

#### Licensed in Missouri and Illinois

(314) 542-2222 BurgerLaw.com

June 12, 2023

### SENT CERTIFIED MAIL VIA EMAIL: statefarmclaims@statefarm.com

Adjustor Tortfeasor's Insurance Address Address

### FOR SETTLEMENT PURPOSES ONLY

Demand Pursuant to RSMo. § 537.05,8

Caption: Plaintiff v. Defendant

Claim No.: 12345678

Demand Amount: \$100,000.00 (Policy Limits)

Time Limit for Response: 90 Days

Date of Loss: December 7, 2020

Location of Loss: St. Louis County, Missouri

Claimant Address: Address

Address

Party to Be Released: Defendant

Known Injuries: Neck pain, back pain, shoulder pain

#### Dear Sir or Madam:

As you know, we represent Client for injuries she sustained in an auto crash on December 7, 2020. Your insured Defendant caused this crash. Client was travelling eastbound while Mr. Defendant was behind her and following too closely. When she was slowing down for the traffic ahead as she saw another vehicle turning, Mr. Client attempted to stop but instead he skidded and crashed into the rear of Client's vehicle. As a result of Mr. Defendants negligence, Ms. Client sustained injuries and required medical treatment. To date, we have received the following medical records and bills from our client:

PROVIDER	AMOUNT
SSM Health Medical Group	\$614.00
SSM Health Physical Therapy	\$13,576.23
The Connection	\$11,165.00
Medical LLC	\$7,099.00
Greater Missouri Imaging	\$5,000.00
The St. Louis Spine and Orthopedic Surgery	\$23,816.00
Massage Luxe	\$850.00
TOTAL	\$61,990.23

Subsequently after the incident, Ms. Client immediately had symptoms in the base of the neck, which persist to this day with pain into the right and left periscapular and upper trapezius regions with pain extending into the shoulder blades.

A few days after the accident on December 10, 2020, Ms. Client went for a consultation at SSM Health Medical Group – Family Medicine due to complaints of continued and worsening pain in her back and neck. Dr. David, MD, saw her and a physical examination was performed. She was diagnosed with neck pain, acute midline low back pain without sciatica, and cervical and lumbar paraspinal muscle spasms. Dr. David referred Client to physical therapy and ordered an XR of the cervical and lumbar spine. She was given prescriptions to help with her pain.

As recommended, Ms. Client had her initial evaluation for physical therapy on January 5, 2021 at SSM Health Medical Group — Physical Therapy. Client was physically assessed and diagnosed with cervivalgia, muscle spasm of back, other muscle spasm, and low back pain. It was recommended for her to undergo rehabilitative therapy for 2 visits a week with an expected duration of 6 weeks. Ms. Client's therapeutic content includes: therapeutic exercise, therapeutic activity, manual therapy, neuromuscular re-education, modalities as appropriate, and education with implementation of an independent home exercise program. In all, Ms. Client had a total of thirty-three (33) visits for her physical therapy treatment from January 5, 2021 through July 26, 2021.

Due to ongoing pain despite having physical therapy, Ms. Client decided to visit Dr. Jason, DC for a chiropractic evaluation on March 29, 2021 as she complains of continued neck pain and back pain, still due to the vehicle accident she was involved in. After her initial evaluation, it was determined further testing may be necessary to confirm her ability to respond to care and attain the objectives stated for the treatment plan. However, her treatment plan included: spinal manipulation, joint mobilization and soft tissue mobilization, electrical stimulation, acupuncture, heat/ice/diathermy, manual and mechanical traction, and soft tissue therapy.

On April 5, 2021, Ms. Client received detailed information with regards to her examination findings. Dr. Jason, DC discussed with her specific postural distortions, spinal areas of concern and related health conditions as well as a normal spinal position, she was shown a picture of a normal x-ray to use a baseline standard. The x-ray evaluation process was explained and her x-ray's were presented and discussed. Any of her spinal distortions, arthritic change and/or spinal degeneration noted on her x-rays was discussed in detail. Upon full presentation of exam findings and x-ray evaluation, Ms. Client was asked to confirm the doctor's findings through a series of questions to verify her understanding of her condition and health problems.

