I have enclosed a copy of our client's medical authorization for release of same.

You may send medical records and billing records via email to flombard@gilpinlawoffices.com or mail them to 126 North McDowell Street, Charlotte, NC 28204.

Thank you for your cooperation in this matter.

Sincerely,



Theresa Jordan
North Carolina Certified Paralegal

Enclosure

11/18/2015 13:37 7043728783

542 GILPIN LAW

PAGE 02/02

GILPINLAW

OFFICES, PLLC

126 North McDowell Street
Charlotte, NC 28204
P: 704.375.3841
F: 704.372.8783
www.gilpinlawoffices.com

AUTHORIZATION TO RELEASE MEDICAL RECORDS AND/OR HEALTH INFORMATION

TO:

Entity to Disclose the Information:

Carolina Chiropractic
Medical Records & Itemized Billing

IN RE, PATIENT:

Patient Name:

Patient

Address:

William Klotz115 Chesney Glen Dr.Matthews, NC 28105SSN: XXX-XX-9103Date of Birth: 9/8/1947

FOR THE PURPOSE OF:

Legal representation for an incident which occurred on the date of 2/22/2015Specific description of information, covering health care from 2/22/2015 to current, and including:☒ Complete health records and bills☒ All images, including x-rays, photographs, etc.☐ Other (specify) _____

DISCLOSURE:

I hereby authorize the use or disclosure of my individually identifiable health information as described below to Gilpin Law Offices, my legal representation for the aforesaid incident. I understand that this authorization is voluntary. I understand that if the organization authorized to receive the information is not a health plan or health care provider, the released information may be subject to re-disclosure and may no longer be protected by federal privacy regulations, including HIPAA (Health Insurance Portability and Accountability Act). I hereby release the organization providing this information from any legal responsibility or liability for disclosure of this information to the extent indicated and authorized herein.

I understand that the information in my health record may include information relating to sexually transmitted disease, acquired immunodeficiency syndrome (AIDS), or any human immunodeficiency virus (HIV). It may also include information about behavior or mental health services, and treatment for alcohol and drug abuse.

I understand that I have the right to revoke this authorization at any time. I understand that if I revoke this authorization, I must do so in writing and present my written revocation to the health information management department. I understand the revocation will not apply to information that has already been released in response to this authorization. I understand the revocation will not apply to my insurance company when the law provides my insurer with the right to contest a claim under my policy. Unless otherwise revoked, this authorization will expire upon the settlement or trial of my case.

I understand that authorizing the disclosure of this health information is voluntary. I can refuse to sign this authorization. I need not sign this form in order to assure treatment, payment, enrollment in health plan or eligibility for benefits. I understand I may inspect or copy the information used or disclosed, as provided in the HIPAA regulations. I understand any disclosure of information carries with it the potential for an authorized re-disclosure and the information may not be protected by the federal confidentiality rules. I understand that any photocopy of this document will be considered as valid as the original. If I have questions about disclosure of my health information, I can contact the Health Information Management Director at the above named facility.

Signature of Patient or Legal Representative

Legal Representative's Relationship to Patient

Date

Witness Signature

543

Chief Complaint and History of Present Illness

Name: William KlotzDate: 4/15/15#1 Complaint: MVA - LBP @
45 mph; Went to get CT scan (Sunday)
(Monday), Cop called, did not go to EROnset: 2/2015 ☐ Sudden ☒ Trauma ☐ GradualMechanism: CT scan of neck + UAEx: Urm. relaxed + anti-inflam.

Quality:

☒ Sharp ☐ Dull ☐ Burning ☐ Shooting ☐ Crushing☐ Throbbing ☒ Achy ☒ Stiff ☐ Numb ☐ Tingling☐ Other: _____Provokes: Sitting @ computerPalliative: hot shower, stretching, pain medsIs the condition getting worse? ☐ Yes ☒ No ☐ UnsureHad a similar problem before? ☒ Yes ☐ No ☐ Unsure

Severity:

0-1-2-3-4-5-6-7-8-9-10Radiation: ☐ Yes ☒ NoTiming: ☐ Constant ☒ Intermittent ☐ Worse w/ activity☐ Better in am ☐ Better in pm ☒ Worse in am ☐ Worse in pm# of times per week you have this? ☒ Every day ☐ Most days

Other: _____

Restriction to ADL's: ☒ Yes ☐ No☒ Sleep ☐ Work ☐ Recreation ☒ Daily Routine putting on shoesPrevious Injury/Accident/Surgery: Reconciled in Charlotte(10-12 yrs); Back surgery - Hern. intervertebral discAppendectomy (2000)Hernia mesh 2011Social Hx: ☐ Drinker ☒ Non Drinker ☐ Smoker ☒ Non SmokerReview of Systems: ENT, Dermat, CV pt. denies any issues.Mus. - DDD, Facet Fusion in Cervical + lumbar. Neuro-sci.any, GI/AO diabetesMedications: Sumatriptan, Naloxone (AD), acetamin.

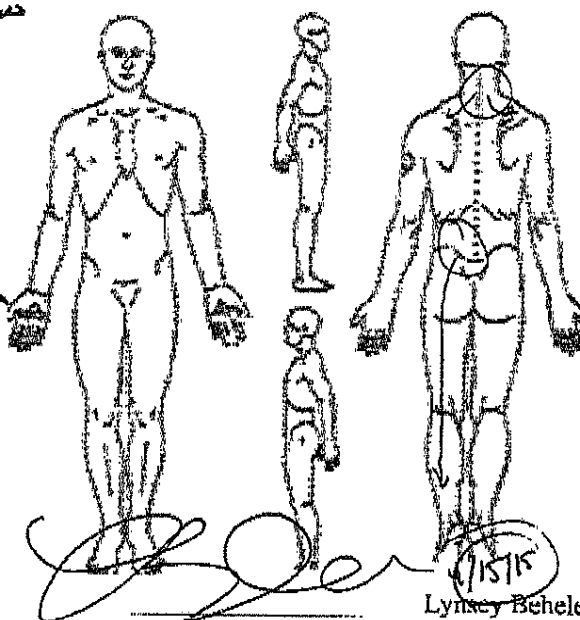
Other Complaints:

pt. den. anyConsult only!#2 Complaint: Neck pain + tightnessOnset: 2/2015 ☐ Sudden ☒ Trauma ☐ GradualMechanism: MVA

Quality:

☐ Sharp ☒ Dull ☐ Burning ☐ Shooting ☐ Crushing☐ Throbbing ☒ Achy ☒ Stiff ☐ Numb ☐ Tingling☐ Other: tightProvokes: sitting @ computerPalliative: hot showerIs the condition getting worse? ☐ Yes ☒ No ☐ UnsureHad a similar problem before? ☒ Yes ☐ No ☐ Unsure

Severity:

0-1-2-3-4-5-6-7-8-9-10Radiation: ☒ Yes ☐ No 'tight' into shouldersTiming: ☐ Constant ☒ Intermittent ☒ Worse w/ activity☐ Better in am ☐ Better in pm ☒ Worse in am ☐ Worse in pm# of times per week you have this? ☐ Every day ☒ Most daysOther: 2-3 x/wk

Lynsey Beheler

Carolina Chiropractic of Aiken
Lynsey Beheler DC, LLC
CarolinaChiroAiken@gmail.com

673 Silver Bluff Rd. Aiken, SC 29803
(803) 649-4747

☒ Initial ☐ Follow-up ☐ Reactivation

Name: William Klotz

Date: 4/15/15

VITALS: ☒ Appear stable ☐ Abnormal ☐ Other: _____

Patient is Alert and Oriented to: ☐ Time ☐ Person ☐ Place

Cranial Nerves: 2-12 Grossly intact ☒ Yes ☐ No

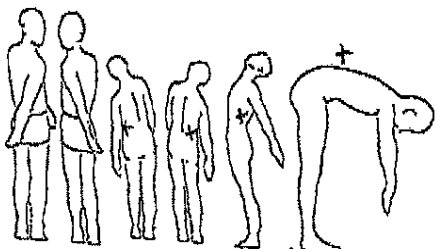
Body type: ☒ Ectomorph ☐ Endomorph ☐ Mesomorph ☐ Obese ☐ Gracile habitus

Prone leg short Extension: ☐ Rt ☒ Lt

Flexion: ☒ Rt ☐ Lt

Lumbar Range of Motion

(+pain / -stretch)



Cervical Range of Motion

(+pain / -stretch)



		Active
Flexion	60	40
Extension	25	10
Lt Lat Flexion	25	10
Rt Lat Flexion	25	15
Lt Rotation	30	25
Rt Rotation	30	20

		Active
Flexion	50	30
Extension	60	40
Lt Lat Flexion	45	35
Rt Lat Flexion	45	20
Lt Rotation	80	70
Rt Rotation	80	60

Pain (P)/ Inflammation (I)/ Fixation (F)/ Edema (E)

C1 L C2 L C3 L C4 L C5 R C6 R C7 R
T1 R T2 R T3 L T4 L T5 R T6 R T7 R
T8 R T9 R T10 L T11 L T12 L L1 L L2 L
L3 L L4 L L5 R Sacrum BP/SAB/SAL
Rt SI L Lt SI L Rt Hip L Lt Hip L Other: _____

Tenderness/Hypertonicity on Palpation

[1 minimum - 5 extreme]

Suboccipitals 2 Cervical Parasp 4 Glutes 1
Trapezius 3 Thoracic Parasp 3 Piriformis 3
Rhomboids 3 Lumbar Parasp 4 SCM's 3
Hams/Quads 4

Orthopedic Tests:

Soto Hall: ☐ Neg ☒ Local P* ☐ Radiating P* ☐ Inflexible
Sh. Depressor: ☒ R/D ☐ Neg ☐ Local P* ☐ Radiating P* ☐ Inflexible
Cervical Distraction: ☐ Neg ☐ Decrease P* ☐ Increase P*
Cervical Compress: ☐ Neg ☐ Local P* ☐ Radiating P*
Max Cervical Compress: ☐ Neg ☐ Local P* ☐ Radiating P* ☒ Pain
Odonoghue: ☐ Neg ☒ C/T/D Positive ☐ AROM ☐ PROM
Adam's: ☐ Neg ☒ Positive... Humping: Left/Right
Thoracic Compression: ☐ Neg ☒ Positive... Loc: T6-8

Valsalva: ☐ Neg ☒ Local P* ☐ Radiating P* ... Loc: L4-S1

Kemps: ☒ R/D ☐ Neg ☐ Local P* ☐ Radiate P* ☐ Inflex

SLR/Bech: ☒ R/D ☐ Neg ☐ Local P* ☐ Radiate P* ☐ Inflex

Bragard: ☒ R/D ☐ Neg ☐ Positive ☐ Radiate P* ☐ Inflex

Fabere's: ☒ R/D ☐ Neg ☐ P* (Hip) ☐ P* (SI)

Nachlas: ☒ R/D ☐ Neg ☐ P* (SI) ☐ P* (Lumbar)

Hibbs: ☒ R/D ☐ Neg ☐ P* (Hip) ☐ P* (SI)

Yeoman: ☒ R/D ☐ Neg ☐ P* (SI)

Roo's/Adson's: R/L ☐ Neg ☐ P*

Postural Notes: Gait: ☐ Normal ☒ Limp ☐ Toe-in ☐ Toe-out
Head Tilt/Translation: ☒ Right ☐ Left ☐ Forward ☐ Back
Shoulder High: ☐ Right ☐ Left
Hip High: ☐ Right ☐ Left
Foot Flare: ☐ External ☐ Internal

Muscle Testing:	L / 5	R / 5
Hip Flexion (T12-L3)	3 (4) 5	3 4 (5)
Foot inv/dorsi (L4)	3 (4) 5	3 4 (5)
Foot ever/dorsi (L5-S1)	3 4 (5)	3 4 (5)
Deltoid (C5)	3 4 (5)	3 4 (5)
Wr. Flexion (C7)	3 4 (5)	3 4 (5)
Finger Flexion (C8)	3 4 (5)	3 4 (5)
Finger Abd. (T1)	3 4 (5)	3 4 (5)

Lynsey Beheler DC

Carolina Chiropractic of Aiken
Lynsey Beheler DC, LLC
CarolinaChiroAiken@gmail.com

Pat Name: William Klotz
Date: 4/15/15

673 Silver Bluff Rd, Aiken, SC 29803
(803) 649-4747

***ASSESSMENT:**

PROGNOSIS: ☐ EXCELLENT ☐ GOOD ☒ FAIR ☐ POOR ☐ UNKNOWN

DIAGNOSIS:

1. 739.3	2. 722.52	3. 724.9	4. 724.3	5. 739.4
6. 720.2	7. 739.1	8. 722.4	9. 723.4	10. 723.1

***PROCEDURES:**
ADJUSTMENT:

Pro Adj

8+adj 724.9

	L	R	B
C1	X		
C2	X		
C3			
C4			
C5		X	
C6		X	
C7		X	

	L	R	B
T1		X	
T2		X	
T3			
T4			
T5	X		
T6	X		
T7	X		
T8			X
T9			
T10			
T11			
T12			

	L	R	B
L1	X		
L2	X		
L3			
L4		X	
L5		X	
Sac	SAL	SAR	BP
S1	X		
Occ			

	L	R	B
SHOULDER			
ELBOW			
WRIST			
HAND			
HIP			
KNEE			
FOOT/ANK			

ADJUSTMENT:

- 1- Activator
- 2- Cranial
- 3- Diversified
- 4- Drop/Thompson
- 5- SOT

***THERAPIES:**

- ☒ NEW PATIENT EXAM (99202)
- ☐ EXISTING PATIENT EXAM (99201)
- ☐ CMT 1-2 (98940)
- ☒ CMT 3-4 (98941)
- ☒ CMT 5 (98942)
- ☐ PHYSICAL THERAPY EXERCISES (97110)
- ☒ MECHANICAL TRACTION (97012)

- ☐ THERAPEUTIC ACTIVITIES (97530)
- ☐ ELECTRICAL STIMULATION- unattended (97014)
- ☐ HOT/COLD (97010)
- ☐ ULTRASOUND (97035)

EQUIPMENT/SUPPLIES: _____
SUPPLEMENTS: _____

***X-RAYS:**

X-rays Taken: _____	Findings: ☐ No significant findings
Cervical: ☒ AP ☒ LAT ☒ ROM Obliq Flex/Ext	☐ No fracture dislocation, or active pathology
Thoracic: AP Lat	☐ Osteopenia ☐ Osteoporosis => ☐ Mild ☐ Mod ☐ Sev
Lum/Pelv: ☒ AP ☒ Lat Obliq Spot Flex/Ext	☒ Degenerative changes @ C4-5, L3-4, L5-S1
Other: _____	☐ Narrow disk(s) ☐ Ant/Post spurring ☐ Foram enc
MRI: ☒ _____	☐ Lytic/Blastic changes @ _____
Other: _____	☐ Spine in midline, no lateral deviation
LDI: 48	☐ Scoliosis: ☐ Left ☐ Right => ☐ Mild ☐ Mod ☐ Sev
NDI: 32	☐ Hyper/Hypolordosis: ☐ Cerv ☐ Thorac ☐ Lumb
FWRN: C2-3	☐ Hyper/Hypokyphosis: ☐ Cerv ☐ Thorac ☐ Lumb
L4-5	☐ Spondylolysis/Spondylolisthesis: Grade _____
	☐ Antero/Retro listhesis _____

***PLAN:**

SPINAL MANIPULATION:
☒ 1x/WK 3 WEEKS
☐ 2x/WK _____ WEEKS
☐ 3x/WK _____ WEEKS
☐ OTHER: _____

TREATMENTS:

- ☐ ICE/HEAT
- ☐ ELECTRICAL STIM
- ☐ MASSAGE/MANUAL TX
- ☐ ULTRASOUND
- ☐ OTHER: _____

HOME TX:

- ☒ ICE/HEAT ☐ TENS UNIT
- ☐ BRACE: _____
- ☐ OTHER: _____
- ☒ STRETCHES: _____

GOALS: LDI/NDI by 5%

RE-EXAM ON: _____

Lynsey Beheler DC

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Back Index

Form BI100

rev 3/27/2003

Patient Name William KlotzDate 4/15/15

This questionnaire will give your provider information about how your back condition affects your everyday life. Please answer every section by marking the one statement that applies to you. If two or more statements in one section apply, please mark the one statement that most closely describes your problem.

Pain Intensity

- ☐ The pain comes and goes and is very mild.
- ☐ The pain is mild and does not vary much.
- ☐ The pain comes and goes and is moderate.
- ☐ The pain is moderate and does not vary much.
- ☒ The pain comes and goes and is very severe.
- ☐ The pain is very severe and does not vary much.

Sleeping

- ☐ I get no pain in bed.
- ☐ I get pain in bed but it does not prevent me from sleeping well.
- ☐ Because of pain my normal sleep is reduced by less than 25%.
- ☒ Because of pain my normal sleep is reduced by less than 50%.
- ☐ Because of pain my normal sleep is reduced by less than 75%.
- ☐ Pain prevents me from sleeping at all.

Sitting

- ☐ I can sit in any chair as long as I like.
- ☐ I can only sit in my favorite chair as long as I like.
- ☐ Pain prevents me from sitting more than 1 hour.
- ☒ Pain prevents me from sitting more than 1/2 hour.
- ☐ Pain prevents me from sitting more than 10 minutes.
- ☐ I avoid sitting because it increases pain immediately.

Standing

- ☐ I can stand as long as I want without pain.
- ☐ I have some pain while standing but it does not increase with time.
- ☐ I cannot stand for longer than 1 hour without increasing pain.
- ☒ I cannot stand for longer than 1/2 hour without increasing pain.
- ☐ I cannot stand for longer than 10 minutes without increasing pain.
- ☐ I avoid standing because it increases pain immediately.

Walking

- ☐ I have no pain while walking.
- ☐ I have some pain while walking but it doesn't increase with distance.
- ☒ I cannot walk more than 1 mile without increasing pain.
- ☐ I cannot walk more than 1/2 mile without increasing pain.
- ☐ I cannot walk more than 1/4 mile without increasing pain.
- ☐ I cannot walk at all without increasing pain.

Personal Care

- ☐ I do not have to change my way of washing or dressing in order to avoid pain.
- ☐ I do not normally change my way of washing or dressing even though it causes some pain.
- ☒ Washing and dressing increases the pain but I manage not to change my way of doing it.
- ☐ Washing and dressing increases the pain and I find it necessary to change my way of doing it.
- ☐ Because of the pain I am unable to do some washing and dressing without help.
- ☐ Because of the pain I am unable to do any washing and dressing without help.

Lifting

- ☐ I can lift heavy weights without extra pain.
- ☐ I can lift heavy weights but it causes extra pain.
- ☒ Pain prevents me from lifting heavy weights off the floor.
- ☐ Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned (e.g., on a table).
- ☐ Pain prevents me from lifting heavy weights off the floor, but I can manage light to medium weights if they are conveniently positioned.
- ☐ I can only lift very light weights.

Traveling

- ☐ I get no pain while traveling.
- ☒ I get some pain while traveling but none of my usual forms of travel make it worse.
- ☐ I get extra pain while traveling but it does not cause me to seek alternate forms of travel.
- ☐ I get extra pain while traveling which causes me to seek alternate forms of travel.
- ☐ Pain restricts all forms of travel except that done while lying down.
- ☐ Pain restricts all forms of travel.

Social Life

- ☐ My social life is normal and gives me no extra pain.
- ☐ My social life is normal but increases the degree of pain.
- ☒ Pain has no significant affect on my social life apart from limiting my more energetic interests (e.g., dancing, etc).
- ☐ Pain has restricted my social life and I do not go out very often.
- ☐ Pain has restricted my social life to my home.
- ☐ I have hardly any social life because of the pain.

Changing degree of pain

- ☐ My pain is rapidly getting better.
- ☐ My pain fluctuates but overall is definitely getting better.
- ☒ My pain seems to be getting better but improvement is slow.
- ☐ My pain is neither getting better or worse.
- ☐ My pain is gradually worsening.
- ☐ My pain is rapidly worsening.

Index Score = [Sum of all statements selected / (# of sections with a statement selected x 5)] x 100

Back
Index
Score

48

547

Neck Index

Form N1-100

Patient Name William Klotz

Date 4/15/15

This questionnaire will give your provider information about how your neck condition affects your everyday life. Please answer every section by marking the one statement that applies to you. If two or more statements in one section apply, please mark the one statement that most closely describes your problem.

Pain Intensity

- ☐ 1 I have no pain at the moment.
- ☐ 2 The pain is very mild at the moment.
- ☐ 3 The pain comes and goes and is moderate.
- ☐ 4 The pain is fairly severe at the moment.
- ☐ 5 The pain is very severe at the moment.
- ☐ 6 The pain is the worst imaginable at the moment.

Sleeping

- ☐ 1 I have no trouble sleeping.
- ☐ 2 My sleep is slightly disturbed (less than 1 hour sleepless).
- ☐ 3 My sleep is mildly disturbed (1-2 hours sleepless).
- ☐ 4 My sleep is moderately disturbed (2-3 hours sleepless).
- ☐ 5 My sleep is greatly disturbed (3-5 hours sleepless).
- ☐ 6 My sleep is completely disturbed (5-7 hours sleepless).

Reading

- ☐ 1 I can read as much as I want with no neck pain.
- ☐ 2 I can read as much as I want with slight neck pain.
- ☐ 3 I can read as much as I want with moderate neck pain.
- ☐ 4 I cannot read as much as I want because of moderate neck pain.
- ☐ 5 I can hardly read at all because of severe neck pain.
- ☐ 6 I cannot read at all because of neck pain.

Concentration

- ☐ 1 I can concentrate fully when I want with no difficulty.
- ☐ 2 I can concentrate fully when I want with slight difficulty.
- ☐ 3 I have a fair degree of difficulty concentrating when I want.
- ☐ 4 I have a lot of difficulty concentrating when I want.
- ☐ 5 I have a great deal of difficulty concentrating when I want.
- ☐ 6 I cannot concentrate at all.

