

From

January 2, 2019

Mr./Ms. (Claims Adjuster)
ABCD Company
P.O. Box _____

Re: My Client: ZZZZ
Your Insured: XXXX
Your Claim No: _____
Date of Accident: MM/DD/YYYY

Dear Mr./Ms. (Claims Adjuster),

As you are aware, this office represents ZZZZ in connection with the injuries sustained in the above-mentioned incident claim.

This letter is an attempt to negotiate an amicable resolution. Therefore, the following is a brief summary of the facts and damages involved.

LIABILITY

On or about March 18, 2015, at approximately 10:30 AM, ZZZZ was the restrained operator of a motor vehicle(year/make/model) (Vehicle No. _____) was traveling southbound on Haverhill Road, near Nash Trail, in Palm Beach, Florida. XXXX operating another motor vehicle(year/make/model) (Vehicle No. _____) in the same direction behind Our Client's vehicle failed to notice my client's slowing vehicle and rear-ended it. As a result, Your Insured driver rear-ended our client's vehicle and pushed it into another vehicle in the front causing damage to both front and back end of our client's vehicle. Our Client's vehicle sustained EXTENSIVE rear and front DAMAGE exorbitantly amounting to \$_____.

As a result of this incident, ZZZZ sustained injuries that have required ongoing medical treatment. Enclosed please find copies of medical records and itemized bills delineating the injuries he sustained as a direct result of this incident.

TREATMENT

On March 18, 2015, ZZZZ was transferred via ambulance with precautions to the emergency department at XYZ Medical Center for the injuries sustained in the incident. He complained of mild constant generalized throbbing headache along with bilateral neck pain and stiffness. He had a prior history of nasal septum surgery. Following complete physical examination, ZZZZ was diagnosed with concussion. He was given prescriptions for Tylenol and Ibuprofen. He was instructed to apply ice over the affected areas. He was given a work note to stay off from work from March 18, 2015 to March 19, 2015. ZZZZ was advised to follow up with his primary care physician, if his symptoms persisted.

On March 30, 2015, ZZZZ presented to ABC General Hospital for complaints of some ear ringing and neck pain. He had bilateral posterior neck pain along with stiffness. Upon examination, ZZZZ was assessed with head injury and neck spasm. He was given prescriptions for Naproxen and Flexeril. He was recommended application of heat over the affected areas, massage and stretches. ZZZZ was advised to return to the clinic, in case of worsening symptoms.

On April 11, 2015, ZZZZ presented to ABC General Hospital for complaints of left shoulder discomfort along with tingling/numbness going down his left arm. The pain symptoms occurred on looking to the left and with abduction of his left shoulder. Upon examination, ZZZZ was assessed with cervical strain. He was given prescriptions for increased BID dosing of Flexeril and Naproxen. He was recommended stretching, massage, Ben Gay and application of ice/heat over his left trapezius/shoulder. ZZZZ was advised to return to the clinic, if his symptoms persisted.

On June 17, 2015, ZZZZ returned to ABC General Hospital for complaints of left medial elbow discomfort along with tenderness. He also complained of some discomfort and stiffness in his neck on looking to the left/right. The X-rays of his cervical spine dated 2005 were reviewed. Upon examination, ZZZZ was assessed with neck pain and left elbow pain. He was given a prescription for Aleve. He was recommended X-rays of his neck and left elbow. He was instructed to apply ice over the affected areas. ZZZZ was advised to return to the clinic, on as needed basis.

On June 19, 2015, ZZZZ returned to ABC General Hospital for X-rays of his cervical spine and left elbow. The X-rays of his cervical spine revealed maximal degenerative changes at C6-C7. The X-ray of his left elbow revealed no significant finding.

On September 3, 2015, ZZZZ returned to ABC General Hospital for CT of his facial bones. The study was unremarkable for any significant finding.

