

November 7, 2018

RECEIVED  
OFFICE OF CITY ATTORNEY

NOV 12 2018

1:10 A.M. (P.M.)

Jim Owczarski, City Clerk  
200 E. Wells St., Room 205  
Milwaukee, WI 53202-3567

Good afternoon Mr. Owczarski,

My name is Ruth T. Rivera, and my home address is 5072 S 19<sup>th</sup> Street, Milwaukee, WI 53221. The purpose of this letter is to file a claim against the City of Milwaukee, for personal injury due to a fall on an elevated/uneven sidewalk on 23<sup>rd</sup> St. and Edgerton Avenue, on August 10, 2018. Due to this incident, I suffered a broken shoulder (humerus), facial and body contusions, and subconjunctival hemorrhage of my right eye. I have pictures of the exact location where this incident occurred, as well as pictures of the resulting injuries. Enclosed please find the first two pages of the "After Visit Summary" from St. Luke's Emergency Services, where I arrived by ambulance shortly after 10:00 AM. Please notice the seven diagnoses on page one and the lab and imaging tests, completed on that day, on the second page.

At this point, almost 3 months (90 days) after this incident, I still cannot move my dominant right arm nor can I use my dominant right hand. My hand continues to be swollen and has very limited range of motion. I am still in a lot of pain, and medication for this pain is of little or no use. Now, every task done from morning to evening with a fractured shoulder and a swollen hand (by this previously completely independent and energetic seventy-one-year-old woman) has been either painfully done or not done at all. My days now consists of doctor appointments, therapy sessions and an overwhelming, constant readjusting of daily routines because even the slightest movement in my right arm produces a great deal of pain. And all of this because there was an elevated, uneven sidewalk that had not been repaired by the city of Milwaukee...a great place by the lake, in which this retired Milwaukee Public Schools teacher still wants to live.

I know I have to undergo many more treatments before I, hopefully, go back to the normal, independent and active life I had prior to my unfortunate fall in my neighborhood. However, I would like to submit this letter within the 120-day deadline even though I have no idea how much out-of-pocket money I still have to pay for more therapy, labs and physicians charges. With this claim, I am seeking the amount of \$50,000 as compensation for past, ongoing, and future medical care, as well as for the pain and suffering due to the city of Milwaukee's negligence to provide risk-free sidewalks in our neighborhoods.

Respectfully submitted,

*Ruth T. Rivera*  
Ruth T. Rivera

(414) 282-6919 or (414) 803-8703 cell  
ruthrivera1122@gmail.com

CITY OF MILWAUKEE  
NOV 12 A 0:45  
OFFICE

10/24, November 8, 2018,

\* 90 days after my fall on August 10, 2018, and resulting injuries, at my doctor's appointment <sup>today</sup> I was told that my shoulder/hand injury has developed into a "frozen" shoulder.

## Frozen Shoulder

Adhesive Capsulitis is commonly referred to as "frozen shoulder." It is a disorder characterized by pain and loss of motion or stiffness in the shoulder. The cause of frozen shoulder is not fully understood. The process involves thickening and contracture of the capsule surrounding the shoulder joint. Frozen shoulder can develop after a shoulder is injured or immobilized for a period of time. Attempts to prevent frozen shoulder include early motion of the shoulder after it has been injured.

Frozen shoulder affects about two percent of the general population. It is most common in women between 40-70 years old. It is also associated with a number of medical problems including:

- Diabetes
- Hypothyroidism
- Hyperthyroidism ] NONE IN MY CASE
- Parkinson's Disease
- Cardiac disease → I suffer from hypertension, controlled by Carvedilol and Lisinopril

## Symptoms

Pain due to frozen shoulder is usually dull or aching. It can be worsened with attempted motion. The pain is usually located over the outer shoulder area and sometimes the upper arm. The hallmark of the disorder is restricted motion or stiffness in the shoulder. The affected individual cannot move the shoulder normally. Motion is also limited when someone else attempts to move the shoulder for the patient. Some physicians have described the normal course of a frozen shoulder as having three stages:

- **Stage 1 – Freezing:** A slow onset of pain that can last from six weeks to nine months. As the pain worsens, the shoulder loses motion.
- **Stage 2 – Frozen:** Marked by a slow improvement in pain, but stiffness remains. This stage generally lasts four to nine months.
- **Stage 3 – Thawing:** Shoulder motion slowly returns to normal over a five to 26 month period.

## Diagnosis

A doctor can diagnose frozen shoulder based on the history of your symptoms and a physical examination. X-rays or MRI (magnetic resonance imaging) studies are sometimes used to rule out other causes of shoulder stiffness and pain, such as rotator cuff tear.