Work

- ☐ 1 I can do as much work as I want.
- ☐ 2 I can only do my usual work but no more.
- ☐ 3 I can only do most of my usual work but no more.
- ☐ 4 I cannot do my usual work.
- ☐ 5 I can hardly do any work at all.
- ☐ 6 I cannot do any work at all.

Personal Care

- ☐ 1 I can look after myself normally without causing extra pain.
- ☐ 2 I can look after myself normally but it causes extra pain.
- ☐ 3 It is painful to look after myself and I am slow and careful.
- ☐ 4 I need some help but I manage most of my personal care.
- ☐ 5 I need help every day in most aspects of self care.
- ☐ 6 I do not get dressed, I wash with difficulty and stay in bed.

Lifting

- ☐ 1 I can lift heavy weights without extra pain.
- ☐ 2 I can lift heavy weights but it causes extra pain.
- ☐ 3 Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned (e.g., on a table).
- ☐ 4 Pain prevents me from lifting heavy weights off the floor, but I can manage light to medium weights if they are conveniently positioned.
- ☐ 5 I can only lift very light weights.
- ☐ 6 I cannot lift or carry anything at all.

Driving

- ☐ 1 I can drive my car without any neck pain.
- ☐ 2 I can drive my car as long as I want with slight neck pain.
- ☐ 3 I can drive my car as long as I want with moderate neck pain.
- ☐ 4 I cannot drive my car as long as I want because of moderate neck pain.
- ☐ 5 I can hardly drive at all because of severe neck pain.
- ☐ 6 I cannot drive my car at all because of neck pain.

Recreation

- ☐ 1 I am able to engage in all my recreation activities without neck pain.
- ☐ 2 I am able to engage in all my usual recreation activities with some neck pain.
- ☐ 3 I am able to engage in most but not all my usual recreation activities because of neck pain.
- ☐ 4 I am only able to engage in a few of my usual recreation activities because of neck pain.
- ☐ 5 I can hardly do any recreation activities because of neck pain.
- ☐ 6 I cannot do any recreation activities at all.

Headaches

- ☐ 1 I have no headaches at all.
- ☐ 2 I have slight headaches which come infrequently.
- ☐ 3 I have moderate headaches which come infrequently.
- ☐ 4 I have moderate headaches which come frequently.
- ☐ 5 I have severe headaches which come frequently.
- ☐ 6 I have headaches almost all the time.

Index Score = (Sum of all statements selected / (# of sections with a statement selected x 5)) x 100

Neck
Index
Score

32

1200/0000

02/05/2016 12:22PM FAX W. KLOTZ 000090

Jun 02 15 09:46a

SOUTHSIDE ORGYN

548

0032260528

p.1

CT Spine Cervical w/o Contrast

KLOTZ, WILLIAM - AIK179607

* Final Report *

Reason For Exam

rearended at 70mph on I-20; Neck Trauma

Alken Radiology

CT CERVICAL SPINE:

Clinical History: Trauma, neck pain

Technique: 2 mm contiguous axial images are obtained through the cervical spine. Additional coronal and sagittal multiplanar reformation was performed.

Findings: No soft tissue hematoma is identified. The cervical spine is normally aligned. No fracture is identified. There is degenerative disc space narrowing and C4-C5, C5-C6 and C6-C7. There is fusion of the left C2-C3 facet joint. Facet degenerative changes are noted at C4-C5 level bilaterally.

CONCLUSION:

No acute osseous abnormality.

Dictated By: ALFONSO GAY, MD
OID 45302

D:/T:/12100421 /Job ID 13088750 /DT:02/23/2015 15:27:56/TD:02/23/2015 15:24:14 /Rev:
02/23/2015 15:24:14
cc:

This document was electronically signed by ALFONSO GAY, MD on
02/23/2015 15:27:57 .

Result type: CT Spine Cervical w/o Contrast
Result date: 23 February 2015 15:05 EST
Result status: Auth (Verified)
Result title: CT Spine Cervical w/o Contrast
Performed by: Gay, Alfonso MD on 23 February 2015 15:27 EST
Verified by: Gay, Alfonso MD on 23 February 2015 15:27 EST
Encounter info: AIK0000116473117, AIK Centers, Emergency, 02/23/15 - 02/23/15

Printed by: Nesley Doc Office Staff, Crystal
Printed on: 08/02/15 09:37 EDT

Page 1 of 2
(Continued)

Jun 02 15:09:46a

SOUTHSIDE OBGYN

549

P032260528

p.2

CT Spine Lumbar w/o Contrast

KLOTZ, WILLIAM - AIK179607

* Final Report *

Reason For Exam
Back Pain - Trauma

Alken Radiology
CT lumbar spine:

Clinical History: Trauma by motor vehicle accident, back pain

Technique: 3 mm contiguous axial images are obtained through the lumbar spine.
Additional
coronal and sagittal multiplanar reformation was performed.

Findings: No soft tissue hematoma is identified. The lumbar spine is normally aligned. No fracture is identified. There is fusion of L4-L5 disc space. Vacuum phenomenon is noted at L5-S1 from disc degeneration. Severe facet degenerative changes are noted on the left at L5-S1. There are bilateral facet degenerative changes at L3-L4, more severe on the left.

CONCLUSION:

No acute osseous abnormality.

Dictated By: ALFONSO GAY, MD
DID 45302

D:/T:/12100463 /Job ID 13088789 /DT:02/23/2015 15:35:18/TD:02/23/2015 15:30:48 /Rev:
02/23/2015 15:30:48
cc:

This document was electronically signed by ALFONSO GAY, MD on

Result type: CT Spine Lumbar w/o Contrast
Result date: 23 February 2015 15:05 EST
Result status: Auth (Verified)
Result title: CT Spine Lumbar w/o Contrast
Performed by: Gay, Alfonso MD on 23 February 2015 15:35 EST
Verified by: Gay, Alfonso MD on 23 February 2015 15:35 EST
Encounter info: AIK0000116473117, AIK Centers, Emergency, 02/23/15 - 02/23/15

Printed by: Neeley Doc Office Staff, Crystal
Printed on: 06/02/15 09:38 EDT

Page 1 of 2
(Continued)

Pt. #: 10 11647 WILLIAM F. Dx. Codes:

550

ICD: 98940 98941 98942 Last: 1:

Patient Reporting: <u>ESTABLISHED</u> BRIEF EXAM	Patient Reporting: <u>ESTABLISHED</u> BRIEF EXAM	Patient Reporting: <u>ESTABLISHED</u> BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bed ridden)	Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bed ridden)	Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bed ridden)
Headache	Headache	Headache
Neck Pain/Stiffness 4	Neck Pain/Stiffness 3	Neck Pain/Stiffness 2
Upper Back Pain/Stiffness 3	Upper Back Pain/Stiffness 3	Upper Back Pain/Stiffness 2
Mid Back Pain/Stiffness 3	Mid Back Pain/Stiffness 3	Mid Back Pain/Stiffness 3
Low Back Pain/Stiffness 4	Low Back Pain/Stiffness 3	Low Back Pain/Stiffness 3
Pelvis/Hip Pain/Stiffness	Pelvis/Hip Pain/Stiffness	Pelvis/Hip Pain/Stiffness
TMJ pain/clicking	TMJ pain/clicking	TMJ pain/clicking
Other:	Other:	Other:
Radiates to:	Radiates to:	Radiates to:
Shoulder L R / Both P / W / T / N	Shoulder L R / Both P / W / T / N	Shoulder L R / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N	Arm/Elbow L R / Both P / W / T / N	Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N	Wrist/Hand L R / Both P / W / T / N	Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N	Chest/Ribs L R / Both P / W / T / N	Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N	Hip/Gluteal L R / Both P / W / T / N	Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N	Leg/Knee L R / Both P / W / T / N	Leg/Knee L R / Both P / W / T / N
Ankle/Foot L R / Both P / W / T / N	Ankle/Foot L R / Both P / W / T / N	Ankle/Foot L R / Both P / W / T / N
Heat/Cryo (97010)	Heat/Cryo (97010)	Heat/Cryo (97010)
Ems/IF (97014)	Ems/IF (97014)	Ems/IF (97014)
Ultrasound (97035)	Ultrasound (97035)	Ultrasound (97035)
Mech Trxn (97012) <u>400</u>	Mech Trxn (97012) <u>EB</u>	Mech Trxn (97012) <u>EB</u>
Notes: JUN 10 2015	Notes: JUN 17 2015	Notes: JUN 26 2015
RE: <u>WKL</u> SIGN: <u>[Signature]</u>	RE: <u>WKL</u> SIGN: <u>[Signature]</u>	RE: <u>WKL</u> SIGN: <u>[Signature]</u>
Patient Reporting: <u>ESTABLISHED</u> BRIEF EXAM	Patient Reporting: <u>ESTABLISHED</u> BRIEF EXAM	Patient Reporting: <u>ESTABLISHED</u> BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bed ridden)	Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bed ridden)	Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bed ridden)
Headache	Headache	Headache
Neck Pain/Stiffness 2	Neck Pain/Stiffness 3	Neck Pain/Stiffness 4
Upper Back Pain/Stiffness 2	Upper Back Pain/Stiffness 3	Upper Back Pain/Stiffness 3
Mid Back Pain/Stiffness 3	Mid Back Pain/Stiffness 3	Mid Back Pain/Stiffness 3
Low Back Pain/Stiffness 3	Low Back Pain/Stiffness 3	Low Back Pain/Stiffness 4
Pelvis/Hip Pain/Stiffness	Pelvis/Hip Pain/Stiffness	Pelvis/Hip Pain/Stiffness
TMJ pain/clicking	TMJ pain/clicking	TMJ pain/clicking
Other:	Other:	Other:
Radiates to:	Radiates to:	Radiates to:
Shoulder L R / Both P / W / T / N	Shoulder L R / Both P / W / T / N	Shoulder L R / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N	Arm/Elbow L R / Both P / W / T / N	Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N	Wrist/Hand L R / Both P / W / T / N	Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N	Chest/Ribs L R / Both P / W / T / N	Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N	Hip/Gluteal L R / Both P / W / T / N	Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N	Leg/Knee L R / Both P / W / T / N	Leg/Knee L R / Both P / W / T / N
Ankle/Foot L R / Both P / W / T / N	Ankle/Foot L R / Both P / W / T / N	Ankle/Foot L R / Both P / W / T / N
Heat/Cryo (97010)	Heat/Cryo (97010)	Heat/Cryo (97010)
Ems/IF (97014)	Ems/IF (97014)	Ems/IF (97014)
Ultrasound (97035)	Ultrasound (97035)	Ultrasound (97035)
Mech Trxn (97012) <u>400</u>	Mech Trxn (97012) <u>400</u>	Mech Trxn (97012) <u>400</u>
Notes: JUL 08 2015	Notes: JUL 29 2015	Notes: AUG 12 2015
RE: <u>WKL</u> SIGN: <u>[Signature]</u>	RE: <u>WKL</u> SIGN: <u>[Signature]</u>	RE: <u>WKL</u> SIGN: <u>[Signature]</u>

551

Pt. #: 107647 William Klotz

Dx. Codes:

ICD: 98940 98941 98942 Last Exam:

Patient Reporting: ESTABLISHED BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bad ridden)
Headache
Neck Pain/Stiffness
Upper Back Pain/Stiffness
Mid Back Pain/Stiffness
Low Back Pain/Stiffness
Pelvis/Hip Pain/Stiffness
TMJ pain/clicking
Other:
Radiates to:
Shoulder L (R) / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N
Ankle/Foot L (R) / Both P / W / T / N
Heat/Cryo (97010)
Ems/IF (97014)
Ultrasound (97035)
Mech Trxn (97012)
Notes: AUG 26 2015
C5 T10 L4 S1 A2 C5T10

Patient Reporting: ESTABLISHED BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bad ridden)
Headache
Neck Pain/Stiffness
Upper Back Pain/Stiffness
Mid Back Pain/Stiffness
Low Back Pain/Stiffness
Pelvis/Hip Pain/Stiffness
TMJ pain/clicking
Other:
Radiates to:
Shoulder L R / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N
Ankle/Foot L R / Both P / W / T / N
Heat/Cryo (97010)
Ems/IF (97014)
Ultrasound (97035)
Mech Trxn (97012)
Notes: NOV 04 2015
Dismiss pt from care for mva.
C5 T10 L4 S1 A2 C5T10

Patient Reporting: ESTABLISHED BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bad ridden)
Headache
Neck Pain/Stiffness
Upper Back Pain/Stiffness
Mid Back Pain/Stiffness
Low Back Pain/Stiffness
Pelvis/Hip Pain/Stiffness
TMJ pain/clicking
Other:
Radiates to:
Shoulder L (R) / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N
Ankle/Foot L (R) / Both P / W / T / N
Heat/Cryo (97010)
Ems/IF (97014)
Ultrasound (97035)
Mech Trxn (97012)
Notes: SEP 16 2015
C25 T10 S1 A2 C25T10

Patient Reporting: ESTABLISHED BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bad ridden)
Headache
Neck Pain/Stiffness
Upper Back Pain/Stiffness
Mid Back Pain/Stiffness
Low Back Pain/Stiffness
Pelvis/Hip Pain/Stiffness
TMJ pain/clicking
Other:
Radiates to:
Shoulder L R / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N
Ankle/Foot L R / Both P / W / T / N
Heat/Cryo (97010)
Ems/IF (97014)
Ultrasound (97035)
Mech Trxn (97012)
Notes:

Patient Reporting: ESTABLISHED BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bad ridden)
Headache
Neck Pain/Stiffness
Upper Back Pain/Stiffness
Mid Back Pain/Stiffness
Low Back Pain/Stiffness
Pelvis/Hip Pain/Stiffness
TMJ pain/clicking
Other:
Radiates to:
Shoulder L (R) / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N
Ankle/Foot L (R) / Both P / W / T / N
Heat/Cryo (97010)
Ems/IF (97014)
Ultrasound (97035)
Mech Trxn (97012)
Notes: OCT 07 2015
Brief Exam Next visit
C5 T10 L4 S1 A2 C5T10

Patient Reporting: ESTABLISHED BRIEF EXAM
Pain (100%) 1 2 3 4 5 6 7 8 9 10 (Bad ridden)
Headache
Neck Pain/Stiffness
Upper Back Pain/Stiffness
Mid Back Pain/Stiffness
Low Back Pain/Stiffness
Pelvis/Hip Pain/Stiffness
TMJ pain/clicking
Other:
Radiates to:
Shoulder L R / Both P / W / T / N
Arm/Elbow L R / Both P / W / T / N
Wrist/Hand L R / Both P / W / T / N
Chest/Ribs L R / Both P / W / T / N
Hip/Gluteal L R / Both P / W / T / N
Leg/Knee L R / Both P / W / T / N
Ankle/Foot L R / Both P / W / T / N
Heat/Cryo (97010)
Ems/IF (97014)
Ultrasound (97035)
Mech Trxn (97012)
Notes:

Carolina Chiropractic of Aiken
Lynsey Beheler DC, LLC
CarolinaChiroAiken@gmail.com

673 Silver Bluff Rd. Aiken, SC 29803
(803) 649-4747

☐ Initial ☒ Follow-up ☐ Reactivation

Name: William Klotz

Date: 11/4/15

VITALS: ☒ Appear stable ☐ Abnormal ☐ Other: _____

Patient is Alert and Oriented to: ☐ Time ☐ Person ☒ Place

Cranial Nerves: 2-12 Grossly intact ☒ Yes ☐ No

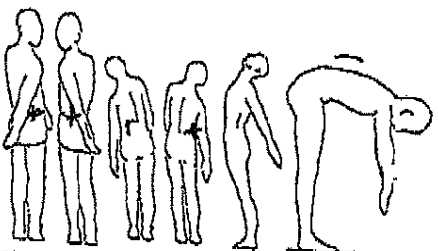
Body type: ☐ Ectomorph ☐ Endomorph ☐ Mesomorph ☐ Obese ☐ Gracile habitus

Prone leg short Extension: ☒ RT ☐ LT

Flexion: ☐ RT ☒ LT

Lumbar Range of Motion

(+pain / -stretch)



Flexion	60	50
Extension	25	15
Lt Lat Flexion	25	20
Rt Lat Flexion	25	20
Lt Rotation	30	25
Rt Rotation	30	25

Cervical Range of Motion

(+pain / -stretch)



Flexion	50	40
Extension	60	50
Lt Lat Flexion	45	35
Rt Lat Flexion	45	35
Lt Rotation	80	75
Rt Rotation	80	70

Pain (P)/ Inflammation (I)/ Fixation (F)/ Edema (E)

C1 1 C2 1 C3 1 C4 1 C5 2 C6 2 C7 1
T1 1 T2 1 T3 1 T4 1 T5 1 T6 1 T7 1
T8 1 T9 1 T10 1 T11 1 T12 1 L1 1 L2 1
L3 1 L4 1 L5 1 Sacrum BP/ SAB / SAL
Rt SI 1 Lt SI 1 Rt Hip 1 Lt Hip 1 Other: _____

Tenderness/Hypertonicity on Palpation

[1 minimum -5 extreme]

Suboccipitals 3 Cervical Parasp 3 Glutes _____
Trapezius 4 Thoracic Parasp 5 Piriformis _____
Rhomboids 2 Lumbar Parasp 4 SCM's _____
Hams/Quads 5

Orthopedic Tests:

Soto Hall: ☒ Neg ☐ Local P* ☐ Radiating P* ☐ Inflexible
Sh. Depressor: ☒ Neg ☐ Local P* ☐ Radiating P* ☐ Inflexible
Cervical Distraction: ☒ Neg ☐ Decrease P* ☐ Increase P*
Cervical Compress: ☒ Neg ☐ Local P* ☐ Radiating P*
Max Cervical Compress: ☒ Neg ☐ Local P* ☐ Radiating P*
Odonoghue: ☐ Neg ☒ C/T/D Positive ☐ AROM ☐ PROM
Adam's: ☐ Neg ☒ Positive... Humping: ☒ Left/Right
Thoracic Compression: ☐ Neg ☒ Positive... Loc: T6

Valsalva: ☒ Neg ☐ Local P* ☐ Radiating P* ... Loc: _____

Kemps: R/L ☒ Neg ☐ Local P* ☐ Radiate P* ☐ Inflex

SLR/Bech: R/L ☒ Neg ☐ Local P* ☐ Radiate P* ☐ Inflex

Bragard: R/L ☒ Neg ☐ Positive ☐ Radiate P* ☐ Inflex

Fabre's: R/L ☒ Neg ☐ P* (Hip) ☐ P* (SI)

Nachlas: R/L ☒ Neg ☐ P* (SI) ☐ P* (Lumbar)

Hibbs: R/L ☒ Neg ☐ P* (Hip) ☐ P* (SI)

Yeoman: R/L ☒ Neg ☐ P* (SI)

Roo's/Adson's: R/L ☐ Neg ☐ P*

Postural Notes: Gait: ☐ Normal ☒ Limp ☐ Toe-in ☒ Toe-out

Head Tilt/Translation: ☒ Right ☐ Left ☐ Forward ☐ Back

Shoulder High: ☐ Right ☐ Left

Hip High: ☐ Right ☐ Left

Foot Flare: ☒ External ☐ Internal

Lynsey Beheler DC

Muscle Testing	L	R
Hip Flexion (T12-L3)	3 4 5	3 4 5
Foot inv/dorsi (L4)	3 4 5	3 4 5
Foot ever/dorsi (L5-S1)	3 4 5	3 4 5
Deltoid (C5)	3 4 5	3 4 5
Wr. Flexion (C7)	3 4 5	3 4 5
Finger Flexion (C8)	3 4 5	3 4 5
Finger Abd. (T1)	3 4 5	3 4 5

1700/ST000

W. KLOTZ 000095

553

Back Index

Form BI100

rev 3/27/2001

Patient Name

William Klotz

Date

11/4/15

This questionnaire will give your provider information about how your back condition affects your everyday life. Please answer every section by marking the one statement that applies to you. If two or more statements in one section apply, please mark the one statement that most closely describes your problem.

Pain Intensity

- ☐ 1 The pain comes and goes and is very mild.
- ☐ 2 The pain is mild and does not vary much.
- ☒ 3 The pain comes and goes and is moderate.
- ☐ 4 The pain is moderate and does not vary much.
- ☐ 5 The pain comes and goes and is very severe.
- ☐ 6 The pain is very severe and does not vary much.

Sleeping

- ☐ 1 I get no pain in bed.
- ☐ 2 I get pain in bed but it does not prevent me from sleeping well.
- ☐ 3 Because of pain my normal sleep is reduced by less than 25%.
- ☐ 4 Because of pain my normal sleep is reduced by less than 50%.
- ☐ 5 Because of pain my normal sleep is reduced by less than 75%.
- ☐ 6 Pain prevents me from sleeping at all.

Sitting

- ☐ 1 I can sit in any chair as long as I like.
- ☐ 2 I can only sit in my favorite chair as long as I like.
- ☐ 3 Pain prevents me from sitting more than 1 hour.
- ☐ 4 Pain prevents me from sitting more than 1/2 hour.
- ☐ 5 Pain prevents me from sitting more than 10 minutes.
- ☐ 6 I avoid sitting because it increases pain immediately.

Standing

- ☐ 1 I can stand as long as I want without pain.
- ☐ 2 I have some pain while standing but it does not increase with time.
- ☐ 3 I cannot stand for longer than 1 hour without increasing pain.
- ☐ 4 I cannot stand for longer than 1/2 hour without increasing pain.
- ☐ 5 I cannot stand for longer than 10 minutes without increasing pain.
- ☐ 6 I avoid standing because it increases pain immediately.