On September 29, 2015, ZZZZ followed up at ABC General Hospital for complaints of fairly severe blur and tiredness up close when reading, aggravated by the aforementioned incident. He had a prior history of blur and tiredness on reading one to two years prior to the presentation. He also had a history of several instances of being hit in the eye many years ago that required

stitches. Upon examination, ZZZZ was diagnosed with low hyperopia oculus uterque with early presbyopia/Pingueculae oculus uterque/trace Meibomian Gland Dysfunction with mild lid hyperemia oculus uterque due to history of concussion and ocular trauma oculus uterque. Reading glasses were ordered. He was given Non-Visual Object treatment. ZZZZ was advised to return to the clinic, if his symptoms worsened.

On October 22, 2015, ZZZZ presented to ABC General Hospital for evaluation and to begin a course of physical therapy treatments. Following a series of tests and complete physical examination, ZZZZ was diagnosed with cervical strain and degenerative disc disease. He was recommended physical therapy treatments. A treatment plan consisting of manual therapy, neuromuscular reeducation, and home exercise program was devised to get ZZZZ back to her pre-accident status. ZZZZ received two sessions of physical therapy on October 22, 2015 and November 2, 2015.

On November 22, 2015, ZZZZ presented to the emergency department at ABC General Hospital. The X-ray of his chest was ordered and performed. He was given prescriptions for Ibuprofen and Acetaminophen.

In addition to the foregoing, ZZZZ has been specifically diagnosed with the following injuries:

1. Cervical sprain/strain
2. Cervical spine/intersegmental dysfunction
3. Cervical/ myofascitis
4. Cervical/restricted range of motion
5. Neck pain
6. Neck stiffness
7. Cephalgia
8. Thoracic sprain/strain
9. Thoracic /intersegmental dysfunction
10. Thoracic/ myofascitis
11. Lumbar sprain/strain
12. Lumbar /Intersegmental dysfunction
13. Lumbar/ myofascitis
14. Lumbar/ radiculitis
15. Low back numbness/tingling radiating down lower extremity
16. Back pain

DURATION OF TREATMENT

First Date of Treatment

Last Date of Treatment

March 18, 2015

November 22, 2015

ER TREATMENT

XYZ Medical Center
 (_____, MD)

March 18, 2015

PAIN MANAGEMENT

ABC General Hospital
 (_____, MD)

March 30, 2015

ABC General Hospital
 (_____, MD)

April 11, 2015

ABC General Hospital
 (_____, MD)

June 17, 2015

ABC General Hospital
 (_____, MD)

June 19, 2015

ABC General Hospital
 (_____, MD)

September 3, 2015

ABC General Hospital
 (_____, MD)

September 29, 2015

ABC General Hospital
 (_____, MD)

October 22, 2015

ABC General Hospital
 (_____, MD)

November 22, 2015

Future Medical: Chiropractic 15 visits x _____ per visit = \$

MEDICAL SPECIALS

- 1. XYZ Medical Center \$
- 2. ABC General Hospital \$

TOTAL: _____ \$

GENERAL DAMAGES

As alluded, there is no question that ZZZZ has sustained significant injuries because of this accident. ZZZZ is a ___-year-old male, who experienced various pain symptoms because of his injuries, which imposed various restrictions with his personal life. ZZZZ was unable to participate in the family recreational activities, which he enjoyed prior to this accident. Only time will allow us to truly determine to what degree ZZZZ's life has been altered because of this accident.

SETTLEMENT DEMAND

The following is a summary of ZZZZ's harms and losses:

Medical Bills Incurred to Date:	\$	_____
Future Medicals:	\$	_____
Total Medical Bills:	\$	_____
General Damages:	\$	_____
TOTAL DAMAGES:	\$	_____
DEMAND TO SETTLE FOR POLICY LIMITS OF:	\$	_____

CONCLUSION

ZZZZ will agree to settle this claim by **Insurance Company** in the amount of **\$ 25,000.00 Policy Limits**. Please review this letter and the enclosed support, and contact us in that we may determine whether an amicable resolution to this matter is possible. We thank you in advance for your time and consideration.

Sincerely,