Septiembre 11, 1990

Doctor Hector Garcia 1315 Bright Street Corpus Christi, Texas, 78405

Estimado Doctor Garcia

La forma en que supe de usted fue por medio del programa de televisión PORTADA, Septiembre 3, 1990. Me impresiono lo que desde la Segunda Guerra Mundial ha hecho defendiendo los derechos humanos de los Mexicanos en este país. Por lo poco que he sabido de usted me parece que usted es una persona muy humana y profesional. Es por esto que le envio esta carta para exponerle mi caso con la esperanza de que usted me pueda orientar.

Yo me llamo Rodolfo Vega Rodriguez, 35 años, de Michoacan, casado con cuatro niños. En el año 1980 sufrí un accidente en mi trabajo a partir de esa fecha trabaje tres años en el mismo lugar donde volvi a sufrir otro accidente y quede en esta ocassión desabilitado definitivamente. En 1985 recibí una compensación de \$30,000 dolares y con ese dinero sobrevivi en México por tres años. En 1986 hice la solicitud para el seguro social, pero se me ha estado negando. En 1989 lleve mi caso a la corte de Fresno, California, donde se fallo en mi contra que porque los reportes medicos no eran suficientes. Enseguida en ese mismo año recurri a un abogado del condado de Stanislaus, el Senor Ricardo Cardova, pero parece que hay muy pocas esperanzas: el caso ni siquiera ha sido aceptado en la corte de Modesto. En resumen es que se me ha negado mis beneficios caso tras caso.

Mi mejor evidencia es esta carta que le incluyo a mi parecer no debería de tener ningun problema para que se aceptara mi caso en la corte y se fallara a mi favor, pero no sucede asi. El Doctor Tad Lonergan, ha llegado a decir que el cree que por ser latino no se me han dado mis beneficios. Estoy desesperado y por eso recurro a usted.

Yo quisiera que usted me orientara, quiza dandome nombres de abogados o organizaciones que me puedan ayudar aca en California, desgraciadamente soy pobre y no cuento con dinero. O quiza si no es mucho pedir y abusando de su confianza que usted interviniera por mi directamente con el seguro social de Modesto ya sea enviandoles una carta o llamandoles por telefono, para ver si de ese modo puedo obtener mis beneficios que por ley me pertenecen.

Perdone el atrevimiento y la confiaza que tuve con usted lo hice porque usted me inspiro confianza y admiración.

Espero recibir su contestación y ojala que con la ayuda de Dios y de usted pueda resolver este problema para beneficio mio y de mi familia

Gracias "Zorro Mexicano".

Con agradecimiento.

Rodolfo Vega Rodriguez

Rodolfo Vega Rodriguez

P.D. Mi telefono: (209) 522-8276 Llame por cobrar.



December 18, 1989

Ricardo Cardova, Esq. California Rural Legal Assistance P.O. Box 3384 Modesto, CA 95353

> Re: Rodolfo Vega Social Security No: 566-94-5101

Dear Mr. Cardova:

Thank you very much for your letter of December 14, 1989. It was good to talk to you the other day on the telephone.

Mr. Vega has been seen in our office since April 26, 1989. At that time, he gave a history of some type of a back injury and it was noted by Dr. Champaign, an associate of this office, that he was walking with a good deal of rigidity and was using a cane.

Subsequently, x-rays revealed a severe lumbosacral disc disease and laboratory reports revealed a significant hyperlipidemia. Unfortunately, we were not able to use the best treatments for hyperlipidemia because it is not available under the formulary allowed to the Medi-Cal patients, so because of their second-class status, we merely started him on some Niacin and asked him to change his diet which, as you know, is most difficult, especially for those who are not well motivated.

Subsequently, we needed to get some information from his previous physicians and they were supplied and reviewed. They show that on October 5, 1987, the patient was disabled because of a muscular ligamentous strain to the cervical dorsal spine and lumbosacral spine with persistent symptoms of radiculopathy from the lower back to the lower limbs. The patient was considered permanent and stationary and the patient was to be considered totally disabled until provided vocational rehabilitation. This was signed by Erwin Steinberg, M.D. of the Bay Cities Medical Group. A note from a chiropractor which really is unacceptable medical treatment suggested he be on permanent total disability. A long list of billings from San Pedro Peninsula Hospital addressed to the Liberty Mutual Insurance Company regarding apparently a hospital visitation for this patient was attached.

We subsequently filled out some AFDC papers here in town.

In summarizing the patient's care, he apparently had some

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chymopapain injections in 1983 which were obviously not successful. He had a CT scan done here on the 13th of June, 1989 which showed a bulging disc at L4/L5 with spinal stenosis without focal disc herniation demonstrated.

Some of these changes are interpreted by some of the people as an arachnoiditis pain and are felt to be due to the irritative and inflammatory nature of the chymopapain enzyme injections. Other experts would say this is not as big a factor as some of the original workers in the field.