Walking

- ☐ 1 I have no pain while walking.
- ☐ 2 I have some pain while walking but it doesn't increase with distance.
- ☐ 3 I cannot walk more than 1 mile without increasing pain.
- ☐ 4 I cannot walk more than 1/2 mile without increasing pain.
- ☐ 5 I cannot walk more than 1/4 mile without increasing pain.
- ☐ 6 I cannot walk at all without increasing pain.

Personal Care

- ☐ 1 I do not have to change my way of washing or dressing in order to avoid pain.
- ☐ 2 I do not normally change my way of washing or dressing even though it causes some pain.
- ☐ 3 Washing and dressing increases the pain but I manage not to change my way of doing it.
- ☐ 4 Washing and dressing increases the pain and I find it necessary to change my way of doing it.
- ☐ 5 Because of the pain I am unable to do some washing and dressing without help.
- ☐ 6 Because of the pain I am unable to do any washing and dressing without help.

Lifting

- ☐ 1 I can lift heavy weights without extra pain.
- ☐ 2 I can lift heavy weights but it causes extra pain.
- ☐ 3 Pain prevents me from lifting heavy weights off the floor.
- ☐ 4 Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned (e.g., on a table).
- ☐ 5 Pain prevents me from lifting heavy weights off the floor, but I can manage light to medium weights if they are conveniently positioned.
- ☐ 6 I can only lift very light weights.

Traveling

- ☐ 1 I get no pain while traveling.
- ☐ 2 I get some pain while traveling but none of my usual forms of travel make it worse.
- ☐ 3 I get extra pain while traveling but it does not cause me to seek alternate forms of travel.
- ☐ 4 I get extra pain while traveling which causes me to seek alternate forms of travel.
- ☐ 5 Pain restricts all forms of travel except that done while lying down.
- ☐ 6 Pain restricts all forms of travel.

Social Life

- ☐ 1 My social life is normal and gives me no extra pain.
- ☐ 2 My social life is normal but increases the degree of pain.
- ☐ 3 Pain has no significant affect on my social life apart from limiting my more energetic interests (e.g., dancing, etc).
- ☐ 4 Pain has restricted my social life and I do not go out very often.
- ☐ 5 Pain has restricted my social life to my home.
- ☐ 6 I have hardly any social life because of the pain.

Changing degree of pain

- ☐ 1 My pain is rapidly getting better.
- ☐ 2 My pain fluctuates but overall is definitely getting better.
- ☐ 3 My pain seems to be getting better but improvement is slow.
- ☐ 4 My pain is neither getting better or worse.
- ☐ 5 My pain is gradually worsening.
- ☐ 6 My pain is rapidly worsening.

Index Score = [Sum of all statements selected / (# of sections with a statement selected x 5)] x 100

Back
Index
Score

16

554

Neck Index

Form NI-100

rev 3/27/2013

Patient Name William Klotz

Date 11/4/15

This questionnaire will give your provider information about how your neck condition affects your everyday life. Please answer every section by marking the one statement that applies to you. If two or more statements in one section apply, please mark the one statement that most closely describes your problem.

Pain Intensity

- ☐ 1 I have no pain at the moment.
- ☐ 2 The pain is very mild at the moment.
- ☐ 3 The pain comes and goes and is moderate.
- ☐ 4 The pain is fairly severe at the moment.
- ☐ 5 The pain is very severe at the moment.
- ☐ 6 The pain is the worst imaginable at the moment.

Personal Care

- ☐ 1 I can look after myself normally without causing extra pain.
- ☐ 2 I can look after myself normally but it causes extra pain.
- ☐ 3 It is painful to look after myself and I am slow and careful.
- ☐ 4 I need some help but I manage most of my personal care.
- ☐ 5 I need help every day in most aspects of self care.
- ☐ 6 I do not get dressed, I wash with difficulty and stay in bed.

Sleeping

- ☐ 1 I have no trouble sleeping.
- ☐ 2 My sleep is slightly disturbed (less than 1 hour sleep/loss).
- ☐ 3 My sleep is mildly disturbed (1-2 hours sleep/loss).
- ☐ 4 My sleep is moderately disturbed (2-3 hours sleep/loss).
- ☐ 5 My sleep is greatly disturbed (3-5 hours sleep/loss).
- ☐ 6 My sleep is completely disturbed (5-7 hours sleep/loss).

Lifting

- ☐ 1 I can lift heavy weights without extra pain.
- ☐ 2 I can lift heavy weights but it causes extra pain.
- ☐ 3 Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned (e.g., on a table).
- ☐ 4 Pain prevents me from lifting heavy weights off the floor, but I can manage light to medium weights if they are conveniently positioned.
- ☐ 5 I can only lift very light weights.
- ☐ 6 I cannot lift or carry anything at all.

Reading

- ☐ 1 I can read as much as I want with no neck pain.
- ☐ 2 I can read as much as I want with slight neck pain.
- ☐ 3 I can read as much as I want with moderate neck pain.
- ☐ 4 I cannot read as much as I want because of moderate neck pain.
- ☐ 5 I can hardly read at all because of severe neck pain.
- ☐ 6 I cannot read at all because of neck pain.

Driving

- ☐ 1 I can drive my car without any neck pain.
- ☐ 2 I can drive my car as long as I want with slight neck pain.
- ☐ 3 I can drive my car as long as I want with moderate neck pain.
- ☐ 4 I cannot drive my car as long as I want because of moderate neck pain.
- ☐ 5 I can hardly drive at all because of severe neck pain.
- ☐ 6 I cannot drive my car at all because of neck pain.

Concentration

- ☐ 1 I can concentrate fully when I want with no difficulty.
- ☐ 2 I can concentrate fully when I want with slight difficulty.
- ☐ 3 I have a fair degree of difficulty concentrating when I want.
- ☐ 4 I have a lot of difficulty concentrating when I want.
- ☐ 5 I have a great deal of difficulty concentrating when I want.
- ☐ 6 I cannot concentrate at all.

Recreation

- ☐ 1 I am able to engage in all my recreation activities without neck pain.
- ☐ 2 I am able to engage in all my usual recreation activities with some neck pain.
- ☐ 3 I am able to engage in most but not all my usual recreation activities because of neck pain.
- ☐ 4 I am only able to engage in a few of my usual recreation activities because of neck pain.
- ☐ 5 I can hardly do any recreation activities because of neck pain.
- ☐ 6 I cannot do any recreation activities at all.

Work

- ☐ 1 I can do as much work as I want.
- ☐ 2 I can only do my usual work but no more.
- ☐ 3 I can only do most of my usual work but no more.
- ☐ 4 I cannot do my usual work.
- ☐ 5 I can hardly do any work at all.
- ☐ 6 I cannot do any work at all.

Headaches

- ☐ 1 I have no headaches at all.
- ☐ 2 I have slight headaches which come infrequently.
- ☐ 3 I have moderate headaches which come infrequently.
- ☐ 4 I have moderate headaches which come frequently.
- ☐ 5 I have severe headaches which come frequently.
- ☐ 6 I have headaches almost all the time.

3

Neck
Index
Score

6

Index Score = [Sum of all statements selected / (# of sections with a statement selected x 5)] x 400



Instructions: The following scales have been designed to find out about your back pain and how it is affecting you. Please answer ALL the scales, and mark the ONE number on EACH scale that best describes how you feel.

1. Over the past week, on average, how would you rate your back pain?

No pain

Worst pain possible

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

2. Over the past week, how much has your back pain interfered with your daily activities (housework, washing, dressing, walking, climbing stairs, getting in/out of bed/chair)?

No interference

Unable to carry out activity

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

3. Over the past week, how much has your back pain interfered with your ability to take part in recreational, social, and family activities?

No interference

Unable to carry out activity

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

4. Over the past week, how anxious (tense, uptight, irritable, difficulty in concentrating/relaxing) have you been feeling?

Not at all anxious

Extremely anxious

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

5. Over the past week, how depressed (down-in-the-dumps, sad, in low spirits, pessimistic, unhappy) have you been feeling?

Not at all depressed

Extremely depressed

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

6. Over the past week, how have you felt your work (both inside and outside the home) has affected (or would affect) your back pain?

I have made it no worse

Have made it much worse

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

7. Over the past week, how much have you been able to control (reduce/help) your back pain on your own?

Completely control it

No control whatsoever

0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10

OTHER COMMENTS:

5

Examiner

With Permission from: Bolton JE, Green AC: The Bournemouth Questionnaire: A Short -form Comprehensive Outcome Measure. I. Psychometric Properties in Back Pain Patients. *JMPT* 1999; 22 (9): 503-510.



Instructions: The following scales have been designed to find out about your neck pain and how it is affecting you. Please answer ALL the scales, and mark the ONE number on EACH scale that best describes how you feel.

1. Over the past week, on average, how would you rate your neck pain?

No pain

Worst pain possible

0 1 2 3 4 5 6 7 8 9 10

2. Over the past week, how much has your neck pain interfered with your daily activities (housework, washing, dressing, lifting, reading, driving)?

No interference

Unable to carry out activity

0 1 2 3 4 5 6 7 8 9 10

3. Over the past week, how much has your neck pain interfered with your ability to take part in recreational, social, and family activities?

No interference

Unable to carry out activity

0 1 2 3 4 5 6 7 8 9 10

4. Over the past week, how anxious (tense, uptight, irritable, difficulty in concentrating/relaxing) have you been feeling?

Not at all anxious

Extremely anxious

0 1 2 3 4 5 6 7 8 9 10

5. Over the past week, how depressed (down-in-the-dumps, sad, in low spirits, pessimistic, unhappy) have you been feeling?

Not at all depressed

Extremely depressed

0 1 2 3 4 5 6 7 8 9 10

6. Over the past week, how have you felt your work (both inside and outside the home) has affected (or would affect) your neck pain?

Have made it no worse

Have made it much worse

0 1 2 3 4 5 6 7 8 9 10

7. Over the past week, how much have you been able to control (reduce/help) your neck pain on your own?

Completely control it

No control whatsoever

0 1 2 3 4 5 6 7 8 9 10

OTHER COMMENTS:

5

Examiner

With Permission from: Bolton JE, Humphreys BK: The Bourne-mouth Questionnaire: A Short-form Comprehensive Outcome Measure. II. Psychometric Properties in Neck Pain Patients. *JMPT* 2002; 25 (3): 141-148.

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Carolinas HealthCare System

MMG Matthews332 North Trade St.
Matthews, NC 28105-**Office/Clinic Visit Notes**

DOCUMENT NAME:

MMG Office Visit*

Patient: **KLOTZ, WILLIAM L** MRN: 118403 FIN: 72348988
Age: 67 years Sex: Male DOB: 9/8/1947
Associated Diagnoses: None
Author: **AQUINO, DANIEL MD, FACP**

Visit Information**Primary Care Provider****History of Present Illness**

67-year-old man who presents with a three-day history of mild pharyngitis some odynophagia fatigue and malaise and nonproductive cough. No fevers chills. No significant headache. No nausea vomiting diarrhea or rashes.

Health Status**Problem list:**All Problems

HTN [Hypertension] / ICD-9-CM 401.9 / Confirmed
Hyperlipidemia / ICD-9-CM 272.4 / Confirmed
Diabetes mellitus type II / ICD-9-CM 250.00 / Confirmed
Unspecified sleep apnea / ICD-9-CM 780.57 / Confirmed
Diverticulosis of colon (without mention of hemorrhage) / ICD-9-CM 562.10 / Confirmed
FAMILY HISTORY OF MALIGNANT NEOPLASM OF GASTROINTESTINAL TRACT / ICD-9-CM V16.0 / Confirmed
Nephrolithiasis / ICD-9-CM 592.0 / Confirmed
Snoring. / SNOMED CT 121022010 / Confirmed.

Allergies:Allergic Reactions (All)

No known allergies.

Current medications: (Selected)Prescriptions*Prescribed*

Zocor 10 mg oral tablet: See Instructions, TAKE 1 TABLET EACH NIGHT AT BEDTIME, 90 tablet
amLODIPine-benazepril 5 mg-10 mg oral capsule: See Instructions, TAKE 1 CAPSULE DAILY, 90 capsule
metFORMIN 500 mg oral tablet: 500 mg, 1 tablet, ORAL, BID (2 times a day), 180 tablet
simvastatin 10 mg oral tablet: See Instructions, TAKE 1 TABLET AT BEDTIME, 90 tablet

Documented Medications*Documented*

Admit Date: 5/15/2015 12:15 EDT
Disch Date: 5/15/2015 23:59 EDT
Admitting: AQUINO, DANIEL MD, FACP
Attending: AQUINO, DANIEL MD, FACP
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 72348988
DOB: 9/8/1947 Age: 67 years Sex: Male
Location: MMA
Print ID: 179485581

W. KLOTZ 000100

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Office/Clinic Visit Notes

aspirin 325 mg oral enteric coated tablet: 325 mg, 1 tablet, ORAL, Daily
multivitamin: 1 tablet, ORAL, Daily.

Histories**Family History:**

No family history items have been selected or recorded..

Procedure history:

Colonoscopy, flexible, proximal to splenic flexure; diagnostic, with or without collection of specimen(s) by brushing or washing, with or without colon decompression (separate procedure) (45378) in 2013 at 66 Years.

CT head or brain; with contrast material(s) (70460) in 2011 at 64 Years.

Comments:

10/25/2011 08:48 - LEWIS , JEANNE A

NEGATIVE CT BRAIN.

CT thoracic spine; with contrast material (72129) in 2009 at 62 Years.

Comments:

10/29/2013 14:22 - BAGLEY , ANGELA AMB RN

Prominent left subclavian artery which accounts for the paratracheal soft tissue fullness seen on the plain chest x-ray. Bilateral, mostly basilar, areas of scarring or atelectasis. On the few images obtained below the diaphragm there appear to be several tiny liver cysts, an upper pole right renal calcification, and a small hiatal hernia.

Radiologic examination, chest, 2 views, frontal and lateral; (71020) in 2009 at 61 Years.

Comments:

10/29/2013 14:18 - BAGLEY , ANGELA AMB RN

Stable abnormal findings, as described.

Radiologic examination, chest, 2 views, frontal and lateral; (71020) in 2009 at 61 Years.

Comments:

10/29/2013 14:17 - BAGLEY , ANGELA AMB RN

Recommend chest CT for further evaluation of enlarging soft tissue density in the retrocardiac left lower lobe.

EKG (93000) in 2009 at 61 Years.

Comments:

10/29/2013 14:24 - BAGLEY , ANGELA AMB RN

Sinus rhythm. Abnormal left axis deviation. Septal infarct, age undetermined. ST & T wave abnormality, possible lateral ischemia. Abnormal ECG.

Lithotripsy, extracorporeal shock wave (50590) in 2009 at 61 Years.

Colonoscopy (45380) in 2003 at 55 Years..

Social History**Social & Psychosocial Habits****Home/Environment**

07/11/2014 **Marital Status:** Married

Alcohol

07/11/2014 **Frequency:** Occasionally

Use: Current

Drug Abuse

07/11/2014 **Use:** Denies

Admit Date: 5/15/2015 12:15 EDT
Disch Date: 5/15/2015 23:59 EDT
Admitting: AQUINO ,DANIEL MD,FACP
Attending: AQUINO ,DANIEL MD,FACP
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 72348988
DOB: 9/8/1947 Age: 67 years Sex: Male
Location: MMA
Print ID: 179485581

W. KLOTZ 000101

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Office/Clinic Visit Notes**Employment/School**07/11/2014 **Description:** Nuclear Safety Analyst**Status:** Employed**Tobacco**11/01/2013 **Smoking Status:** Never smoker**Exercise**02/20/2015 **Exercise Type:** Walking**Exercise:** Inconsistent**Review of Systems****Physical Examination****VS/Measurements****Vital Signs**

5/15/2015 12:52 EDT

Temperature Oral (F)

98.2 DegF

Peripheral Pulse Rate

88 BPM

Systolic Blood Pressure

128 mmHg

Diastolic Blood Pressure

80 mmHg

, Measurements from flowsheet : Measurements - Standard

5/15/2015 12:52 EDT

Height Contributor (ft)

6 ft

Height Contributor (inches)

2.75 inch

, Metric Measurements from chart : Measurements - Metric

5/15/2015 12:52 EDT

Height

189.87 cm

He is in no apparent distress

ENT shows mild erythema is mucosa and oropharynx. No exudates. Minimal anterior cervical lymphadenopathy. ENT is otherwise clear

Lungs clear without rales or wheeze

Heart normal S1-S2 no S3 or S4

Impression and Plan**Assessment**

1 viral upper respiratory infection. Blood sugars have been unaffected

Plan

#1 Tylenol p.r.n. discomfort. He is given a prescription for Magic mouthwash p.r.n. he will let us know if symptoms fail to improve or worsen

Electronically Signed By: AQUINO, DANIEL MD, F**05/15/2015 02:18 PM**

Admit Date: 5/15/2015 12:15 EDT

Disch Date: 5/15/2015 23:59 EDT

Admitting: AQUINO ,DANIEL MD,FACP

Attending: AQUINO ,DANIEL MD,FACP

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN: 118403

Acct#: 72348988

DOB: 9/8/1947

Age: 67 years

Sex: Male

Location: MMA

Print ID: 179485581

W. KLOTZ 000102

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/14/2016 15:25 EDT	Age 69 years
Admin Person DELP ,LOUISE E	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/8/2017	Lot Number UI703AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

High Dose. VIS given 08/07/2015

Vaccine influenza virus vaccine,inactivated	Date Given 9/15/2014 08:50 EDT	Age 67 years
Admin Person MAKLEY ,JOAN H RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm-Upper, L	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Received at work

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2013 14:08 EDT	Age 66 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2014	Lot Number 5L33C	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2012 14:02 EDT	Age 64 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Right	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/4/2013	Lot Number U4537AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Admit Date: 5/15/2015 12:15 EDT
Disch Date: 5/15/2015 23:59 EDT
Admitting: AQUINO ,DANIEL MD,FACP
Attending: AQUINO ,DANIEL MD,FACP
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 72348988
DOB: 9/8/1947 Age: 67 years Sex: Male
Location: MMA
Print ID: 179485581

W. KLOTZ 000103

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Immunizations

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		11/1/2011 09:42 EDT		64 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
6/30/2013	UH745AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

pt got at work

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		11/1/2010 08:00 EDT		63 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:		Vaccine For Children Status:	
6/30/2012	UH476AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not given at this facility

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		10/1/2008 09:00 EDT		61 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Unknown	IM (INTRAMUSCULAR)	0.5mL			
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not givenat this facility

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		9/1/2007 13:59 EDT		59 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Unknown	IM (INTRAMUSCULAR)	0.5mL			
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not givenat this facility

Admit Date: 5/15/2015 12:15 EDT
Disch Date: 5/15/2015 23:59 EDT
Admitting: AQUINO ,DANIEL MD,FACP
Attending: AQUINO ,DANIEL MD,FACP
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 72348988
DOB: 9/8/1947 Age: 67 years Sex: Male
Location: MMA
Print ID: 179485581

W. KLOTZ 000104

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 7/064 Fax Server

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Immunizations

Vaccine pneumococcal 23-valent vaccine	Date Given 10/19/2012 10:30 EDT	Age 65 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 12/9/2013	Lot Number 0707AE	Funding Source:
Vaccine Information Statement: VIS-4/16/2009	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

Vaccine tetanus/diphtheria/pertussis,acel(Tdap)	Date Given 3/16/2014 13:37 EDT	Age 66 years
Admin Person NEWSTREET ,CATHERINE RN	Facility: MMG Museum	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 	Lot Number U4700BA	Funding Source:
Vaccine Information Statement: 	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

Given at Minute Clinic.

Vaccine tetanus-diphtheria toxoids (Td)	Date Given 8/1/2009 08:01 EDT	Age 61 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 11/15/2013	Lot Number U3696AA	Funding Source:
Vaccine Information Statement: 	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

not given at this facility

Vaccine yellow fever vaccine	Date Given 4/28/2000 00:00 EDT	Age 52 years
Admin Person CLINE ,JANET RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.5mL
Expiration Date 1/18/2001	Lot Number UA177AA	Funding Source:
Vaccine Information Statement: 	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

Not administered by writer

Admit Date: 5/15/2015 12:15 EDT
Disch Date: 5/15/2015 23:59 EDT
Admitting: AQUINO ,DANIEL MD,FACP
Attending: AQUINO ,DANIEL MD,FACP
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 72348988
DOB: 9/8/1947 Age: 67 years Sex: Male
Location: MMA
Print ID: 179485581

W. KLOTZ 000105

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 8/064 Fax Server

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Immunizations			
Vaccine zoster vaccine live		Date Given 10/7/2011 08:30 EDT	
Admin Person AUSTIN ,JANICE P RN		Age 64 years	
Facility: MMG Matthews		Data Source PowerChart	
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.6mL	Manufacturer MERCK & CO., INC.
Expiration Date 8/17/2012	Lot Number 0730AA	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Date Given:	
VIS- 9/11/2006			

Admit Date: 5/15/2015 12:15 EDT
Disch Date: 5/15/2015 23:59 EDT
Admitting: AQUINO ,DANIEL MD,FACP
Attending: AQUINO ,DANIEL MD,FACP
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 72348988
DOB: 9/8/1947 Age: 67 years Sex: Male
Location: MMA
Print ID: 179485581

W. KLOTZ 000106

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 9/064 Fax Server

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Carolinas HealthCare System

MMG Matthews

332 North Trade St.
Matthews, NC 28105-

Chemistry

Collected Date		9/18/2015	
Collected Time		14:46 EDT	
Procedure		Units	Reference Range
Sodium Level	143 ^{*1}	mmol/L	[136.0-145.0]
Potassium Level	4.0 ^{*1}	mmol/L	[3.5-5.5]
Chloride Level	106 ^{*1}	mmol/L	[98.0-107.0]
CO2	21 ^{L*1}	mmol/L	[22.0-29.0]
Glucose Level	135 ^{H R1 *1}	mg/dL	[70-100]
BUN	16 ^{*1}	mg/dL	[6.0-20.0]
Creatinine	0.90 ^{*1}	mg/dL	[0.70-1.20]
Estimated GFR Non-African American	>59 ^{R2 *1}	mL/min/1.73_m2	[>59]
Estimated GFR African American	>59 ^{R3 *1}	mL/min/1.73_m2	[>59]
Calcium Level	9.5 ^{*1}	mg/dL	[8.4-10.4]
Albumin Level	4.1 ^{*1}	g/dL	[3.50-5.20]
Total Protein	6.8 ^{*1}	g/dL	[6.6-8.7]
Total Bilirubin	0.6 ^{*1}	mg/dL	[0.0-1.2]
Alkaline Phosphatase	62 ^{*1}	[U]/L	[40.0-129.0]
ALT	28 ^{R4 *1}	[U]/L	[0.0-41.0]
AST	23 ^{*1}	[U]/L	[0.0-40.0]
HGB A1C	7.0 ^{H R5 *1}	%	[4.8-5.6]

Result Comments

- R1: Glucose Level
FASTING GLUCOSE
- R2: Estimated GFR Non-African American
Calculated GFR for non-African American patients using MDRD formula.
- R3: Estimated GFR African American
Calculated GFR for African American patients using MDRD formula.
- R4: ALT
PERFORMED BY MECKLENBURG MEDICAL GROUP MUSEUM, 3030 RANDOLPH RD, CHARLOTTE, NC
28211. (704) 302 8200
- R5: HGB A1C
5.7-6.4 % increased risk for diabetes
≥6.5 % Indicates Diabetes

HGBA1C may be overestimated in diabetic patients exhibiting poor controls and who are also heterozygous or homozygous for HgBS or HgBC. Total glycohemoglobin is a better indicator of diabetic control in patients with these hemoglobin variants.