## Treatment

Frozen shoulder will often get better on its own over time. Occasionally, improvement can take up to three years. If you have a stiff and painful shoulder, see your doctor to make sure that no other injuries are present.

Treatment is aimed at pain control and restoration of motion. Pain control can be achieved with anti-inflammatory medications taken orally or by injection. Physical therapy is implemented to restore motion. This may be under the direct supervision of a therapist or using a home program. Therapy includes stretching or range of motion exercises for the shoulder. Heat may be used to help decrease pain. Nerve blocks are sometimes used to limit pain and allow for more aggressive physical therapy. More than 90 percent of patients improve with these relatively simple treatments.

In some cases, full motion does not return completely and some stiffness remains after several years, but does not seem to cause functional limitations.

Surgical intervention is considered when there is no improvement in pain or shoulder motion after physical therapy and anti-inflammatory medications. Surgical intervention is aimed at stretching or releasing the contracted joint capsule of the shoulder. The most common methods include:

- Manipulation under anesthesia so the surgeon can force your shoulder to move which causes the capsule to stretch or tear
- Shoulder arthroscopy is a procedure where your surgeon makes several small incisions around the shoulder to cut through the tight portions of the joint capsule

Manipulation and arthroscopy are often used together to obtain maximum results. Most patients experience very good results with these procedures. After surgery, physical therapy is important to maintain the motion that was achieved through surgery. Recovery time varies. Some patients require six weeks to three months off work, depending on their occupation and speed of recovery.

Name: Ruth T Rivera | DOB: 11/22/1946 | MRN: 1116388 | PCP: Milka Mandich, MD

# Payment Processed

Your payment has been processed successfully!

We sent a receipt to ruthrivera1122@gmail.com.

Date: 10/26/2018

Authorization code: 381506

Payment amount

Payment method

\$85.00



A RIVERA NAZARIO

x9972

Account #457695

exp. 10/2019

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## Payment Processed

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Payment amount

\$36.39

Date

9/20/2018

**VISA**

x9363

exp. 04/2021

RUTH T RIVERA

Account #

457695

Authorization code

392342

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Name: Ruth T. Rivera | DOB: 11/22/1946 | MRN: 1116388 | PCP: Milka Mandich, MD

# Payment Processed

Your payment has been processed successfully! Please print this page as a receipt for your records.

Payment amount

\$30.00

Date

9/11/2018

**VISA**

x9363

exp. 04/2021

RUTH T RIVERA

Account #

457695

Authorization code

552171

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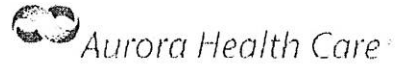
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# AFTER VISIT SUMMARY

Ruth T. Rivera DoB: 11/22/1946

Accident date



8/10/2018 AHCM St Lukes Emergency Services 414-649-6333

## Instructions

Your personalized instructions can be found at the end of this document.



### Your medications have changed

- START taking:  
oxyCODONE (IMM REL) (ROXICODONE)
- ASK how to take:  
meloxicam 7.5 MG tablet (MOBIC)
- Review your updated medication list below.



### Pick up these medications from any pharmacy with your printed prescription

meloxicam • oxyCODONE (IMM REL)



### Call Nicholas P Webber, MD in 3 days (around 8/13/2018)

Why: for an appointment within 5-7 days  
Specialty: Orthopedic Surgery  
Contact: 2801 W KINNICKINNIC RVR PKWY  
STE 345  
Milwaukee WI 53215  
414-649-7900

## Today's Visit

You were seen by Kelly F Smith, DO

### Diagnoses

- Fall from standing, initial encounter
- Contusion of face, initial encounter
- Subconjunctival hemorrhage of right eye
- Closed nondisplaced fracture of surgical neck of right humerus, unspecified fracture morphology, initial encounter
- Contusion of left knee, initial encounter
- Abrasion of left knee, initial encounter
- Abrasion of left hand, initial encounter

## Today's Visit (continued)

### Lab Tests Completed

Basic Metabolic Panel  
CBC & Auto Differential

### Imaging Tests

ECG  
Shoulder CT  
Skull CT  
XR Knee 4+ View Left  
XR Shoulder 3 View Right

### Done Today

Blood draw with starting an IV line or capped IV  
Capped IV with Sodium Chloride 0.9%  
Cardiac Monitor  
Continuous Pulse Oximetry  
Ice to affected area  
Sling

### Medications Given

HYDROmorphone (DILAUDID) last given at 10:48 AM  
HYDROmorphone (DILAUDID) last given at 11:42 AM  
ketorolac last given at 1:56 PM  
LORazepam (ATIVAN) last given at 10:46 AM  
ondansetron (ZOFTRAN) last given at 12:17 PM  
ondansetron (ZOFTRAN) last given at 1:54 PM

### Your End of Visit Vitals



Blood Pressure  
145/67



Temperature (Oral)  
98.9 °F



Pulse  
82



Respiration  
18



Oxygen Saturation  
98%

## What's Next

You currently have no upcoming appointments scheduled.