Ms. Client therapy and treatment with Dr. Jason, DC is maintained with additional prescriptions like flexibility and exercises, water therapy, and lumbar brace as needed. This treatment plan was sustained for multiple numbers of visits. In all, she had a total of forty-two (42) chiropractic treatment visits from March 29, 2021 up to July 26, 2021.

Despite the combination of both physical therapy and chiropractic treatment for managing Ms. Client's pain, the pain still persists, which lead her to consulting Dr. Patricia of Medical LLC for pain management on May 4, 2021. Physical examination was performed on her and was diagnosed with strain of muscle, fascia, and tendon at neck level, pain in thoracic spine, and strain of muscle, fascia and tendon of lower back. A short course of oral corticosteroids was recommended along with advanced imaging before proceeding with more interventional procedures. Therefore, Client underwent an MRI of her cervical spine and lumbar spine at Greater Missouri Imaging. On May 17, 2021, Ms. Client's diagnostic studies of the cervical and lumbar spine. MRI Imaging shows that she has disc protrusions at C5-6 and C6-7 in addition to L4-5 and L5-S1 with mild spondylosis noted as well. Additional diagnosis were made, cervical disc disorder, unspecified cervical region, and other intervertebral disc displacement, lumbar region were added.

On May 26, 2021 and June 8, 2021, Ms. Client underwent a pain management bilateral C5/6 and C6/7 facet/zygapophyseal injections under fluoroscopic guidance. An instruction form was given to her at the time of discharge, and was instructed to call immediately or report to the emergency room for severe back pain, new neurologic deficit or fever.

Ms. Client has continued her chiropractic treatment with Dr. Jason on her own to help with her ongoing pain and symptoms. Enclosed is the last Proposed Treatment Plan from Dr. Jason. This plan has included 24 sessions of adjustments and therapy along with additional x-ray and process exam. The total for her future/ongoing treatment is \$2,795.00.

Client has also recently sought treatment through massage therapy as suggested by medical physicians. She believes that the massage therapy has made

the biggest difference in her day-to-day pain and her herniated discs along with the injections. She has been getting a message every two weeks at this time.

Despite, the treatment that Client has as stated above and her ongoing treatments continues to have pain and symptoms. She has days where he back pain is worse than others and she is unable to do daily life activities.

Since Client's injuries were so significant, she also has a wage loss claim. Client had just recently started a new position at Labs as a Director of Business Development on November 30, 2020 just days before this incident. Client was unable to maintain her work due to the pain from her injuries and was terminated on April 14, 2021. Thus, she lost her salary of \$75,000 plus commission.

To date, Ms. Client's medical bills are **\$61,990.23** plus her future medical and wage loss. This is a demand for settlement pursuant to RSMo. § 537.058. This is an offer of unconditional release of liability for State Farm Insurance and your insured from all present and future liability for this case, as described by RSMo. § 537.060. This demand is made with the understanding that your insured has an insurance policy with a **\$100,000.00** limit of coverage. If this is incorrect and there is additional coverage available, please advise immediately.

This demand is accompanied by a list of names of the health care providers that have treated our client's injuries from the date of injury to the date of this demand. We request that **you immediately send our office HIPAA compliant written authorizations sufficient to allow you to obtain records from the health care providers if the attached HIPAA is not sufficient.** We will have our client sign these authorizations and return them to you. We enclose all the medical records in our possession at this time with this letter. We believe, because of the clear liability and our client's significant injuries, that it would be bad faith for State Farm Insurance Company to not settle her claim for the **\$100,000.00** policy limit. If you need any further information or documents to evaluate this claim, or have any questions, please advise.

Thank you for your attention to this matter. Our office looks forward to your response at your earliest convenience.

Very truly yours,

Gary K. Burger

GKB/cjf Enclosure

500 N. Broadway, Suite 1860, St. Louis, MO 63102 (866) 599-2222 (618)272-2222 Facsimile: 314-542-2222

## **HEALTH CARE PROVIDERS**

SSM Health Address Address

The Connection Address Address

SSM Physical Therapy Address Address

Medical LLC Address Address

Midwest Family Wellness Address Address

Greater Missouri Imaging Address Address

The St. Spine and Orthopedic Surgery Address Address

Massage Luxe Address Address

# **EMPLOYMENT**

Labs Address Address