Admit Date: 9/18/2015 14:00 EDT
Disch Date: 9/18/2015 23:59 EDT
Admitting: KNISH, EDWARD J MD
Attending: KNISH, EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 74824447
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485580

W. KLOTZ 000107

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 10/064 Fax Server

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Chemistry**Result Comments**

R5: HGB A1C
NEW REFERENCE RANGE
PERFORMED BY MECKLENBURG MEDICAL GROUP MUSEUM, 3030 RANDOLPH RD, CHARLOTTE, NC
28211. (704) 302 8200

Performing Locations

*1: This test was performed at:
MMG Museum Lab, 3030 Randolph Rd, Medical Director: Gordon, Dana MT, 704-302-8200, Charlotte, NC,
28211-

Office/Clinic Visit Notes

DOCUMENT NAME:

General Note

Patient: KLOTZ, WILLIAM L MRN: 118403 FIN: 74824447
Age: 68 years Sex: Male DOB: 9/8/1947
Associated Diagnoses: None
Author: KNISH, EDWARD J MD

HPI: Patient presents for follow-up of multiple problems including diabetes, hypertension, hyperlipidemia. He was in a motor vehicle accident 6 months ago and had some discomfort in his neck and back the results of the accident. He also feels that his right foot has been a little bit weaker and he noticed a callus on the bottom of his right foot which has been more painful the last several months. He has been seeing a chiropractor fairly regularly since the accident and his neck is better and lower back is improving although still some stiffness and discomfort. He took some muscle relaxants for a while but is no longer taking those._

Allergies:

No known allergies

Med List with Compliance (ST)**ACTIVE MEDICATIONS:**

One Touch Delica Lancets:One Touch Delica Lancets, See Instructions, test daily, 100 Each, 0 Refill(s), DAW, Pharmacy: CVS/pharmacy #4299
amLODIPine-benazepril 5 mg-10 mg oral capsule:See Instructions, TAKE 1 CAPSULE DAILY, 90 capsule, 3 Refill(s), eRx: CVS Caremark MAILORDER Pharmacy
one touch ultra 2 test strips with delica lancets:one touch ultra 2 test strips with delica lancets, See Instructions, test daily, 100 Each, 4 Refill(s), DAW, Pharmacy: CVS Caremark MAILORDER Pharmacy
simvastatin 10 mg oral tablet:See Instructions, TAKE 1 TABLET AT BEDTIME, 90 tablet, 1 Refill(s), eRx: CVS Caremark MAILSERVICE Pharmacy
metFORMIN 500 mg oral tablet:See Instructions, TAKE 1 TABLET TWICE A DAY, 180 tablet, 1 Refill(s), eRx: CVS Caremark MAILSERVICE Pharmacy
Compliance Status: Still taking, not as prescribed
takes 2 tablets BID
aspirin 81 mg oral tablet:3 tablets, ORAL, Daily, 0 Refill(s)
Vitamin B Complex oral tablet:1 tablet, ORAL, Daily, 0 Refill(s)

Admit Date: 9/18/2015 14:00 EDT
Disch Date: 9/18/2015 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 74824447
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485580

W. KLOTZ 000108

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Office/Clinic Visit Notes

vitamin D3:0 Refill(s)

Problems:

Diabetes
Diabetes mellitus type ii
Diverticulosis of colon (without mention of hemorrhage)
Family history of malignant neoplasm of gastrointestinal tract
Htn [hypertension]
Hyperlipidemia
Nephrolithiasis
Snoring.
Unspecified sleep apnea

SOCIAL HISTORY: Married, retired family doing well, doing some walking**REVIEW OF SYSTEMS:**

Gen. weight stable, energy level about the same
ENT has a deviated septum is considering having this repaired
Skin has a lesion on his back that was biopsied today and awaiting results
Musculoskeletal lower back discomfort and stiffness after the accident as above, neck is better. Callus on the bottom of the right foot which is painful

OBJECTIVE:

Weight(lb): 208 09-18-15
Height(ft/in): 6'2" 09-18-15
BMI: 26.25 09-18-15

Temperature No result

Systolic Blood Pressure 134 (14:08)

Diastolic Blood Pressure 84 (14:08)

Pulse 84 (14:08)

SpO2 No result

Respiratory Rate No result

PE:

Gen. patient in no distress
HEENT conjunctivae clear, pharynx negative
Neck is supple no adenopathy or bruits
Lungs clear
Cardiac exam regular rate and rhythm
Abdomen soft and nontender
Extremities no edema, calves nontender, back unremarkable
Skin large callus over the bottom of the first MTP joint on the right foot

ASSESSMENT:

1. Diabetes
2. Lower back pain following motor vehicle accident, improved with time and conservative treatment

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Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 74824447
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485580

W. KLOTZ 000109

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Office/Clinic Visit Notes

3. Hypertension
4. Hyperlipidemia
5. Sleep apnea/snoring
6. Deviated nasal septum
7. Lesion, back—awaiting biopsy results
8. Callus, right foot

PLAN:

1. CMP, hemoglobin A1c today
2. Suggest patient see podiatrist regarding the callus on his foot
3. Check results of biopsy of the lesion of his back
4. Suggest patient see ENT regarding the deviated septum and possible repair
5. Continue conservative treatment for his back
6. Wellness visit in 6 months

Electronically Signed By: KNISH, EDWARD J MD
09/19/2015 09:00 PM

Immunizations

Vaccine	Date Given	Age	
influenza virus vaccine,inactivated	10/14/2016 15:25 EDT	69 years	
Admin Person	Facility:	Data Source	
DELP ,LOUISE E	MMG Matthews	PowerChart	
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
5/8/2017	UI703AA		
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:	

Vaccine	Date Given	Age	
influenza virus vaccine,inactivated	9/15/2014 08:50 EDT	67 years	
Admin Person	Facility:	Data Source	
MAKLEY ,JOAN H RN	MMG Matthews	PowerChart	
Site	Route	Amount	Manufacturer
Arm-Upper, L	IM (INTRAMUSCULAR)	0.5mL	Novartis Pharmaceuticals
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:	

Admit Date: 9/18/2015 14:00 EDT
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Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 74824447
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485580

W. KLOTZ 000110

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2013 14:08 EDT	Age 66 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2014	Lot Number 5L33C	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2012 14:02 EDT	Age 64 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Right	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/4/2013	Lot Number U4537AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Vaccine influenza virus vaccine,inactivated	Date Given 11/1/2011 09:42 EDT	Age 64 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2013	Lot Number UH745AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt got at work

Vaccine influenza virus vaccine,inactivated	Date Given 11/1/2010 08:00 EDT	Age 63 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2012	Lot Number UH476AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not given at this facility

Admit Date: 9/18/2015 14:00 EDT
Disch Date: 9/18/2015 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 74824447
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485580

W. KLOTZ 000111

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2008 09:00 EDT	Age 61 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Unknown	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2007 13:59 EDT	Age 59 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Unknown	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Vaccine pneumococcal 23-valent vaccine	Date Given 10/19/2012 10:30 EDT	Age 65 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 12/9/2013	Lot Number 0707AE	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

VIS-4/16/2009

Vaccine tetanus/diphtheria/pertussis,acel(Tdap)	Date Given 3/16/2014 13:37 EDT	Age 66 years
Admin Person NEWSTREET ,CATHERINE RN	Facility: MMG Museum	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number U4700BA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Given at Minute Clinic.

Admit Date: 9/18/2015 14:00 EDT
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Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 74824447
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485580

W. KLOTZ 000112

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Immunizations

Vaccine		Date Given		Age	
tetanus-diphtheria toxoids (Td)		8/1/2009 08:01 EDT		61 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:		Vaccine For Children Status:	
11/15/2013	U3696AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not given at this facility

Vaccine		Date Given		Age	
yellow fever vaccine		4/28/2000 00:00 EDT		52 years	
Admin Person		Facility:		Data Source	
CLINE ,JANET RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Arm, Left	SUBCUTANEOUS	0.5mL	Pasteur Merieux Connaught		
Expiration Date	Lot Number	Funding Source:		Vaccine For Children Status:	
1/18/2001	UA177AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

Not administered by writer

Vaccine		Date Given		Age	
zoster vaccine live		10/7/2011 08:30 EDT		64 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Arm, Left	SUBCUTANEOUS	0.6mL	MERCK & CO., INC.		
Expiration Date	Lot Number	Funding Source:		Vaccine For Children Status:	
8/17/2012	0730AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

VIS- 9/11/2006

Admit Date: 9/18/2015 14:00 EDT
Disch Date: 9/18/2015 23:59 EDT
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Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 74824447
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485580

W. KLOTZ 000113

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Carolinas HealthCare System

MMG Matthews332 North Trade St.
Matthews, NC 28105-**History and Physical Reports**

DOCUMENT NAME:

Male CPE

Patient: **KLOTZ, WILLIAM L** MRN: **118403** FIN: **75547959**
Age: **68 years** Sex: **Male** DOB: **9/8/1947**
Associated Diagnoses: **None**
Author: **KNISH, EDWARD J MD**

HPI: Patient presents for preventive exam. He states he is doing fairly well overall except that he's noticed hematuria since he's been on the eloquent was which has been fairly consistent. He's had no urinary discomfort or symptoms of stones. He did have lithotripsy for kidney stones in 2009 but has not had any recurrence or treatment since then. He recently had cardioversion for atrial fibrillation and has done well since that time. His fatigue and dyspnea is better since he is back in regular rhythm._

Allergies:

Latex

Med List with Compliance (ST)**ACTIVE MEDICATIONS:**

One Touch Delica Lancets:One Touch Delica Lancets, See Instructions, test daily, 100 Each, 0 Refill(s), DAW, Pharmacy: CVS/pharmacy #4299

one touch ultra 2 test strips with delica lancets:one touch ultra 2 test strips with delica lancets, See Instructions, test daily, 100 Each, 4 Refill(s), DAW, Pharmacy: CVS Caremark MAILORDER Pharmacy

Eliquis 5 mg oral tablet:5 mg per 1 tablet, ORAL, BID (2 times a day), 180 tablet, 3 Refill(s), Pharmacy: CVS Caremark MAILSERVICE Pharmacy

Coreg 6.25 mg oral tablet:6.25 mg per 1 tablet, ORAL, BID (2 times a day), 60 tablet, 3 Refill(s), Pharmacy: CVS/pharmacy #4299

Lasix 20 mg oral tablet:20 mg per 1 tablet, ORAL, Daily, take one tablet x 4 days, then take once daily as needed for swelling or weight gain >3 pounds in 2 days., 30 tablet, 0 Refill(s), Pharmacy: CVS/pharmacy #4299

metFORMIN 500 mg oral tablet:500 mg per 1 tablet, ORAL, BID (2 times a day), 90 day(s), 180 tablet, 4 Refill(s), Pharmacy: CVS Caremark MAILSERVICE Pharmacy

Problems:

Atrial fibrillation

Atrial flutter

Cardiomyopathy

Diabetes

Diabetes mellitus type ii

Diverticulosis of colon (without mention of hemorrhage)

Family history of malignant neoplasm of gastrointestinal tract

Admit Date: 4/8/2016 14:00 EDT

Disch Date: 4/8/2016 23:59 EDT

Admitting: KNISH,EDWARD J MD

Attending: KNISH,EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN:118403

Acct#: 75547959

DOB: 9/8/1947

Age: 68 years Sex: Male

Location: MMA

Print ID: 179485578

W. KLOTZ 000114

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History and Physical Reports

Htn [hypertension]
Hyperlipidemia
Nephrolithiasis
Snoring.
Unspecified sleep apnea

SOCIAL HISTORY:**Social & Psychosocial Habits****Home/Environment**07/11/2014 **Marital Status:** Married**Alcohol**07/11/2014 **Use:** Current**Frequency:** Occasionally**Drug Abuse**07/11/2014 **Use:** Denies**Employment/School**07/11/2014 **Status:** Employed**Description:** Nuclear Safety Analyst**Nutrition/Health**04/01/2016 **Home Diet:** Diabetic**Tobacco**11/01/2013 **Smoking Status:** Never smoker**Exercise**02/20/2015 **Exercise:** Inconsistent**Exercise Type:** Walking**FAMILY HISTORY:****Family History by Member**

Mother:

Colon cancer(+)

PREVENTATIVE EXAM: Retinal eye exam 8/7/2015, colonoscopy 12/13/2013**REVIEW OF SYSTEMS:**

Gen. fatigue is somewhat improved

ENT snoring, ongoing

Pulmonary dyspnea better since cardioversion

GU hematuria since she's been on blood thinner over the past several weeks

Skin had skin cancer removed

Psychological some anxiety

Rest of 11 system review is negative

Admit Date: 4/8/2016 14:00 EDT

Disch Date: 4/8/2016 23:59 EDT

Admitting: KNISH,EDWARD J MD

Attending: KNISH,EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN: 118403

Acct#: 75547959

DOB: 9/8/1947

Age: 68 years Sex: Male

Location: MMA

Print ID: 179485578

W. KLOTZ 000115

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History and Physical Reports**OBJECTIVE:**

Weight(lb): 205 04-08-16
Height(ft/in): 6'2" 04-08-16
BMI: 26.35 04-08-16
Temperature No result
Systolic Blood Pressure 120 (15:11)
Diastolic Blood Pressure 88 (15:11)
Pulse 84 (14:13)
SpO2 No result
Respiratory Rate No result

GENERAL APPEARANCE: Well-developed, well-nourished male in no acute distress.

EYES: Conjunctivae and lids unremarkable. PERRL. EOMI. Fundi without vessel changes or lesions, discs appear normal.

ENT: TMs are clear without lesions or scarring. External auditory canals are clear. Nasal mucosa grossly normal. Lips without lesions. Oral mucosa intact without lesions. Tonsils unremarkable. Posterior pharynx without erythema or exudate.

NECK: Supple without adenopathy, thyromegaly or bruits.

LUNGS: Clear to auscultation and percussion.

CARDIAC: RRR without murmur, gallop or rub. Carotids are normal. Pedal pulses intact bilaterally and equal. Abdominal aorta without significant palpable abnormality.

ABDOMEN: Soft and nontender without organomegaly or mass.

GENITALIA: Normal male. No testicular mass. No hernia.

RECTAL EXAM: Normal tone and no rectal mass. . Prostate within normal limits without nodules or tenderness.

EXTREMITIES: No cyanosis, clubbing or edema.

LYMPH NODES: Negative including cervical, axillary and inguinal.

SKIN: No rash or discrete lesions. Benign skin changes only noted.

MUSCULOSKELETAL: Good range of motion of all joints. No obvious joint abnormality noted.

NEUROLOGIC: Cranial nerves are intact. Reflexes 2+ and symmetric. Motor grossly intact throughout with good range of motion of all extremities. Decreased sensation over the L5 distribution in the right lower extremity, normal on the left.

ASSESSMENT:

1. Preventive exam
2. Status post cardioversion for atrial fibrillation, now in sinus rhythm
3. Diabetes
4. Cardiomyopathy
5. Hypertension
6. Hyperlipidemia
7. Sleep apnea
8. Snoring
9. Hematuria--? Related to anticoagulant, history of stones or other cause
10. Fatigue and dyspnea--better after cardioversion_

Admit Date: 4/8/2016 14:00 EDT
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Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 75547959
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485578

W. KLOTZ 000116

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History and Physical Reports**PLAN:**

1. CMP, lipid panel, hemoglobin A1c, PSA, urinalysis, urine microalbumin today
2. Continue current medical regimen
3. If hematuria is again demonstrated on urinalysis and no other cause is determined, we'll have him see a urologist
4. Follow-up with cardiology regarding his atrial fibrillation
5. Office visit in 6 months

Electronically Signed By: KNISH, EDWARD J MD**04/09/2016 01:46 PM****Hematology**

Collected Date:	4/8/2016		
Collected Time:	14:53 EDT		
Procedure		Units	Reference Range
WBC	8.5 *1	10 ³ /uL	[3.6-10.4]
RBC	5.42 *1	10 ⁶ /uL	[4.16-5.83]
HGB	16.5 *1	g/dL	[13.0-17.4]
HCT	50 *1	%	[39-52]
MCV	92 *1	fL	[82-99]
MCH	31 *1		[27-34]
MCHC	33 *1	g/dL	[32-35]
RDW	12.8 *1	%	[12.2-16.3]
Platelet	231 *1	10 ³ /uL	[142-328]
MPV	7.2 *1	fL	[6.0-9.5]
Diff Type	AUTOMATED *1		
Absolute Neut	4.96 *1	10 ³ /uL	[1.60-7.71]
Absolute Lymph	2.44 *1	10 ³ /uL	[1.05-3.20]
Absolute Mono	0.80 *1	10 ³ /uL	[0.20-0.90]
Absolute EOS	0.23 *1	10 ³ /uL	[0.00-0.50]
Absolute Basos	0.09 *1	10 ³ /uL	[0.00-0.11]
Neutrophils	58 *1	%	[41-74]
Lymph	29 *1	%	[15-48]
Monocytes	9 *1	%	[5-13]
Eosinophils	3 *1	%	[0.0-7.0]
Basophils	1 *1	%	[0.0-2.0]

Performing Locations

*1: This test was performed at:

MMG Matthews Lab, 332 Sam Newell Rd, Suite 2000, Medical Director: Gordon, Dana MT, 704-302-8500,
Matthews, NC, 28105-

Admit Date: 4/8/2016 14:00 EDT

Disch Date: 4/8/2016 23:59 EDT

Admitting: KNISH, EDWARD J MD

Attending: KNISH, EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN: 118403

Acct#: 75547959

DOB: 9/8/1947

Age: 68 years Sex: Male

Location: MMA

Print ID: 179485578

W. KLOTZ 000117

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Chemistry

Collected Date	4/8/2016		
Collected Time	14:53 EDT		
Procedure		Units	Reference Range
Sodium Level	147 ^{H 2}	mmol/L	[136.0-145.0]
Potassium Level	4.5 ²	mmol/L	[3.5-5.5]
Chloride Level	107 ²	mmol/L	[98.0-107.0]
CO2	23 ²	mmol/L	[22.0-29.0]
Glucose Level	143 ^{H R1 2}	mg/dL	[70-100]
BUN	17 ²	mg/dL	[6.0-20.0]
Creatinine	0.90 ²	mg/dL	[0.70-1.20]
Estimated GFR Non-African American	>59 ^{R2 2}	mL/min/1.73_m2	[>59]
Estimated GFR African American	>59 ^{R3 2}	mL/min/1.73_m2	[>59]
Calcium Level	9.9 ²	mg/dL	[8.4-10.4]
Albumin Level	4.5 ²	g/dL	[3.50-5.20]
Total Protein	6.8 ²	g/dL	[6.6-8.7]
Total Bilirubin	0.7 ²	mg/dL	[0.0-1.2]
Alkaline Phosphatase	81 ²	[IU]/L	[40.0-129.0]
ALT	18 ²	[IU]/L	[0.0-41.0]
AST	17 ²	[IU]/L	[0.0-40.0]
Cholesterol	189 ²	mg/dL	[<200]
Triglycerides	150 ^{H 2}	mg/dL	[<150]
HDL-Cholesterol	40 ²	mg/dL	[40-60]
LDL-Cholesterol	119 ^{H 2}	mg/dL	[<100]
Non HDL Chol (LDL+VLDL)	149 ^{R4 2}	mg/dL	
HGB A1C	7.7 ^{H R5 2}	%	[4.8-5.6]
PSA	1.8 ^{R6 2}	ng/mL	[0.0-4.5]
Creatinine, Spot Urine	235 ^{H 2}	mg/dL	[30-125]
Microalbumin-Random Urine	1379.5 ^{H R7 2}	mg/L	[<20]
Albumin/Creat Ratio	587 ^{H 2}	ug/mg creat	[<30]

Result Comments

- R1: Glucose Level
FASTING GLUCOSE
- R2: Estimated GFR Non-African American
Calculated GFR for non-African American patients using MDRD formula.
- R3: Estimated GFR African American
Calculated GFR for African American patients using MDRD formula.
- R4: Non HDL Chol (LDL+VLDL)
GOAL FOR HIGH RISK PATIENTS: <130 MG/DL
GOAL FOR HIGHEST RISK PATIENT: <100 MG/DL
- R5: HGB A1C
5.7-6.4 % increased risk for diabetes
>=6.5 % Indicates Diabetes

HGBA1C may be overestimated in diabetic patients exhibiting poor controls and who are also heterozygous or homozygous for HgBS or HgBC. Total glycohemoglobin is a better indicator of diabetic control in patients with these hemoglobin variants.