The patient apparently had an application made in front of an administrative law judge which was not successful. The patient feels that the other attorney who he retained in Fresno to represent him did not accept the new evidence that he had obtained. As a matter of fact, the attorney in Fresno who was representing him in administrative law court did not even ask for records from our office.

The patient had a Holter monitor which showed supraventricular beats occurring at the rate of 2.1 S.V.E.'s. Minimum rate occurred at 37 beats per minute at 4:00 in the morning and a maximum rate of 127 beats per minute occurring at 1:00 p.m. These findings are really not outside the limits of normal.

There is a letter in the file dated July 6, 1989 to Green & Azevedo regarding his Workers Compensation case. The patient does not want surgery at this time and therefore, he is not anxious and tried to reopen the workers compensation case. Of interest is the fact that the patient has to use Tylenol with codeine on a p.r.n. basis along with Motrin for his pain. He is slowly getting himself on a low cholesterol diet and a copy of his case has been included with this report which is signed by Harriet Simon, a member of Appeals Counsel under the social security administration.

Of interest is the fact that his elevated cholesterol and triglycerides have come down to somewhat more reflective levels.

At the present time the patient is still suffering with a considerable amount of pain in his low back with radiation down his right leg. He states that at times he has pain down both legs. This pain is persistent but not in a steady fashion. It comes and goes. At it's worst, there is marked spasm and pain with a lot of difficulty in sleeping. He uses the Tylenol with codeine for relieving the spasm and uses the Motrin as a steady pain pill and if that is not enough, then he uses the codeine. He has tried Feldene in the past but this has not been successful because of

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stomach pain which is often seen with this anti-inflammatory agent.

The changes on the x-ray are obvious and the changes on the CT scan are obvious as well. Disc bulging can be just as painful as an actual disc indentation or impingement upon the thecal sac. It is easy to visualize how this happened by understanding that the bulge is present all the time. As a matter of fact, depending on the position of the back, is sometimes worse than other times. This change in the bulging pattern can indent the thecal sac depending on its continuity to the spinal cord (thecal sac). In certain positions, such as stooping, bending or leaning over, the patient conceivably could indent the spinal cord enough to cause severe radiation down his legs, a condition they used to call sciatica which suggests inflammation of the sciatic nerve. In actuality, a lot of sciatica is due to disc disease and this patient surely has evidence of that problem.

In addition to this, the chymopapain injections which were quite popular a few years ago have been by large discarded because of the arachnoiditis that developed in some of the patients after the chymopapain injections. Arachnoiditis is simply a fancy term for irritation inflammatory process of the fine membrane surrounding the spinal cord which causes a continuing pain and is often seen in some of the previous dyes that were used in myelographic studies and still are used occasionally.

In summary, this patient is permanently and totally disabled because of his subjective findings of pain in both legs but more pronounced in the right leg down the sciatic distribution consistent with nerve impingement, probably at the level of the cord and not in the leg or along the course of the sciatic nerve. Objective evidence is shown by the plain views of his spine and in the CT scan study which is quite obvious, even to a lay person to judge.

The patient is totally disabled, unable to work and probably wisely, has made a decision that he does not want any surgery at this time. If his symptoms get worse, his problems can be surgically looked at and that is a proposition surely open to him in the future. He cannot do sedentary work because he simply can not sit down for long periods of time - estimated 20 minutes at the most, without severe pain down his leg. He can not do any light work because lifting or long periods of walking causes the pain and spasm, especially in both legs but more marked in the right leg consistent with his disc disease. He is totally disabled and your courtesy and help towards this unfortunate patient who has fallen through the cracks of the medical care system will surely be appreciated.

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I was impressed with your attitude of humility and helpfulness over the telephone and I am also impressed by the fact that there is a legal assistance office in Modesto. We have had several patients in our office that are in need of this type of legal help who simply are not getting any help at all because of the inequities in the justice system and I would like, at a later time, to sit down and have lunch with you at my expense to go over some of these problems that we have seen and maybe you might have some suggestions as to how we can help in that regard.

We will be happy to do anything we can to help you with the federal court system or whatever needs to be done. Having been in practice for 30 years, we are not afraid of subpoenas, depositions, intimidating Sustice of the Peace courts in Texas or intimidating Superior Court chambers in Los Angeles County or Federal Courts in Stockton, Sacramento or San Francisco. They all serve the same service and as professionals, we are here to help these poor unfortunate patients who have no other hope but that we could spend some time with them.

I told you that our usual fee for preparation of a report is \$300. I told you that we would reduce the fee to \$100 even though that does not even cover our costs and time. However, in view of the fact of your willingness to help on this case, I am making this report available to you at no charge and offering you further help if it becomes necessary.

Thank you very much for asking us to be of help.

Sincerely yours,

Tad Lonergan, M.D.
Diplomate, American Board of
Family Practice
Medical Director, Modesto Family
Health Medical Group, Inc.

TL/cc