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Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 75547959
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485578

W. KLOTZ 000118

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Chemistry**Result Comments**

R5: HGB A1C

NEW REFERENCE RANGE

R6: PSA

PERFORMED BY BY ELECSYS IMMUNOASSAY METHOD

R7: Microalbumin-Random Urine

VERIFIED BY DILUTION

Performing Locations

*2: This test was performed at:

MMG Museum Lab, 3030 Randolph Rd, Medical Director: Gordon, Dana MT, 704-302-8200, Charlotte, NC, 28211-

Urinalysis

Collected Date:	4/8/2016		
Collected Time:	14:53 EDT		
Procedure		Units	Reference Range
Urine Color	RED [†]		
Urine Clarity	CLOUDY [†]		
Urine Glucose	Negative [†]	mg/dL	[NEG]
BILE	MODERATE ^{A †}		[NEG]
Urine Ketones	TRACE ^{A †}	mg/dL	[NEG]
Urine Specific Gravity	1.025 [†]		[1.001-1.030]
Hemoglobin-Urine	LARGE ^{A †}		[NEG]
Urine RBC	>100 [†]	/[HPF]	[0-3]
Urine pH	5.5 [†]		[4.6-8.0]
Urine Albumin	>300.000 ^{A †}	mg/dL	[NEG]
Urobilinogen	1.0 [†]	mg/dL	[0.2-1.0]
Urine Nitrite	Negative [†]		[NEG]
Urine Leuko.Esterase	MODERATE ^{A †}		[NEG]
Urine WBC	10-20 [†]	/[HPF]	[0-5]
Urine Bacteria	RARE [†]		[0]
Urine Mucus	FEW ^{RB †}		
Reducing Substance	NOT APPLICABLE [†]		[NAP]

Result CommentsR8: Urine Mucus
PRESENT**Performing Locations**

*1: This test was performed at:

MMG Matthews Lab, 332 Sam Newell Rd, Suite 2000, Medical Director: Gordon, Dana MT, 704-302-8500, Matthews, NC, 28105-

Admit Date: 4/8/2016 14:00 EDT
Disch Date: 4/8/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 75547959
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485578

W. KLOTZ 000119

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 22/064 Fax Server

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/14/2016 15:25 EDT	Age 69 years
Admin Person DELP ,LOUISE E	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/8/2017	Lot Number UI703AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

High Dose. VIS given 08/07/2015

Vaccine influenza virus vaccine,inactivated	Date Given 9/15/2014 08:50 EDT	Age 67 years
Admin Person MAKLEY ,JOAN H RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm-Upper, L	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Received at work

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2013 14:08 EDT	Age 66 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2014	Lot Number 5L33C	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2012 14:02 EDT	Age 64 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Right	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/4/2013	Lot Number U4537AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Admit Date: 4/8/2016 14:00 EDT
Disch Date: 4/8/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 75547959
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485578

W. KLOTZ 000120

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 23/064 Fax Server

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Immunizations			
Vaccine		Date Given	Age
influenza virus vaccine,inactivated		11/1/2011 09:42 EDT	64 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
6/30/2013	UH745AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt got at work

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		11/1/2010 08:00 EDT	63 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
6/30/2012	UH476AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not given at this facility

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		10/1/2008 09:00 EDT	61 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Unknown	IM (INTRAMUSCULAR)	0.5mL	
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		9/1/2007 13:59 EDT	59 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Unknown	IM (INTRAMUSCULAR)	0.5mL	
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Admit Date: 4/8/2016 14:00 EDT
Disch Date: 4/8/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 75547959
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485578

W. KLOTZ 000121

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Immunizations			
Vaccine		Date Given	Age
pneumococcal 23-valent vaccine		10/19/2012 10:30 EDT	65 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	MERCK & CO., INC.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
12/9/2013	0707AE		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:
VIS-4/16/2009			

Vaccine		Date Given	Age
tetanus/diphtheria/pertussis,acel(Tdap)		3/16/2014 13:37 EDT	66 years
Admin Person		Facility:	Data Source
NEWSTREET ,CATHERINE RN		MMG Museum	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	sanofi pasteur
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
	U4700BA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Given at Minute Clinic.

Vaccine		Date Given	Age
tetanus-diphtheria toxoids (Td)		8/1/2009 08:01 EDT	61 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
11/15/2013	U3696AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not given at this facility

Vaccine		Date Given	Age
yellow fever vaccine		4/28/2000 00:00 EDT	52 years
Admin Person		Facility:	Data Source
CLINE ,JANET RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Arm, Left	SUBCUTANEOUS	0.5mL	Pasteur Merieux Connaught
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
1/18/2001	UA177AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Not administered by writer

Admit Date: 4/8/2016 14:00 EDT
Disch Date: 4/8/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 75547959
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485578

W. KLOTZ 000122

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Immunizations			
Vaccine zoster vaccine live		Date Given 10/7/2011 08:30 EDT	
Admin Person AUSTIN ,JANICE P RN		Age 64 years	
Facility: MMG Matthews		Data Source PowerChart	
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.6mL	Manufacturer MERCK & CO., INC.
Expiration Date 8/17/2012	Lot Number 0730AA	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Date Given:	
VIS- 9/11/2006			

Admit Date: 4/8/2016 14:00 EDT
Disch Date: 4/8/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 75547959
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485578

W. KLOTZ 000123

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 26/064 Fax Server

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Carolinas HealthCare System

MMG Matthews332 North Trade St.
Matthews, NC 28105-**Chemistry**

Collected Date	12/4/2015	12/4/2015		
Collected Time	16:04 EST	16:03 EST		
Procedure			Units	Reference Range
TSH	-	0.570 ^{*1}	u[IU]/mL	[0.270-4.200]
T4(Free)	-	1.03 ^{*1}	ng/dL	[0.93-1.70]
Cardiac BNP	356 ^{H*2}	-	pg/mL	<100]
Troponin I	0.04 ^{H R1 *3}	-	ng/mL	<0.03]
Troponin I Interpretation	BORDERLINE ^{R2 *3}	-		

Result CommentsR1: Troponin I
NEW METHOD, NEW REFERENCE RANGER2: Troponin I Interpretation
<0.03 ng/ml Normal
0.03-0.3 ng/ml Borderline
>0.3 ng/ml Abnormal**Performing Locations**

- *1: This test was performed at:
MMG Museum Lab, 3030 Randolph Rd, Medical Director: Gordon, Dana MT, 704-302-8200, Charlotte, NC, 28211-
- *2: This test was performed at:
Carolinas Healthcare System Lab, 5040 Airport Center Parkway, Medical Director: Lipford, Edward MD, 704-512-4900, Charlotte, NC, 28208-
- *3: This test was performed at:
CMC Lab, Carolinas Medical Center, 1000 Blythe Blvd, Medical Director: Lipford, Edward MD, 704-355-9350, Charlotte, NC, 28203-

Office/Clinic Visit Notes

DOCUMENT NAME:

General Note

Patient: KLOTZ, WILLIAM L MRN: 118403 FIN: 77290159
Age: 68 years Sex: Male DOB: 9/8/1947
Associated Diagnoses: None
Author: KNISH, EDWARD J MD

Admit Date: 12/4/2015 14:30 EST
Disch Date: 12/4/2015 23:59 EST
Admitting: KNISH, EDWARD J MD
Attending: KNISH, EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 77290159
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485579

W. KLOTZ 000124

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 27/064 Fax Server

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Office/Clinic Visit Notes

HPI: Patient presents for follow-up from urgent care visit on 11/22/2015. Patient states that he developed cold symptoms about 6 weeks ago and then noticed quite a bit of cough fatigue and he went to emergency room in Aiken South Carolina where he had a evaluation. He was noted to have a mildly high pulse and elevated systolic blood pressure, white count was 10.3 and chest x-ray showed possible small left pleural effusion. He had a BNP done which was mildly elevated and troponin was in the high end of normal. It was felt that he might have mild CHF and he was given a dose of IV Lasix in the ER and also given antibiotics as well as prescription for antibiotics on discharge. He was treated with Zithromax and prednisone 60 mg for 5 days and has completed this treatment. He states that the cough is much better but he still has fatigue and some dyspnea with exertion which is no worse now than it was several weeks ago. EKG was done at the ER and showed sinus rhythm with a right bundle branch block and left axis deviation, was otherwise unremarkable_

Allergies:

No known allergies

Med List with Compliance (ST)**ACTIVE MEDICATIONS:**

One Touch Delica Lancets:One Touch Delica Lancets, See Instructions, test daily, 100 Each, 0 Refill(s), DAW, Pharmacy: CVS/pharmacy #4299
amlODIPine-benazepril 5 mg-10 mg oral capsule:See Instructions, TAKE 1 CAPSULE DAILY, 90 capsule, 3 Refill(s), eRx: CVS Caremark MAILORDER Pharmacy
one touch ultra 2 test strips with delica lancets:one touch ultra 2 test strips with delica lancets, See Instructions, test daily, 100 Each, 4 Refill(s), DAW, Pharmacy: CVS Caremark MAILORDER Pharmacy
metFORMIN 500 mg oral tablet:See Instructions, TAKE 1 TABLET TWICE A DAY, 180 tablet, 1 Refill(s), eRx: CVS Caremark MAILSERVICE Pharmacy
aspirin 81 mg oral tablet:3 tablets, ORAL, Daily, 0 Refill(s)
Vitamin B Complex oral tablet:1 tablet, ORAL, Daily, 0 Refill(s)
vitamin D3:0 Refill(s)
simvastatin 10 mg oral tablet:See Instructions, TAKE 1 TABLET AT BEDTIME, 90 tablet, 1 Refill(s), eRx: CVS Caremark MAILSERVICE Pharmacy

Problems:

Diabetes
Diabetes mellitus type ii
Diverticulosis of colon (without mention of hemorrhage)
Family history of malignant neoplasm of gastrointestinal tract
Htn [hypertension]
Hyperlipidemia
Nephrolithiasis
Snoring.
Unspecified sleep apnea

SOCIAL HISTORY: Married, nonsmoker, not much exercise, still working**REVIEW OF SYSTEMS:**

Gen. weight about the same, positive for fatigue, no fevers or chills
ENT no sinus or allergy symptoms
Pulmonary some dyspnea with exertion, no cough now no orthopnea
Cardiovascular denies chest pain or palpitations

Admit Date: 12/4/2015 14:30 EST
Disch Date: 12/4/2015 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 77290159
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485579

W. KLOTZ 000125

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 28/064 Fax Server

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Office/Clinic Visit Notes

GI no nausea vomiting
GU negative
Musculoskeletal no new joint pain
Neurological no headaches or focal neurological complaints

OBJECTIVE:

Weight(lb): 208 12-04-15
Height(ft/in): 6'2" 12-04-15
BMI: 26.2 12-04-15
Temperature 98.5 (14:33)
Systolic Blood Pressure 138 (14:33)
Diastolic Blood Pressure 78 (14:33)
Pulse No result
SpO2 No result
Respiratory Rate No result

PE:

Gen. patient in no distress
ENT conjunctivae clear, pharynx negative, sinuses nontender
Neck is supple no adenopathy thyromegaly or bruits
Lungs clear to auscultation
Cardiac exam irregular rhythm, pulse around the 100, no murmur or gallop noted
Chest nontender
Abdomen soft nontender no masses or organomegaly, bowel sounds active
Extremities no edema, calves nontender, pulses are intact
Neurological alert and oriented, moves all extremities equally, gait normal

EKG reveals atrial fibrillation with rate around 90, has some slight increased T wave inversions in V5 and 6 poor R-wave progression especially in V3 and V4

ASSESSMENT:

1. Atrial fibrillation—apparently recent onset with normal EKG 2 weeks ago
2. Possible congestive heart failure, could be related to recent respiratory infection
3. Lower respiratory infection with bronchitis—clinically better
4. Diabetes
5. Hypertension
6. Hyperlipidemia

PLAN:

1. Start warfarin 5 mg daily
2. T4, TSH, BNP, troponin level today
3. Pro time in one week
4. Will refer patient to Sanger cardiology for appointment as soon as possible as he needs complete cardiac evaluation regarding the atrial fibrillation, CHF and to exclude ischemic disease
5. Spent 45 minutes with patient in counseling and coordination of care

Admit Date: 12/4/2015 14:30 EST
Disch Date: 12/4/2015 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 77290159
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485579

W. KLOTZ 000126

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Office/Clinic Visit Notes

6. Do not see need for diuretics for rate control at this point, will defer to cardiology for other medications besides the warfarin

Electronically Signed By: KNISH, EDWARD J MD
12/05/2015 02:08 PM

Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/14/2016 15:25 EDT	Age 69 years
Admin Person DELP ,LOUISE E	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/8/2017	Lot Number UI703AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

High Dose. VIS given 08/07/2015

Vaccine influenza virus vaccine,inactivated	Date Given 9/15/2014 08:50 EDT	Age 67 years
Admin Person MAKLEY ,JOAN H RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm-Upper, L	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Received at work

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2013 14:08 EDT	Age 66 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2014	Lot Number 5L33C	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Admit Date: 12/4/2015 14:30 EST
Disch Date: 12/4/2015 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 77290159
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485579

W. KLOTZ 000127

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 30/064 Fax Server

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Immunizations

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		9/1/2012 14:02 EDT		64 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Right	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
5/4/2013	U4537AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

pt states got thru work

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		11/1/2011 09:42 EDT		64 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
6/30/2013	UH745AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

pt got at work

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		11/1/2010 08:00 EDT		63 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
6/30/2012	UH476AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not given at this facility

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		10/1/2008 09:00 EDT		61 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Unknown	IM (INTRAMUSCULAR)	0.5mL			
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not givenat this facility

Admit Date: 12/4/2015 14:30 EST
Disch Date: 12/4/2015 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 77290159
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485579

W. KLOTZ 000128

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 31/064 Fax Server

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2007 13:59 EDT	Age 59 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Unknown	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Vaccine pneumococcal 23-valent vaccine	Date Given 10/19/2012 10:30 EDT	Age 65 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 12/9/2013	Lot Number 0707AE	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

VIS-4/16/2009

Vaccine tetanus/diphtheria/pertussis,acel(Tdap)	Date Given 3/16/2014 13:37 EDT	Age 66 years
Admin Person NEWSTREET ,CATHERINE RN	Facility: MMG Museum	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number U4700BA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Given at Minute Clinic.

Vaccine tetanus-diphtheria toxoids (Td)	Date Given 8/1/2009 08:01 EDT	Age 61 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 11/15/2013	Lot Number U3696AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not given at this facility

Admit Date: 12/4/2015 14:30 EST
Disch Date: 12/4/2015 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 77290159
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485579

W. KLOTZ 000129

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 32/064 Fax Server

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Immunizations

Vaccine yellow fever vaccine	Date Given 4/28/2000 00:00 EDT	Age 52 years
Admin Person CLINE ,JANET RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.5mL
Expiration Date 1/18/2001	Lot Number UA177AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Not administered by writer

Vaccine zoster vaccine live	Date Given 10/7/2011 08:30 EDT	Age 64 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.6mL
Expiration Date 8/17/2012	Lot Number 0730AA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

VIS- 9/11/2006

Admit Date: 12/4/2015 14:30 EST
Disch Date: 12/4/2015 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 77290159
DOB: 9/8/1947 Age: 68 years Sex: Male
Location: MMA
Print ID: 179485579

W. KLOTZ 000130

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 33/064 Fax Server

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Carolinas HealthCare System

MMG Matthews332 North Trade St.
Matthews, NC 28105-**Chemistry**

Collected Date		10/14/2016	
Collected Time		15:36 EDT	
Procedure		Units	Reference Range
Sodium Level	145 ^{*1}	mmol/L	[136.0-145.0]
Potassium Level	3.8 ^{*1}	mmol/L	[3.5-5.5]
Chloride Level	104 ^{*1}	mmol/L	[98.0-107.0]
CO2	22 ^{*1}	mmol/L	[22.0-29.0]
Glucose Level	99 ^{R1 *1}	mg/dL	[70-100]
BUN	15 ^{*1}	mg/dL	[6.0-20.0]
Creatinine	0.90 ^{*1}	mg/dL	[0.70-1.20]
Estimated GFR Non-African American	>59 ^{R2 *1}	mL/min/1.73_m2	>59]
Estimated GFR African American	>59 ^{R3 *1}	mL/min/1.73_m2	>59]
Calcium Level	8.9 ^{*1}	mg/dL	[8.4-10.4]
Albumin Level	3.9 ^{*1}	g/dL	[3.50-5.20]
Total Protein	6.2 ^{L *1}	g/dL	[6.6-8.7]
Total Bilirubin	0.9 ^{*1}	mg/dL	[0.0-1.2]
Alkaline Phosphatase	85 ^{*1}	[IU]/L	[40.0-129.0]
ALT	13 ^{*1}	[IU]/L	[0.0-41.0]
AST	16 ^{*1}	[IU]/L	[0.0-40.0]
Cholesterol	100 ^{*1}	mg/dL	<200]
Triglycerides	77 ^{*1}	mg/dL	<150]
HDL-Cholesterol	44 ^{*1}	mg/dL	[40-60]
LDL-Cholesterol	41 ^{*1}	mg/dL	<100]
Non HDL Chol (LDL+VLDL)	56 ^{R4 *1}	mg/dL	
HGB A1C	6.1 ^{H R5 *1}	%	[4.8-5.6]

Result Comments

- R1: Glucose Level
FASTING GLUCOSE
- R2: Estimated GFR Non-African American
Calculated GFR for non-African American patients using MDRD formula.
- R3: Estimated GFR African American
Calculated GFR for African American patients using MDRD formula.
- R4: Non HDL Chol (LDL+VLDL)
GOAL FOR HIGH RISK PATIENTS: <130 MG/DL
GOAL FOR HIGHEST RISK PATIENT: <100 MG/DL
- R5: HGB A1C
5.7-6.4 % increased risk for diabetes
>=6.5 % Indicates Diabetes

Admit Date: 10/14/2016 14:15 EDT
Disch Date: 10/14/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 80655543
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485577

W. KLOTZ 000131

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 34/064 Fax Server

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Chemistry**Result Comments**

R5: HGB A1C

HGBA1C may be overestimated in diabetic patients exhibiting poor controls and who are also heterozygous or homozygous for HgBS or HgBC. Total glycohemoglobin is a better indicator of diabetic control in patients with these hemoglobin variants.

NEW REFERENCE RANGE

Performing Locations

*1: This test was performed at:

MMG Museum Lab, 3030 Randolph Rd, Medical Director: Gordon, Dana MT, 704-302-8200, Charlotte, NC, 28211-

Office/Clinic Visit Notes

DOCUMENT NAME:

General Note

Patient: KLOTZ, WILLIAM L MRN: 118403 FIN: 80655543

Age: 69 years Sex: Male DOB: 9/8/1947

Associated Diagnoses: None

Author: KNISH, EDWARD J MD

HPI: Patient presents for follow-up of multiple problems including diabetes, cardiomyopathy, atrial fibrillation, sleep apnea, hypertension and hyperlipidemia. He has been followed by Sanger clinic for atrial fibrillation and had cardioversion in April 2016 and remained in sinus rhythm following that procedure. In July and August T noticed swelling with shortness of breath and decreased energy and when he went to the cardiologist echocardiogram showed that his ejection fraction had dropped from the 30-35% range down to 20-25% despite sinus rhythm. He had cardiac catheter on 8/23/2016 was found to have a 90% stenosis of his LAD and had stent placed at that time. He has been working with cardiac rehabilitation over the past 3-4 weeks and is starting to improve in terms of stamina, weakness and dyspnea but still has shortness of breath when he goes up one flight of stairs. He had stress test on 10/4/2016 but was only able to go a little less than 3 minutes, did not achieve anything close to his target heart rate and had to stop because of dizziness. He is felt to have acute on chronic systolic and diastolic heart failure and recently was advised to increase his Lasix to 40 mg a day because of some increased swelling in his legs. He has done this for the past 3 days and the swelling is getting better. He states his blood sugars are doing better overall._

Allergies:

Lipitor

Latex

Med List with Compliance (ST)**ACTIVE MEDICATIONS:**

Eliquis 5 mg oral tablet:5 mg per 1 tablet, ORAL, BID (2 times a day), 180 tablet, 3 Refill(s), Pharmacy: CVS Caremark
MAILSERVICE Pharmacy

Prinivil 2.5 mg oral tablet:2.5 mg per 1 tablet, ORAL, qPM (once a day in the evening), 90 tablet, 0 Refill(s)

Compliance Status: Still taking, not as prescribed

Admit Date: 10/14/2016 14:15 EDT

Disch Date: 10/14/2016 23:59 EDT

Admitting: KNISH,EDWARD J MD

Attending: KNISH,EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN: 118403

Acct#: 80655543

DOB: 9/8/1947

Age: 69 years Sex: Male

Location: MMA

Print ID: 179485577

W. KLOTZ 000132

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Office/Clinic Visit Notes

Takes this in the AM

Coreg 6.25 mg oral tablet:6.25 mg per 1 tablet, ORAL, BID (2 times a day), 180 tablet, 3 Refill(s), Pharmacy: CVS/pharmacy #4295

Glucophage 500 mg oral tablet:500 mg per 1 tablet, ORAL, BID (2 times a day), 0 Refill(s)

Lasix 20 mg oral tablet:20 mg per 1 tablet, ORAL, Daily, 30 tablet, 3 Refill(s), Pharmacy: CVS/pharmacy #4295

Compliance Status: Still taking, not as prescribed

Taking twice a day for 5 days then back to normal dosage.

simvastatin 10 mg oral tablet:10 mg per 1 tablet, ORAL, qHS (each night at bedtime), 30 tablet, 0 Refill(s)

clopidogrel 75 mg oral tablet:75 mg per 1 tablet, ORAL, Daily, 90 tablet, 0 Refill(s), Pharmacy: CVS/pharmacy #4299

CPAP-Supplies:CPAP-Supplies, See Instructions, Nasal mask LON: lifetime, Nasal Mask Replace @ 3 months, Headgreat @ 6 months, Pillow @ 1 month, Tubing @ 3 months, Disposable Filters @ 1 month, Permanent Filter @ 6 months, Tubing @ 3 months, Water Chamber @ 6 months...

Oximetry:Oximetry, See Instructions, Please perform 1 night nocturnal oximetry with BIPAP 12/7, 1 Each, 0 Refill(s), Compound

Problems:

Atherosclerotic heart disease of native coronary artery with unstable angina pectoris

Atrial fibrillation

Atrial flutter

Cardiomyopathy

Central sleep apnea

Diabetes

Diabetes mellitus type ii

Diverticulosis of colon (without mention of hemorrhage)

Family history of malignant neoplasm of gastrointestinal tract

Htn [hypertension]

Hyperlipidemia

Nephrolithiasis

Osa (obstructive sleep apnea)

SOCIAL HISTORY: Nonsmoker, doing cardiac rehabilitation now**REVIEW OF SYSTEMS:**

Gen. weight is down 8 pounds in the past 4 days with increased Lasix, energy level is starting to improve slowly

ENT negative

Pulmonary shortness of breath with exertion, no cough

Cardiovascular no chest pain or palpitations, edema in the legs as above

GI negative

GU negative

Musculoskeletal no new joint pain

Endocrinologic sugars are better overall

OBJECTIVE:**Weight(lb):** 203 10-14-16**Height(ft/in):** 6'2" 10-14-16**BMI:** 26.06 10-14-16

Temperature No result

Admit Date: 10/14/2016 14:15 EDT

Disch Date: 10/14/2016 23:59 EDT

Admitting: KNISH,EDWARD J MD

Attending: KNISH,EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN:118403 Acct#: 80655543

DOB: 9/8/1947 Age: 69 years Sex: Male

Location: MMA

Print ID: 179485577

W. KLOTZ 000133

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Office/Clinic Visit Notes

Systolic Blood Pressure 128 (14:31)

Diastolic Blood Pressure 78 (14:31)

Pulse No result

SpO2 No result

Respiratory Rate No result

PE:

Gen. patient in no distress

EENT conjunctivae clear, pharynx benign

Neck is supple no adenopathy, thyromegaly

Lungs are clear

Cardiac regular rate and rhythm

Abdomen soft and nontender

Extremities trace to 1+ edema present in both calves, nontender

ASSESSMENT:

1. CHF—systolic and diastolic with recent mild decompensation, improving with increased diuretic
2. CAD, status post stent of severe LAD stenosis
3. Cardiomyopathy with significant decline noted before his stent procedure
4. Diabetes—clinically doing well
5. History of atrial fibrillation
6. Sleep apnea, central
7. Hypertension
8. Hyperlipidemia
9. Nephrolithiasis

PLAN:

1. CMP, lipid panel, hemoglobin A1c today
2. Flu injection given
3. Continue close follow-up with his cardiologist regarding his CHF symptoms and might need reevaluation soon if continues to have edema/dyspnea
4. Continue cardiac rehabilitation
5. Patient working with sleep medicine regarding his BiPAP treatment
6. Annual wellness visit 6 months, follow-up sooner if needed

Electronically Signed By: KNISH, EDWARD J MD**10/14/2016 06:01 PM****Sleep Study Reports**

DOCUMENT NAME:

CPAP Report

Addendum by RICHARDSON , RANEE CMA on August 18, 2016 16:31 EDT

Please Advise

Admit Date: 10/14/2016 14:15 EDT

Disch Date: 10/14/2016 23:59 EDT

Admitting: KNISH, EDWARD J MD

Attending: KNISH, EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN: 118403

Acct#: 80655543

DOB: 9/8/1947

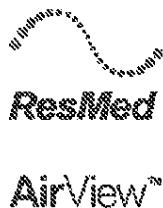
Age: 69 years Sex: Male

Location: MMA

Print ID: 179485577

W. KLOTZ 000134

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 37/064 Fax Server

592
* Modified *CHARLOTTE
1701 Raley Place
CHARLOTTE
North Carolina, 28206Phone: 704-512-6633
Fax: 704-448-4103
Email: lankot

Klotz, William

07/22/2016 - 08/17/2016

DOB: 09/08/1947

Age: 68 years

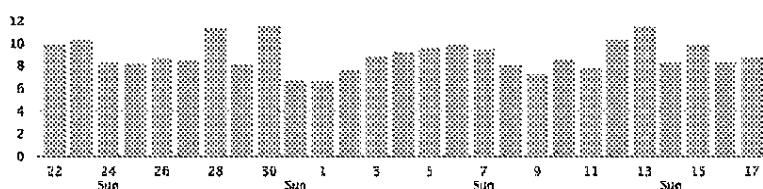
Compliance Report

Period: 07/22/2016 - 08/17/2016	
Usage days	27/27 days (100%)
>= 4 hours	27 days (100%)
< 4 hours	0 days (0%)
Usage hours	240 hours 29 minutes
Average usage (total days)	8 hours 54 minutes
Average usage (days used)	8 hours 54 minutes
Median usage (days used)	8 hours 36 minutes

AirCurve CP VAuto	
Serial number	23161442226
Mode	Spont
IPAP	12 cmH2O
EPAP	7 cmH2O
Easy-Breathe	On

Summary			
Leaks - L/min	Median: 10.7	95th percentile: 38.0	Maximum: 85.2
Events per hour	AI: 14.8	HI: 0.1	AHI: 14.9

Usage - hours



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* Modified *



CHARLOTTE
1701 Robey Place
CHARLOTTE
North Carolina, 28206

Phone: 704-512-6553
Fax: 704-448-4103
Email: lankot

Klotz, William
07/22/2016 - 08/17/2016

DOB: 09/08/1947
Age: 68 years

Therapy Report

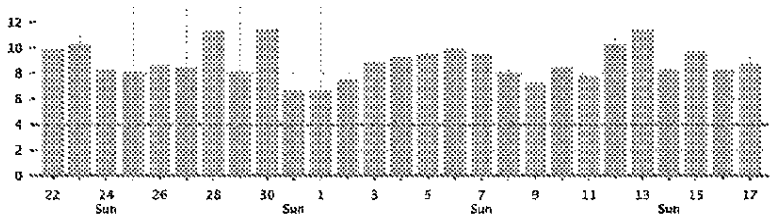
APCurve 10 VZAuto

07/22/2016-08/17/2016

Usage (hours)

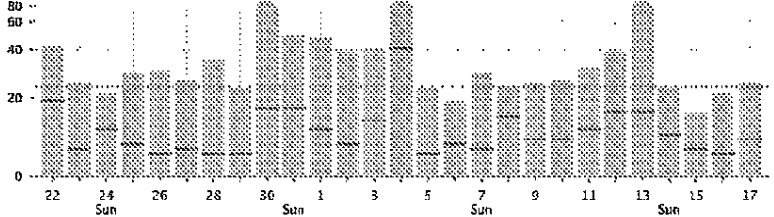
Usage days 27/27 (100%)
≥ 4 hour days 27 (100%)
≤ 4 hour days 0 (0%)
Days not used 0 (0%)
Days no data 0 (0%)

Used/day (avg.) 8.9 hrs.



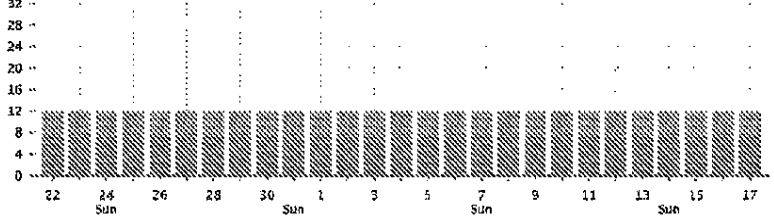
Leak (L/min)

Set threshold 24.0 L/min
Maximum (avg) 35.2
APAP (avg) 25.0
BiLevel (avg) 10.7



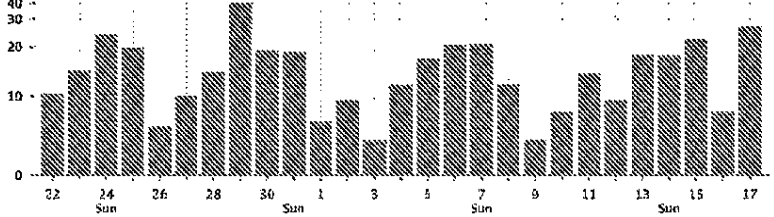
Pressure (cmH2O)

Set mode Spont
Set PEEP 12.0
Set PIP 17.0



AHI (events/hour)

AHI 14.8
FI 14.8
AI 14.8



Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 39/064 Fax Server

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* Modified *



CHARLOTTE
1701 Raley Place
CHARLOTTE
North Carolina, 28206

Phone: 704-512-6633
Fax: 704-448-4103
Email: jankot

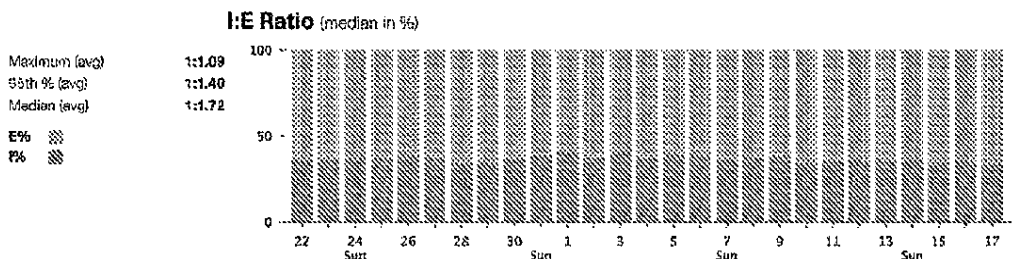
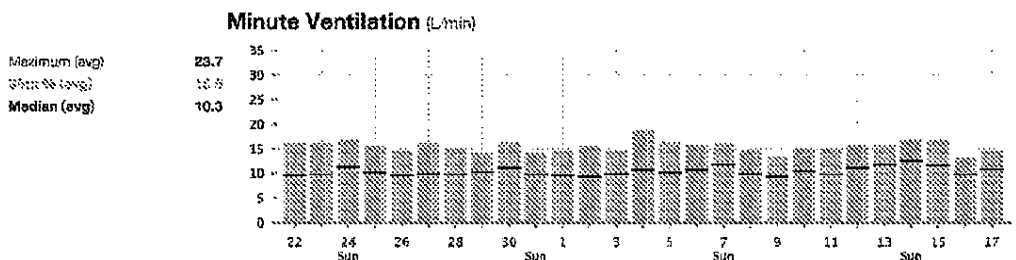
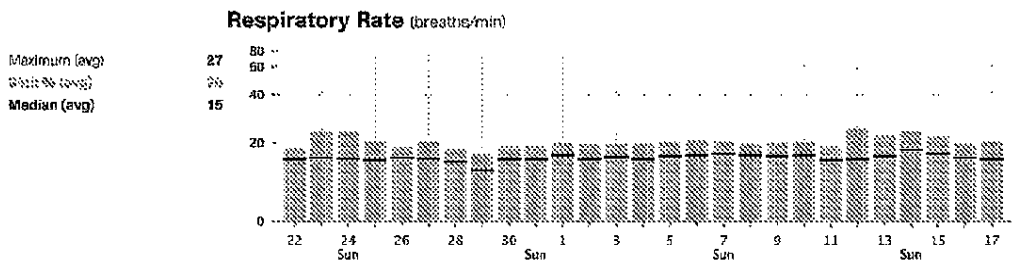
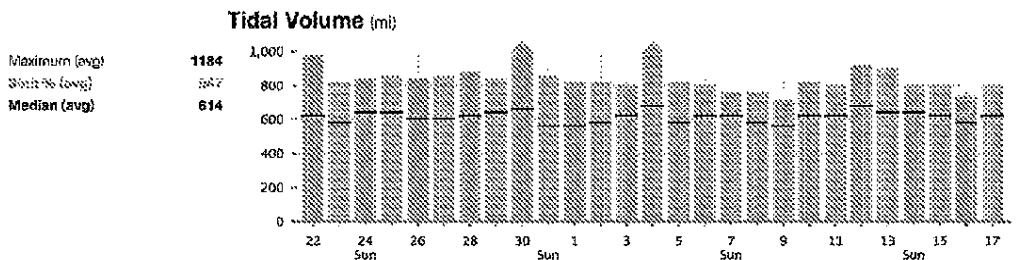
Klotz, William
07/22/2016 - 08/17/2016

DOB: 09/08/1947
Age: 68 years

Therapy Report

APCurve 10 VZAuto

8/16/2016 11:22:22



Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 40/064 Fax Server

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Sleep Study Reports

Admit Date: 10/14/2016 14:15 EDT
Disch Date: 10/14/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 80655543
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485577

W. KLOTZ 000138

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/14/2016 15:25 EDT	Age 69 years
Admin Person DELP ,LOUISE E	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/8/2017	Lot Number UI703AA	Funding Source:
Vaccine Information Statement: High Dose. VIS given 08/07/2015	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Sanofi Pasteur, Inc.		
Vaccine For Children Status: 		

Vaccine influenza virus vaccine,inactivated	Date Given 9/15/2014 08:50 EDT	Age 67 years
Admin Person MAKLEY ,JOAN H RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm-Upper, L	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 	Lot Number 	Funding Source:
Vaccine Information Statement: Received at work	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Novartis Pharmaceuticals		
Vaccine For Children Status: 		

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2013 14:08 EDT	Age 66 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2014	Lot Number 5L33C	Funding Source:
Vaccine Information Statement: pt states got thru work	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Glaxo Smith Kline		
Vaccine For Children Status: 		

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2012 14:02 EDT	Age 64 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Right	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/4/2013	Lot Number U4537AA	Funding Source:
Vaccine Information Statement: pt states got thru work	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Sanofi Pasteur, Inc.		
Vaccine For Children Status: 		

Admit Date: 10/14/2016 14:15 EDT
Disch Date: 10/14/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 80655543
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485577

W. KLOTZ 000139

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Immunizations			
Vaccine		Date Given	Age
influenza virus vaccine,inactivated		11/1/2011 09:42 EDT	64 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
6/30/2013	UH745AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt got at work

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		11/1/2010 08:00 EDT	63 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
6/30/2012	UH476AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not given at this facility

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		10/1/2008 09:00 EDT	61 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Unknown	IM (INTRAMUSCULAR)	0.5mL	
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		9/1/2007 13:59 EDT	59 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Unknown	IM (INTRAMUSCULAR)	0.5mL	
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Admit Date: 10/14/2016 14:15 EDT
Disch Date: 10/14/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 80655543
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485577

W. KLOTZ 000140

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Immunizations

Vaccine pneumococcal 23-valent vaccine	Date Given 10/19/2012 10:30 EDT	Age 65 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 12/9/2013	Lot Number 0707AE	Funding Source:
Vaccine Information Statement: VIS-4/16/2009	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

Vaccine tetanus/diphtheria/pertussis,acel(Tdap)	Date Given 3/16/2014 13:37 EDT	Age 66 years
Admin Person NEWSTREET ,CATHERINE RN	Facility: MMG Museum	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 	Lot Number U4700BA	Funding Source:
Vaccine Information Statement: 	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

Given at Minute Clinic.

Vaccine tetanus-diphtheria toxoids (Td)	Date Given 8/1/2009 08:01 EDT	Age 61 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 11/15/2013	Lot Number U3696AA	Funding Source:
Vaccine Information Statement: 	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

not given at this facility

Vaccine yellow fever vaccine	Date Given 4/28/2000 00:00 EDT	Age 52 years
Admin Person CLINE ,JANET RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.5mL
Expiration Date 1/18/2001	Lot Number UA177AA	Funding Source:
Vaccine Information Statement: 	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:

Not administered by writer

Admit Date: 10/14/2016 14:15 EDT
Disch Date: 10/14/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 80655543
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485577

W. KLOTZ 000141

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 44/064 Fax Server

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Immunizations			
Vaccine zoster vaccine live		Date Given 10/7/2011 08:30 EDT	
Admin Person AUSTIN ,JANICE P RN		Age 64 years	
Facility: MMG Matthews		Data Source PowerChart	
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.6mL	Manufacturer MERCK & CO., INC.
Expiration Date 8/17/2012	Lot Number 0730AA	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Date Given:	
VIS- 9/11/2006			

Admit Date: 10/14/2016 14:15 EDT
Disch Date: 10/14/2016 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 80655543
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485577

W. KLOTZ 000142

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Carolinas HealthCare System

MMG Matthews332 North Trade St.
Matthews, NC 28105-**History and Physical Reports**

DOCUMENT NAME:

Male CPE

Patient: **KLOTZ, WILLIAM L** MRN: **118403** FIN: **87800034**
Age: **69 years** Sex: **Male** DOB: **9/8/1947**
Associated Diagnoses: **None**
Author: **KNISH, EDWARD J MD**

HPI: Patient presents for preventive exam. He has been followed closely by cardiology over the past year when he was diagnosed with ischemic cardiomyopathy and he is now on large doses of medications to treat heart failure and seems to be doing better clinically. He has been back to work since early March and seems to be tolerating that well. He is doing some treatment with treadmill and admits that he does get winded after a long walk and also more easily in the mornings. He's noticed less PVCs when he has checked his rhythm. He checks his blood sugars periodically and they are usually between 120 and 130._

Allergies:Lipitor
Latex**Med List with Compliance (ST)****ACTIVE MEDICATIONS:**

Glucophage 500 mg oral tablet:500 mg per 1 tablet, ORAL, BID (2 times a day), 0 Refill(s)
simvastatin 10 mg oral tablet:10 mg per 1 tablet, ORAL, qHS (each night at bedtime), 30 tablet, 0 Refill(s)
Oximetry:Oximetry, See Instructions, Please perform 1 night nocturnal oximetry with BiPAP 12/7, 1 Each, 0 Refill(s), Compound
Eliquis 5 mg oral tablet:See Instructions, TAKE 1 TABLET BY MOUTH TWICE DAILY, 180 tablet, 7 Refill(s), eRx:
CVS/pharmacy #4299
CPAP-Supplies:CPAP-Supplies, See Instructions, Nasal mask LON: lifetime. Nasal Mask Replace @ 3 months, Headgreat @ 6 months, Pillow @ 1 month, Tubing @ 3 months, Disposable Filters @ 1 month, Permanent Filter @ 6 months, Tubing @ 3 months, Water Chamber @ 6 months...
clopidogrel 75 mg oral tablet:75 mg per 1 tablet, ORAL, Daily, 90 tablet, 3 Refill(s), Pharmacy: CVS Caremark
MAILSERVICE Pharmacy
Lasix 20 mg oral tablet:20 mg per 1 tablet, ORAL, PRN (As needed), PRN PRN Edema, 90 tablet, 2 Refill(s), Pharmacy: CVS/pharmacy #4299
Coreg 25 mg oral tablet:25 mg per 1 tablet, ORAL, BID (2 times a day), 60 tablet, 6 Refill(s), Pharmacy: CVS/pharmacy #4299
Entresto 97 mg-103 mg oral tablet:1 tablet, ORAL, BID (2 times a day), 60 tablet, 11 Refill(s), Pharmacy: CVS/pharmacy #4299
spironolactone 25 mg oral tablet:25 mg per 1 tablet, ORAL, Daily, 90 tablet, 3 Refill(s), Pharmacy: CVS/pharmacy #4299

Admit Date: 4/28/2017 10:20 EDT
Disch Date: 4/28/2017 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 87800034
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485576

W. KLOTZ 000143

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History and Physical Reports**Problems:**

Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
Atrial fibrillation
Atrial flutter
Cardiomyopathy
Central sleep apnea
Diabetes
Diabetes mellitus type ii
Diverticulosis of colon (without mention of hemorrhage)
Family history of malignant neoplasm of gastrointestinal tract
Htn [hypertension]
Hyperlipidemia
Ischemic cardiomyopathy
Nephrolithiasis
Osa (obstructive sleep apnea)

SOCIAL HISTORY:**Social & Psychosocial Habits****Home/Environment**07/11/2014 **Marital Status:** Married**Alcohol**10/14/2016 **Use:** Current**Frequency:** Daily**Amount:** 1 glass wine**Drug Abuse**07/11/2014 **Use:** Denies**Employment/School**07/11/2014 **Status:** Employed**Description:** Nuclear Safety Analyst**Nutrition/Health**04/01/2016 **Home Diet:** Diabetic**Tobacco**04/28/2017 **Smoking Status:** Never smoker**Exercise**10/14/2016 **Exercise:** Regular**Exercise Type:** Walking, Weight lifting**FAMILY HISTORY:****Family History by Member**

Mother:

Colon cancer....(+)

Admit Date: 4/28/2017 10:20 EDT
Disch Date: 4/28/2017 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 87800034
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485576

W. KLOTZ 000144

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History and Physical Reports**PREVENTATIVE EXAM:** Colonoscopy 12/13/2013, eye exam more than a year ago**REVIEW OF SYSTEMS:**

Gen. positive for fatigue, no fevers chills

ENT nodule left posterior cervical area which hasn't changed much

Pulmonary dyspnea with exertion and more so in the mornings

Cardiovascular no chest pain or palpitations, no arrhythmias noted

GI has had some stomach discomfort and gaseousness off and on, has used Carafate liquid with relief on a p.r.n. basis, no change in bowel habits

GU negative

Muscle skeletal aches in her shoulders when he raises his arms otherwise joints are okay

Psychological some intermittent anxiety

Neurological no numbness or tingling in extremities

OBJECTIVE:

Weight(lb):	191	04-28-17
Height(ft/in):	6'2"	04-28-17
BMI:	24.52	04-28-17
Temperature	No result	
Systolic Blood Pressure	122	(10:39)
Diastolic Blood Pressure	80	(10:39)
Pulse	68	(10:39)
SpO2	No result	
Respiratory Rate	16	(10:39)

GENERAL APPEARANCE: Well-developed, well-nourished male in no acute distress.**EYES:** Conjunctivae and lids unremarkable. PERRL. EOML. Fundi without vessel changes or lesions, discs appear normal.**ENT:** TMs are clear without lesions or scarring. External auditory canals are clear. Nasal mucosa grossly normal. Lips without lesions. Oral mucosa intact without lesions. Tonsils unremarkable. Posterior pharynx without erythema or exudate.**NECK:** Supple without adenopathy, thyromegaly or bruits.**LUNGS:** Clear to auscultation and percussion.**CARDIAC:** RRR without murmur, gallop or rub. Carotids are normal. Pedal pulses intact bilaterally and equal.

Abdominal aorta without significant palpable abnormality.

ABDOMEN: Soft and nontender without organomegaly or mass.**GENITALIA:** Normal male. No testicular mass. No hernia.**RECTAL EXAM:** Normal tone and no rectal mass. Prostate within normal limits without nodules or tenderness.**EXTREMITIES:** No cyanosis, clubbing or edema.**LYMPH NODES:** Negative including cervical, axillary and inguinal.**SKIN:** No rash or discrete lesions. Benign skin changes only noted.**MUSCULOSKELETAL:** Good range of motion of all joints. No obvious joint abnormality noted.**NEUROLOGIC:** Cranial nerves are intact. Reflexes 2+ and symmetric. Motor grossly intact throughout with good range of motion of all extremities. Sensation intact although some slight patchy decreased sensation in the right toes.

Admit Date:	4/28/2017	10:20 EDT
Disch Date:	4/28/2017	23:59 EDT
Admitting:	KNISH,EDWARD J MD	
Attending:	KNISH,EDWARD J MD	
Printed:	3/5/2018 11:09 EST	

Pt Name:	KLOTZ, WILLIAM L				
MRN:	118403	Acct#:	87800034		
DOB:	9/8/1947	Age:	69 years	Sex:	Male
Location:	MMA				
Print ID:	179485576				

W. KLOTZ 000145

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History and Physical Reports**ASSESSMENT:**

1. Preventative exam
2. Cardiomyopathy with chronic CHF—fairly well compensated on current regimen
3. Atrial fibrillation, chronic
4. CAD
5. Diabetes
6. Sleep apnea
7. Hypertension
8. Hyperlipidemia
9. Nephrolithiasis
10. Family history of colon cancer

PLAN:

1. CBC, CMP, hemoglobin A1c, PSA, urinalysis day
2. Continue current medical regimen
3. Refilled Carafate liquid for p.r.n. use as this does seem to help when he gets some abdominal discomfort
4. Follow-up with cardiology regarding his cardiomyopathy and treatment
5. Office visit in 6 months, sooner if needed
6. Encouraged patient to get an eye exam

Electronically Signed By: KNISH, EDWARD J MD**04/28/2017 02:00 PM****Hematology**

Collected Date	4/28/2017		
Collected Time	11:27 EDT		
Procedure		Units	Reference Range
WBC	6.6 [↑]	10 ³ /uL	[3.6-10.4]
RBC	4.85 [↑]	10 ⁶ /uL	[4.16-5.83]
HGB	15.5 [↑]	g/dL	[13.0-17.4]
HCT	45 [↑]	%	[39-52]
MCV	93 [↑]	fL	[82-99]
MCH	32 [↑]		[27-34]
MCHC	34 [↑]	g/dL	[32-35]
RDW	13.3 [↑]	%	[12.2-16.3]
Platelet	188 [↑]	10 ³ /uL	[142-328]
MPV	7.3 [↑]	fL	[6.0-9.5]
Diff Type	AUTOMATED [↑]		
Absolute Neut	4.41 [↑]	10 ³ /uL	[1.60-7.71]
Absolute Lymph	1.39 [↑]	10 ³ /uL	[1.05-3.20]
Absolute Mono	0.54 [↑]	10 ³ /uL	[0.20-0.90]
Absolute EOS	0.21 [↑]	10 ³ /uL	[0.00-0.50]
Absolute Basos	0.03 [↑]	10 ³ /uL	[0.00-0.11]
Neutrophils	67 [↑]	%	[41-74]

Admit Date: 4/28/2017 10:20 EDT

Disch Date: 4/28/2017 23:59 EDT

Admitting: KNISH,EDWARD J MD

Attending: KNISH,EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN: 118403

Acct#: 87800034

DOB: 9/8/1947

Age: 69 years Sex: Male

Location: MMA

Print ID: 179485576

W. KLOTZ 000146

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Hematology

Collected Date	4/28/2017		
Collected Time	11:27 EDT		
Procedure		Units	Reference Range
Lymph	21 ¹	%	[15-48]
Monocytes	8 ¹	%	[5-13]
Eosinophils	3 ¹	%	[0.0-7.0]
Basophils	0 ¹	%	[0.0-2.0]

Performing Locations

*1: This test was performed at:
MMG Matthews Lab, 332 Sam Newell Rd, Suite 2000, Medical Director: Gordon, Dana MT, 704-302-8500,
Matthews, NC, 28105-

Chemistry

Collected Date	4/28/2017		
Collected Time	11:27 EDT		
Procedure		Units	Reference Range
Sodium Level	145 ²	mmol/L	[136.0-145.0]
Potassium Level	4.3 ²	mmol/L	[3.5-5.5]
Chloride Level	107 ²	mmol/L	[98.0-107.0]
CO2	20 ^{L 2}	mmol/L	[22.0-29.0]
Glucose Level	126 ^{H R1 2}	mg/dL	[70-100]
BUN	21 ^{H 2}	mg/dL	[6.0-20.0]
Creatinine	1.00 ²	mg/dL	[0.70-1.20]
Estimated GFR Non-African American	>59 ^{R2 2}	mL/min/1.73_m2	[>59]
Estimated GFR African American	>59 ^{R3 2}	mL/min/1.73_m2	[>59]
Calcium Level	9.7 ²	mg/dL	[8.4-10.4]
Albumin Level	4.3 ²	g/dL	[3.50-5.20]
Total Protein	7.2 ²	g/dL	[6.6-8.7]
Total Bilirubin	1.1 ²	mg/dL	[0.0-1.2]
Alkaline Phosphatase	64 ²	[U]/L	[40.0-129.0]
ALT	13 ²	[U]/L	[0.0-41.0]
AST	17 ²	[U]/L	[0.0-40.0]
HGB A1C	5.7 ^{H R4 2}	%	[<5.7]
PSA	0.5 ^{R5 2}	ng/mL	[0.0-4.5]

Result Comments

R1: Glucose Level
FASTING GLUCOSE
R2: Estimated GFR Non-African American
Calculated GFR for non-African American patients using MDRD formula.
R3: Estimated GFR African American
Calculated GFR for African American patients using MDRD formula.
R4: HGB A1C
5.7-6.4 % increased risk for diabetes
≥6.5 % Indicates Diabetes

Admit Date: 4/28/2017 10:20 EDT
Disch Date: 4/28/2017 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 87800034
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485576

W. KLOTZ 000147

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Chemistry**Result Comments**

R4: HGB A1C

HGBA1C may be overestimated in diabetic patients exhibiting poor controls and who are also heterozygous or homozygous for HgBS or HgBC. Total glycohemoglobin is a better indicator of diabetic control in patients with these hemoglobin variants.

NEW REFERENCE RANGE

R5: PSA

PERFORMED BY BY ELECSYS IMMUNOASSAY METHOD

Performing Locations

*2: This test was performed at:

MMG Museum Lab, 3030 Randolph Rd, Medical Director: Gordon, Dana MT, 704-302-8200, Charlotte, NC, 28211-

Immunology

Collected Date		4/28/2017
Collected Time		11:27 EDT
Reference Range	Procedure	Units
[NR]	Hepatitis C Antibody	Nonreactive ³

Performing Locations

*3: This test was performed at:

Carolinas Healthcare System Lab, 5040 Airport Center Parkway, Medical Director: Lipford, Edward MD, 704-512-4900, Charlotte, NC, 28208-

Urinalysis

Collected Date: 4/28/2017			
Collected Time: 11:27 EDT			
Procedure		Units	Reference Range
Urine Color	YELLOW ¹		
Urine Clarity	HAZY ¹		
Urine Glucose	Negative ¹	mg/dL	[NEG]
BILE	Negative ¹		[NEG]
Urine Ketones	40 ^{A 1}	mg/dL	[NEG]
Urine Specific Gravity	1.020 ¹		[1.001-1.030]
Hemoglobin-Urine	LARGE ^{A 1}		[NEG]
Urine RBC	>100 ¹	/[HPF]	[0-3]
Urine pH	7.0 ¹		[4.6-8.0]
Urine Albumin	TRACE ^{A 1}	mg/dL	[NEG]
Urobilinogen	1.0 ¹	mg/dL	[0.2-1.0]
Urine Nitrite	Negative ¹		[NEG]
Urine Leuko. Esterase	SMALL ^{A 1}		[NEG]

Admit Date: 4/28/2017 10:20 EDT

Disch Date: 4/28/2017 23:59 EDT

Admitting: KNISH,EDWARD J MD

Attending: KNISH,EDWARD J MD

Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L

MRN:118403

Acct#: 87800034

DOB: 9/8/1947

Age: 69 years Sex: Male

Location: MMA

Print ID: 179485576

W. KLOTZ 000148

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Urinalysis

Collected Date:	4/28/2017		
Collected Time:	11:27 EDT		
Procedure		Units	Reference Range
Urine WBC	3-5 ^{*1}	/[HPF]	[0-5]
Urine Bacteria	FEW ^{*1}		[0]
Reducing Substance	Not performed ^{*1}		[NAP]

Performing Locations

*1: This test was performed at:
MMG Matthews Lab, 332 Sam Newell Rd, Suite 2000, Medical Director: Gordon, Dana MT, 704-302-8500,
Matthews, NC, 28105-

Immunizations

Vaccine	Date Given	Age	
influenza virus vaccine,inactivated	10/14/2016 15:25 EDT	69 years	
Admin Person	Facility:	Data Source	
DELP ,LOUISE E	MMG Matthews	PowerChart	
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
5/8/2017	UI703AA		
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:	

High Dose. VIS given 08/07/2015

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		9/15/2014 08:50 EDT		67 years	
Admin Person		Facility:		Data Source	
MAKLEY ,JOAN H RN		MMG Matthews		PowerChart	
Site		Route		Amount	
Arm-Upper, L		IM (INTRAMUSCULAR)		0.5mL	
Expiration Date		Lot Number		Funding Source:	
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

Received at work

Admit Date: 4/28/2017 10:20 EDT
Disch Date: 4/28/2017 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 87800034
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485576

W. KLOTZ 000149

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Immunizations			
Vaccine		Date Given	Age
influenza virus vaccine,inactivated		10/1/2013 14:08 EDT	66 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Glaxo Smith Kline
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
6/30/2014	5L33C		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		9/1/2012 14:02 EDT	64 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Right	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
5/4/2013	U4537AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt states got thru work

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		11/1/2011 09:42 EDT	64 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
6/30/2013	UH745AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

pt got at work

Vaccine		Date Given	Age
influenza virus vaccine,inactivated		11/1/2010 08:00 EDT	63 years
Admin Person		Facility:	Data Source
AUSTIN ,JANICE P RN		MMG Matthews	PowerChart
Site	Route	Amount	Manufacturer
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:
6/30/2012	UH476AA		
Vaccine Information Statement:		Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not given at this facility

Admit Date: 4/28/2017 10:20 EDT
Disch Date: 4/28/2017 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 87800034
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485576

W. KLOTZ 000150

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2008 09:00 EDT	Age 61 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Unknown	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2007 13:59 EDT	Age 59 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Unknown	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

not givenat this facility

Vaccine pneumococcal 23-valent vaccine	Date Given 10/19/2012 10:30 EDT	Age 65 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 12/9/2013	Lot Number 0707AE	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

VIS-4/16/2009

Vaccine tetanus/diphtheria/pertussis,acel(Tdap)	Date Given 3/16/2014 13:37 EDT	Age 66 years
Admin Person NEWSTREET ,CATHERINE RN	Facility: MMG Museum	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date	Lot Number U4700BA	Funding Source:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:

Given at Minute Clinic.

Admit Date: 4/28/2017 10:20 EDT
Disch Date: 4/28/2017 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 87800034
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485576

W. KLOTZ 000151

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Immunizations

Vaccine		Date Given		Age	
tetanus-diphtheria toxoids (Td)		8/1/2009 08:01 EDT		61 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
11/15/2013	U3696AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not given at this facility

Vaccine		Date Given		Age	
yellow fever vaccine		4/28/2000 00:00 EDT		52 years	
Admin Person		Facility:		Data Source	
CLINE ,JANET RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Arm, Left	SUBCUTANEOUS	0.5mL	Pasteur Merieux Connaught		
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
1/18/2001	UA177AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

Not administered by writer

Vaccine		Date Given		Age	
zoster vaccine live		10/7/2011 08:30 EDT		64 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Arm, Left	SUBCUTANEOUS	0.6mL	MERCK & CO., INC.		
Expiration Date	Lot Number	Funding Source:	Vaccine For Children Status:		
8/17/2012	0730AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

VIS- 9/11/2006

Admit Date: 4/28/2017 10:20 EDT
Disch Date: 4/28/2017 23:59 EDT
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 87800034
DOB: 9/8/1947 Age: 69 years Sex: Male
Location: MMA
Print ID: 179485576

W. KLOTZ 000152

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Carolinas HealthCare System

MMG Matthews

332 North Trade St.
Matthews, NC 28105-

Chemistry

Collected Date	12/26/2017		
Collected Time	16:23 EST		
Procedure		Units	Reference Range
Sodium Level	142 ^{*1}	mmol/L	[136.0-145.0]
Potassium Level	4.7 ^{*1}	mmol/L	[3.5-5.5]
Chloride Level	104 ^{*1}	mmol/L	[98.0-107.0]
CO2	23 ^{*1}	mmol/L	[22.0-29.0]
Glucose Level	115 ^{H R1 *1}	mg/dL	[70-100]
BUN	20 ^{*1}	mg/dL	[6.0-20.0]
Creatinine	1.10 ^{*1}	mg/dL	[0.70-1.20]
Estimated GFR Non-African American	>59 ^{R2 *1}	mL/min/1.73_m2	>59]
Estimated GFR African American	>59 ^{R3 *1}	mL/min/1.73_m2	>59]
Calcium Level	9.7 ^{*1}	mg/dL	[8.4-10.4]
Albumin Level	4.5 ^{*1}	g/dL	[3.50-5.20]
Total Protein	7.3 ^{*1}	g/dL	[6.6-8.7]
Total Bilirubin	0.6 ^{*1}	mg/dL	[0.0-1.2]
Alkaline Phosphatase	66 ^{*1}	[IU]/L	[40.0-129.0]
ALT	17 ^{*1}	[IU]/L	[0.0-41.0]
AST	17 ^{*1}	[IU]/L	[0.0-40.0]
Cholesterol	160 ^{*1}	mg/dL	<200]
Triglycerides	189 ^{H *1}	mg/dL	<150]
HDL-Cholesterol	45 ^{*1}	mg/dL	[40-60]
LDL-Cholesterol	77 ^{*1}	mg/dL	<100]
Non HDL Chol (LDL+VLDL)	115 ^{R4 *1}	mg/dL	
HGB A1C	6.6 ^{H R5 *1}	%	<5.7]

Result Comments

- R1: Glucose Level
FASTING GLUCOSE
- R2: Estimated GFR Non-African American
Calculated GFR for non-African American patients using MDRD formula.
- R3: Estimated GFR African American
Calculated GFR for African American patients using MDRD formula.
- R4: Non HDL Chol (LDL+VLDL)
GOAL FOR HIGH RISK PATIENTS: <130 MG/DL
GOAL FOR HIGHEST RISK PATIENT: <100 MG/DL
- R5: HGB A1C
5.7-6.4 % increased risk for diabetes
>=6.5 % Indicates Diabetes

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000153

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 56/064 Fax Server

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Chemistry**Result Comments**

R5: HGB A1C

HGBA1C may be overestimated in diabetic patients exhibiting poor controls and who are also heterozygous or homozygous for HgBS or HgBC. Total glycohemoglobin is a better indicator of diabetic control in patients with these hemoglobin variants.

NEW REFERENCE RANGE

Performing Locations

*1: This test was performed at:
MMG Museum Lab, 3030 Randolph Rd, Medical Director: Gordon, Dana MT, 704-302-8200, Charlotte, NC,
28211-

Office/Clinic Visit Notes

DOCUMENT NAME:

General Note

Patient: KLOTZ, WILLIAM L MRN: 118403 FIN: 6418291984
Age: 70 years Sex: Male DOB: 9/8/1947
Associated Diagnoses: None
Author: KNISH, EDWARD J MD

HPI: Patient presents for follow-up of multiple problems including diabetes, hypertension, hyperlipidemia, atrial fibrillation, sleep apnea. He states he's been doing fairly well overall, blood sugars have been up a little bit over the holidays in the range of 150 at times. He states his heart has been stable and he had a Holter monitor done recently which was fairly unremarkable. He's had no recent syncope or lightheadedness. He has occasional dyspnea with exertion and also describes some intermittent epigastric discomfort. He is concerned about some worsening constipation and feels he should have evaluation for this._

Allergies:

Lipitor
Latex

Med List with Compliance (ST)**ACTIVE MEDICATIONS:**

Oximetry: Oximetry, See Instructions, Please perform 1 night nocturnal oximetry with BiPAP 12/7, 1 Each, 0 Refill(s), Compound

Eliquis 5 mg oral tablet: See Instructions, TAKE 1 TABLET BY MOUTH TWICE DAILY, 180 tablet, 7 Refill(s), eRx: CVS/pharmacy #4299

Lasix 20 mg oral tablet: 20 mg per 1 tablet, ORAL, PRN (As needed), PRN PRN Edema, 90 tablet, 2 Refill(s), Pharmacy: CVS/pharmacy #4299

Entresto 97 mg-103 mg oral tablet: 1 tablet, ORAL, BID (2 times a day), 60 tablet, 11 Refill(s), Pharmacy: CVS/pharmacy #4299

spironolactone 25 mg oral tablet: 25 mg per 1 tablet, ORAL, Daily, 90 tablet, 3 Refill(s), Pharmacy: CVS/pharmacy #4299

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
Admitting: KNISH, EDWARD J MD
Attending: KNISH, EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000154

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Office/Clinic Visit Notes

One Touch Ultra Blue Test Strips:One Touch Ultra Blue Test Strips, See Instructions, TEST DAILY Dx: E11.9, 100 Each, 3 Refill(s), DAW
aspirin 81 mg oral enteric coated tablet:81 mg per 1 tablet, ORAL, Daily, 30 tablet, 0 Refill(s), Activate Med (Rx)
metFORMIN 500 mg oral tablet:See Instructions, TAKE 1 TABLET BY MOUTH TWICE A DAY, 180 tablet, 1 Refill(s), eRx: CVS/pharmacy #4295
CPAP-Supplies:CPAP-Supplies, See Instructions, Nasal mask LON: lifetime. Nasal Mask Replace @ 3 months, Headgreat @ 6 months, Pillow @ 1 month, Tubing @ 3 months, Disposable Filters @ 1 month, Permanent Filter @ 6 months, Tubing @ 3 months, Water Chamber @ 6 months...
carvedilol 25 mg oral tablet:25 mg per 1 tablet, ORAL, BID (2 times a day), 60 tablet, 9 Refill(s), Pharmacy: CVS/pharmacy #4295
simvastatin 10 mg oral tablet:See Instructions, TAKE 1 TABLET AT BEDTIME, 90 tablet, eRx: CVS Caremark
MAILSERVICE Pharmacy

Problems:

Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
Atrial fibrillation
Atrial flutter
Cardiomyopathy
Central sleep apnea
Diabetes
Diabetes mellitus type ii
Diverticulosis of colon (without mention of hemorrhage)
Family history of malignant neoplasm of gastrointestinal tract
Htn [hypertension]
Hyperlipidemia
Ischemic cardiomyopathy
Nephrolithiasis
Osa (obstructive sleep apnea)

SOCIAL HISTORY: Unchanged, nonsmoker, walks about twice a week

REVIEW OF SYSTEMS:

Gen. weight is up a few pounds, energy level about the same
ENT negative
Pulmonary occasional dyspnea
Cardiovascular no recent chest pain or palpitation
GI constipation as above, occasional epigastric discomfort
Urological see urologist for yearly follow-up
Neurological no lightheadedness

OBJECTIVE:

Weight(lb): 217 12-26-17
Height(ft/in): 6'2" 12-26-17
BMI: 27.94 12-26-17
Temperature No result
Systolic Blood Pressure 132 (16:04)

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
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Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000155

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 58/064 Fax Server

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Office/Clinic Visit Notes

Diastolic Blood Pressure 72 (16:04)
Pulse 70 (16:04)
SpO2 No result
Respiratory Rate No result

PE:

Gen. patient in no distress
ENT conjunctivae clear, pharynx benign
Neck is supple nontender no bruits
Lungs are clear
Cardiac regular rate and rhythm
Abdomen soft nontender
Extremities no edema, calves nontender, pulses are intact

ASSESSMENT:

1. Diabetes
2. CAD
3. Atrial fibrillation, chronic
4. Cardiomyopathy
5. Sleep apnea
6. Hyperlipidemia
7. Hypertension
8. Diverticulosis
9. Constipation, worsening

PLAN:

1. CMP, hemoglobin A1c, lipid panel day
2. Refer for colonoscopy
3. Follow-up with urologist yearly
4. Follow-up with cardiologist regarding his cardiomyopathy and arrhythmia
5. Annual visit in 5 months

Electronically Signed By: KNISH, EDWARD J MD
12/26/2017 06:00 PM

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
Admitting: KNISH, EDWARD J MD
Attending: KNISH, EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000156

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 59/064 Fax Server

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Immunizations

Vaccine influenza virus vaccine,inactivated	Date Given 10/14/2016 15:25 EDT	Age 69 years
Admin Person DELP ,LOUISE E	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/8/2017	Lot Number UI703AA	Funding Source:
Vaccine Information Statement: High Dose. VIS given 08/07/2015	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Sanofi Pasteur, Inc.		
Vaccine For Children Status: 		

Vaccine influenza virus vaccine,inactivated	Date Given 9/15/2014 08:50 EDT	Age 67 years
Admin Person MAKLEY ,JOAN H RN	Facility: MMG Matthews	Data Source PowerChart
Site Arm-Upper, L	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 	Lot Number 	Funding Source:
Vaccine Information Statement: Received at work	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Novartis Pharmaceuticals		
Vaccine For Children Status: 		

Vaccine influenza virus vaccine,inactivated	Date Given 10/1/2013 14:08 EDT	Age 66 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 6/30/2014	Lot Number 5L33C	Funding Source:
Vaccine Information Statement: pt states got thru work	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Glaxo Smith Kline		
Vaccine For Children Status: 		

Vaccine influenza virus vaccine,inactivated	Date Given 9/1/2012 14:02 EDT	Age 64 years
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart
Site Deltoid, Right	Route IM (INTRAMUSCULAR)	Amount 0.5mL
Expiration Date 5/4/2013	Lot Number U4537AA	Funding Source:
Vaccine Information Statement: pt states got thru work	Vaccine Information Statement Published Date: 	Vaccine Information Statement Date Given:
Manufacturer Sanofi Pasteur, Inc.		
Vaccine For Children Status: 		

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000157

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Immunizations

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		11/1/2011 09:42 EDT		64 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site		Route		Amount	
Deltoid, Left		IM (INTRAMUSCULAR)		0.5mL	
Manufacturer		Funding Source:		Vaccine For Children Status:	
Sanofi Pasteur, Inc.				Status:	
Expiration Date		Lot Number			
6/30/2013		UH745AA			
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

pt got at work

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		11/1/2010 08:00 EDT		63 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Deltoid, Left	IM (INTRAMUSCULAR)	0.5mL	Sanofi Pasteur, Inc.		
Expiration Date	Lot Number	Funding Source:		Vaccine For Children Status:	
6/30/2012	UH476AA				
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not given at this facility

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		10/1/2008 09:00 EDT		61 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Unknown	IM (INTRAMUSCULAR)	0.5mL			
Expiration Date	Lot Number	Funding Source:		Vaccine For Children Status:	
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not givenat this facility

Vaccine		Date Given		Age	
influenza virus vaccine,inactivated		9/1/2007 13:59 EDT		59 years	
Admin Person		Facility:		Data Source	
AUSTIN ,JANICE P RN		MMG Matthews		PowerChart	
Site	Route	Amount	Manufacturer		
Unknown	IM (INTRAMUSCULAR)	0.5mL			
Expiration Date	Lot Number	Funding Source:		Vaccine For Children Status:	
Vaccine Information Statement:		Vaccine Information Statement Published Date:		Vaccine Information Statement Date Given:	

not givenat this facility

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000158

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 61/064 Fax Server

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Immunizations			
Vaccine pneumococcal 23-valent vaccine	Date Given 10/19/2012 10:30 EDT	Age 65 years	
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart	
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL	Manufacturer MERCK & CO., INC.
Expiration Date 12/9/2013	Lot Number 0707AE	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement: VIS-4/16/2009	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:	

Vaccine tetanus/diphtheria/pertussis,acel(Tdap)	Date Given 3/16/2014 13:37 EDT	Age 66 years	
Admin Person NEWSTREET ,CATHERINE RN	Facility: MMG Museum	Data Source PowerChart	
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL	Manufacturer sanofi pasteur
Expiration Date	Lot Number U4700BA	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:	

Given at Minute Clinic.

Vaccine tetanus-diphtheria toxoids (Td)	Date Given 8/1/2009 08:01 EDT	Age 61 years	
Admin Person AUSTIN ,JANICE P RN	Facility: MMG Matthews	Data Source PowerChart	
Site Deltoid, Left	Route IM (INTRAMUSCULAR)	Amount 0.5mL	Manufacturer Sanofi Pasteur, Inc.
Expiration Date 11/15/2013	Lot Number U3696AA	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:	

not given at this facility

Vaccine yellow fever vaccine	Date Given 4/28/2000 00:00 EDT	Age 52 years	
Admin Person CLINE ,JANET RN	Facility: MMG Matthews	Data Source PowerChart	
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.5mL	Manufacturer Pasteur Merieux Connaught
Expiration Date 1/18/2001	Lot Number UA177AA	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:	Vaccine Information Statement Published Date:	Vaccine Information Statement Date Given:	

Not administered by writer

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN: 118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000159

Carolinas HealthCare 3/5/2018 11:22:47 AM PAGE 62/064 Fax Server

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Immunizations			
Vaccine zoster vaccine live		Date Given 10/7/2011 08:30 EDT	
Admin Person AUSTIN ,JANICE P RN		Age 64 years	
Facility: MMG Matthews		Data Source PowerChart	
Site Arm, Left	Route SUBCUTANEOUS	Amount 0.6mL	Manufacturer MERCK & CO., INC.
Expiration Date 8/17/2012	Lot Number 0730AA	Funding Source:	Vaccine For Children Status:
Vaccine Information Statement:		Vaccine Information Statement Date Given:	
VIS- 9/11/2006			

Admit Date: 12/26/2017 16:00 EST
Disch Date: 12/26/2017 23:59 EST
Admitting: KNISH,EDWARD J MD
Attending: KNISH,EDWARD J MD
Printed: 3/5/2018 11:09 EST

Pt Name: KLOTZ, WILLIAM L
MRN:118403 Acct#: 6418291984
DOB: 9/8/1947 Age: 70 years Sex: Male
Location: MMA
Print ID: 179485575

W. KLOTZ 000160



Scott⁶¹⁸ Clark's

TOYOTA / SCION

13000 E. Independence Blvd.
MATTHEWS, NC 28105
(704) 535-1972
www.scottclarkstoyota.com



CELL: 704-249-866

CUSTOMER NO. 132995		ADVISOR PAT BROOKS	265542	TAG NO 2889	INVOICE DATE 05/24/14	INVOICE NO TOCS919817
LYNDA BOGGS KLOTZ 115 CHESNEY GLEN DR MATTHEWS, NC 28105-5899 chemekadixon@yahoo.com		LABOR RATE	LICENSE NO.	MILEAGE 287,082	COLOR SUPER WHITE	STOCK NO
		YEAR / MAKE / MODEL 02/TOYOTA/PRIUS/4DR SND HYBRID			DELIVERY DATE 01/25/03	DELIVERY MILES 387
		VEHICLE I.D. NO. J T 2 B K 1 8 U 8 2 0 0 6 2 5 3 3			SELLING DEALER NO	PRODUCTION DATE
		F.T.E NO		P.O NO.	R.O DATE 05/08/14	
RESIDENCE PHONE 704-847-7467	BUSINESS PHONE 704-249-8665	COMMENTS				

MO: 287082

TOTALS-----

* [] CASH [] CHECK CK NO. [] *	TOTAL LABOR....	2880.23
* [] VISA [] MASTERCARD [] DISCOVER *	TOTAL PARTS....	4826.80
* [] AMER XPRESS [] OTHER [] CHARGE *	TOTAL SUBLET....	0.00
	TOTAL G.O.G....	0.00
	TOTAL MISC CHG.	31.00
	TOTAL MISC DISC	-770.71
	TOTAL TAX.....	293.23
	TOTAL INVOICE \$	7260.55

THANK YOU FOR YOUR BUSINESS!!

CUSTOMER SIGNATURE

TERMS: CASH UNLESS ARRANGEMENTS MADE

DISCLAIMER OF WARRANTIES

THE ONLY WARRANTIES, IF ANY APPLYING TO THESE PARTS, AND FOR SERVICES ARE THOSE OFFERED BY THE MANUFACTURER. THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND THE SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THESE PARTS AND/OR SERVICES. BUYER SHALL NOT BE ENTITLED TO RECOVER FROM SELLER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

WARRANTY

CLAIM #1

CLAIM #2

SERVICE DEPT. HOURS

Mon - Thur 7:00AM - 8:00PM
Friday 7:00AM - 6:00PM
Saturday 7:00AM - 4:00PM



Scott⁶¹⁹ Clark's TOYOTA / SCION

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CELL: 704-249-8661

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LYNDA BOGGS KLOTZ 115 CHESNEY GLEN DR MATTHEWS, NC 28105-5899 chemekadixon@yahoo.com	LABOR RATE	LICENSE NO.	MILEAGE 287,082	COLOR SUPER WHITE	STOCK NO.
	YEAR MAKE MODEL 02/TOYOTA/PRIUS/4DR SND HYBRID			DELIVERY DATE 01/25/03	DELIVERY MILES 387
	VEHICLE I.D. NO. J T 2 B K 1 8 U 8 2 0 0 6 2 5 3 3			SELLING DEALER NO.	PRODUCTION DATE
	F.T.O. NO.			P.O. NO.	R.O. DATE 05/08/14
RESIDENCE PHONE 704-847-7467	BUSINESS PHONE 704-249-8665	COMMENTS			
					MO: 287082

CHECK ENGINE LIGHT ON

C

MISS FIRE CODES DUE TO THE HEAD GASKET BLOWN

PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----LIST PRICE-UNIT PRICE-				
2 13751-21200	LIFTER, VALVE	24.80	24.80	49.60
2 13751-21210	LIFTER, VALVE	24.80	24.80	49.60
3 13751-21220	LIFTER, VALVE	24.80	24.80	74.40
3 13751-21230	LIFTER, VALVE	24.80	24.80	74.40
ETA 5-23-14				
2 13751-21240	LIFTER, VALVE	24.80	24.80	49.60
2 13751-21250	LIFTER, VALVE	24.80	24.80	49.60
ETA 5-23-14				
2 13751-21190	LIFTER, VALVE	24.80	24.80	49.60
2 00295-00103	FIPG OIL PAN	20.44	20.44	40.88
1 89465-47060	SENSOR, OXYGEN	185.80	185.80	185.80
1 89465-47050	SENSOR, OXYGEN	185.80	185.80	185.80
TOTAL - PARTS				809.28

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----	
D3 SENIOR CITIZEN DISCOUNT - PARTS	-80.93
D4 SENIOR CITIZEN DISCOUNT - LABOR	-19.60
TOTAL - MISC	-100.53

JOB# 2 TOTALS-----	
LABOR	195.95
PARTS	809.28
MISC	-100.53

JOB# 2 JOURNAL PREFIX TOCS JOB# 2 TOTAL 904.70

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----	
JOB # A A1 MISC	31.00
TOTAL - MISC	31.00

ESTIMATE

CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$0.00 (+TAX)

COMMENTS

created 2014-05-07 03:06:00pm taken by PAT BROOKS

RECOMMENDATIONS

TECH NOTES WE NEED VEHICLE BACK FOR A FOLLOW UP VISIT IN 300 MILES
THIS IS IMPORTANT TO RECHECK AND FOLLOW UP ON REPAIR TECH 223883

TERMS: CASH UNLESS ARRANGEMENTS MADE

DISCLAIMER OF WARRANTIES

THE ONLY WARRANTIES, IF ANY APPLYING TO THESE PARTS, AND FOR SERVICES ARE THOSE OFFERED BY THE MANUFACTURER. THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND THE SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THESE PARTS AND/OR SERVICES. BUYER SHALL NOT BE ENTITLED TO RECOVER FROM SELLER ANY CONSEQUENTIAL DAMAGES. DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

WARRANTY

CLAIM #1

CLAIM #2

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Saturday 7:00AM - 4:00PM



Scott⁶²⁰ Clark's TOYOTA / SCION

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CELL: 704-249-8661

CUSTOMER NO. 132995	ADVISOR PAT BROOKS	TAG NO. 2889	INVOICE DATE 05/24/14	INVOICE NO. TOCS919817
LYNDA BOGGS KLOTZ 115 CHESNEY GLEN DR MATTHEWS, NC 28105-5899 chemekadixon@yahoo.com	LABOR RATE	LICENSE NO.	MILEAGE 287,082	COLOR SUPER WHITE
	YEAR / MAKE / MODEL 02/TOYOTA/PRIUS/4DR SND HYBRID			DELIVERY DATE 01/25/03
	VEHICLE I.D. NO. J T B K 1 8 U 8 2 0 0 6 2 5 3 3			DELIVERY MILES 387
	F.T.E. NO.			SELLING DEALER NO.
RESIDENCE PHONE 704-847-7467	BUSINESS PHONE 704-249-8665	P.O. NO.		
COMMENTS		R.O. DATE 05/08/14		
MO: 287082				

JOB# 1 CHARGES-----

LABOR-----
J# 1 01TOZ RECOMMENDED MAINT UNITS: TECH(S):223883 2684.28

C/S: CAR OVERHEATED
VEHICLE WILL NOT RUN AND COOLANT COMING OUT OF THE
TAIL PIPE
FOUND DRIVE BELT BROKE OFF AND ENGIN OVER HEATED
TECH FOUND COOLANT MIXED WITH OIL AND ENGIN OVER HEATED
BADLY DUE TO THE HIGH MILLAGE OF ENGIN WE REC RR SHORT
BLOC AND CYLINDER HEAD AND NEW VALVES AND OIL PUMP AND WATER
PUMP AND T STAT AND A VEW DRIVE BELT
RR SHORT BLOCK AND INSTALLED NEW HEAD WITH NEW VALVES AND
VALVE STEM SEALS AND NEW OIL PUMP AND WATER PUMP AND NEW
T STAT AND NEW SPARK PLUGS GUEST BE ADVISED DUE TO THE
COOLANT IN THE EXHAUST SYTEM BOATH 02 SENSORS AND CATALETIC
CONVERTOR MAY BE EFECTED AND MAY NEED TO BE REPALCED IN THE
LATER TIME

PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----LIST PRICE-UNIT PRICE-			
1 00272-1LLAC-01	ANTIFREEZE GALLON	37.68	37.68
1 15100-21053	PUMP ASSY. OIL	217.30	217.30
1 91551-C0830	BOLT, FLANGE	2.45	2.45
1 90105-A0214	BOLT, FLANGE	1.87	1.87
1 13540-21020	TENSIONER ASSY, C	42.51	42.51
1 11101-21034	HEAD SUB-ASSY, CY	908.83	908.83
8 13711-21010	VALVE, INTAKE	19.68	157.44
8 13715-21010	VALVE, EXHAUST	26.46	211.68
1 16100-29157-83	PUMP ASSY, WATER	87.53	87.53
4 90080-91184	PLUG, SPARK	16.36	65.44
1 00272-1LLAC-01	ANTIFREEZE GALLON	37.68	37.68
1 90916-03093	THERMOSTAT	27.73	27.73
1 04111-21212	GASKET KIT, ENGINE	206.98	206.98
1 11400-21321	BLOCK ASSY, SHORT	1997.37	1997.37
1 90915-YZZF2	FILTER S/A, OIL	6.00	6.00
1 90068-14010	RING, O	7.45	7.45
1 90069-08007	RING, O	1.58	1.58
	TOTAL - PARTS		4017.52

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----	
D3 SENIOR CITIZEN DISCOUNT - PARTS	-401.75
D4 SENIOR CITIZEN DISCOUNT - LABOR	-268.43
TOTAL - MISC	-670.18

JOB# 1 TOTALS-----

LABOR 2684.28
PARTS 4017.52
MISC -670.18

JOB# 2 CHARGES-----

LABOR-----
J# 2+10TOZ06 CHECK ENGINE LIGHT UNITS: 2.00 TECH(S):223883 195.95

TERMS: CASH UNLESS ARRANGEMENTS MADE

DISCLAIMER OF WARRANTIES

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WARRANTY

CLAIM #1

CLAIM #2

SERVICE DEPT. HOURS

Mon - Thur 7:00AM - 8:00PM
Friday 7:00AM - 6:00PM
Saturday 7:00AM - 4:00PM



Scott⁶²¹ Clark's
TOYOTA / SCION
13000 E. Independence Blvd.
MATTHEWS, NC 28105
(704) 535-1972
www.scottclarkstoyota.com



CELL: 704-249-8661

CUSTOMER NO 132995	ADVISOR AL CONDREY	TAG NO 163130	INVOICE DATE 01/24/14	INVOICE NO TOCS895378
LYNDA BOGGS KLOTZ 115 CHESNEY GLEN DR MATTHEWS, NC 28105-5899 chemekadixon@yahoo.com	LABOR RATE	LICENSE NO.	MILEAGE 281,240	COLOR SUPER WHITE
	YEAR / MAKE / MODEL 02/TOYOTA/PRIUS/4DR SND HYBRID			DELIVERY DATE 01/25/03
	VEHICLE I.D. NO. J T 2 B K 1 8 U 8 2 0 0 6 2 5 3 3			DELIVERY MILES 387
	P.O. NO.			SELLING DEALER NO.
RESIDENCE PHONE 704-847-7467	BUSINESS PHONE 704-249-8665	COMMENTS		REPRINT# 1
MO: 281240				

TOTALS.....

*****	TOTAL LABOR....	533.39
* [] CASH [] CHECK CK NO. [] *	TOTAL PARTS....	261.49
* [] VISA [] MASTERCARD [] DISCOVER *	TOTAL SUBLET...	0.00
* [] AMER XPRESS [] OTHER [] CHARGE *	TOTAL G.O.G....	10.16
*****	TOTAL MISC CHG.	31.00
	TOTAL MISC DISC	-31.12
	TOTAL TAX.....	17.52
	TOTAL INVOICE \$	822.44

THANK YOU FOR YOUR BUSINESS!!

CUSTOMER SIGNATURE

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CELL: 704-249-8661

CUSTOMER NO. 132995	ADVISOR AL CONDREY	TAG NO. 2539	INVOICE DATE 01/24/14	INVOICE NO. TOCS895378
LYNDA BOGGS KLOTZ 115 CHESNEY GLEN DR MATTHEWS, NC 28105-5899 chemekadixon@yahoo.com	LABOR RATE 163130	MILEAGE 281,240	COLOR SUPER WHITE	STOCK NO.
	YEAR / MAKE / MODEL 02/TOYOTA/PRIUS/4DR SND HYBRID	DELIVERY DATE 01/25/03	DELIVERY MILES 387	
	VEHICLE I.D. NO. J T 2 B K 1 8 U 8 2 0 0 6 2 5 3 3	SELLING DEALER NO.	PRODUCTION DATE	
	F.T.E. NO.	P.O. NO.	R.O. DATE 01/18/14	REPRINT# 1
RESIDENCE PHONE 704-847-7467	BUSINESS PHONE 704-249-8665	COMMENTS	MO: 281240	

JOB# 1 CHARGES-----

LABOR-----

J# 1 14TOZDONOTUSE EXHAUST CONCERN UNITS: 0.50 TECH(S):229506 WARRANTY
CUST STATES CK ENG LIGHT IS ON
P0420
INSUFFICIENT FLOW
170171
REPLACED CAT

PARTS-----	QTY----	FP-NUMBER-----	DESCRIPTION-----	LIST PRICE-UNIT PRICE-	WARRANTY
	1	17451-23010	GASKET, EXHAUST P		WARRANTY
	1	17451-21060	GASKET, EXHAUST P		WARRANTY
	1	17410-21261	PIPE ASSY, EXHAUS		WARRANTY
				TOTAL - PARTS	0.00

JOB# 1 TOTALS-----

JOB# 1 JOURNAL PREFIX TOCS JOB# 1 TOTAL 0.00

JOB# 2 CHARGES-----

LABOR-----

J# 2 61TOZ EXTERIOR TRIM UNITS: 1.00 TECH(S):229506 94.95
REPLACE FT AIR-DAMN
SOP

PARTS-----	QTY----	FP-NUMBER-----	DESCRIPTION-----	LIST PRICE-UNIT PRICE-	WARRANTY
	1	53851-47020	PAD, FR WHEEL OPE	89.60 89.60	89.60
				TOTAL - PARTS	89.60

MISC-----	CODE-----	DESCRIPTION-----	CONTROL NO-----	
	D3	SENIOR CITIZEN DISCOUNT - PARTS		-8.96
	D4	SENIOR CITIZEN DISCOUNT - LABOR		-9.50
				TOTAL - MISC

JOB# 2 TOTALS-----

LABOR 94.95
PARTS 89.60
MISC -18.46

JOB# 2 JOURNAL PREFIX TOCS JOB# 2 TOTAL 166.09

JOB# 3 CHARGES-----

LABOR-----

J# 3 01TOZCSI M/P INSP & EXT WASH UNITS: TECH(S):229506 0.00
MULTI-POINT INSPECTION AND DRIVE THROUGH CARWASH
COMPLETE

JOB# 3 TOTALS-----

JOB# 3 JOURNAL PREFIX TOCS JOB# 3 TOTAL 0.00

JOB# 4 CHARGES-----

LABOR-----

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