## Disclaimer

Follow-up Care: It is your responsibility to arrange for follow-up care with your healthcare provider or as instructed. Call to get an appointment time.



8-10-18

A subconjunctival hemorrhage is a result of a broken blood vessel in the white portion of the eye. It is usually painless and may be caused by coughing, sneezing, or vomiting. An injury to the eye can cause this. It can also be a sign of hypertension (high blood pressure) or a bleeding disorder.

Although it can look frightening, the presence of the blood is not serious. The blood will be reabsorbed without treatment within 2 to 3 weeks.

### Home care

You may continue your usual activities.

### Follow-up care

Follow up with your healthcare provider, or as advised.

### When to seek medical advice

Contact your healthcare provider right away if any of these occur:

- Pain in the eye
- Change in vision
- The blood does not disappear within three weeks
- Increasing redness or swelling of the eye
- Severe headache or dizziness
- Signs of bruising or bleeding from other parts of your body

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## Imaging Results

### CT SHOULDER RIGHT (Final result)

Result time 08/10/18 15:15:34

Final result

Impression:

IMPRESSION:

Minimally displaced impacted and comminuted fracture through the surgical neck of the humerus with extension to the greater tuberosity. The fracture also likely involves the lesser tuberosity. There is a small glenohumeral joint effusion.

I have reviewed the images and agree with the Resident interpretation.

I have personally reviewed the images and agree with the resident's interpretation.

## Imaging Results (continued)

### Narrative:

CT SHOULDER WO CONTRAST RIGHT 8/10/2018 2:35 PM

HISTORY: ABNORMAL XRAY, SHOULDER

COMPARISON: Right shoulder radiograph 8/10/2018.

TECHNIQUE: Helical imaging was performed through the right shoulder without contrast. Coronal and sagittal reformats were generated and submitted for review.

### FINDINGS:

There is a minimally displaced, impacted, and and comminuted fracture through the surgical neck of the humerus with extension to the greater tuberosity (series 200 image 130) and likely the lesser tuberosity. The humeral head is normally situated within the glenoid. There is a small glenohumeral joint effusion. Mild acromioclavicular joint arthropathy. No abnormal rotator cuff muscle atrophy. The deltoid appears unremarkable.

The visualized right lung demonstrates no acute findings. Incidentally noted is a tiny calcified granuloma in the right upper lobe (series 201, image 131).

### Preliminary result

### Impression:

Minimally displaced impacted and comminuted fracture through the surgical neck of the humerus with extension to the greater tuberosity. The fracture also likely involves the lesser tuberosity. There is a small glenohumeral joint effusion.

I have reviewed the images and agree with the Resident interpretation.

### Narrative:

CT SHOULDER WO CONTRAST RIGHT 8/10/2018 2:35 PM

HISTORY: ABNORMAL XRAY, SHOULDER

COMPARISON: Right shoulder radiograph 8/10/2018.

TECHNIQUE: Helical imaging was performed through the right shoulder without contrast. Coronal and sagittal reformats were generated and submitted for review.

### FINDINGS:

## Imaging Results (continued)

There is a minimally displaced, impacted, and comminuted fracture through the surgical neck of the humerus with extension to the greater tuberosity (series 200 image 130) and likely the lesser tuberosity. The humeral head is normally situated within the glenoid. There is a small glenohumeral joint effusion. Mild acromioclavicular joint arthropathy. No abnormal rotator cuff muscle atrophy. The deltoid appears unremarkable.

The visualized right lung demonstrates no acute findings. Incidentally noted is a tiny calcified granuloma in the right upper lobe (series 201, image 131).

### **XR Knee 4+ View Left (Final result)**

Result time 08/10/18 13:18:34

#### **Final result**

#### **Narrative:**

XR KNEE 4+ VW LEFT 8/10/2018 12:33 PM

HISTORY: fall, left knee/patella tenderness, edema

COMPARISON: None.

TECHNIQUE: 5 views of the left knee.

#### **FINDINGS/IMPRESSION**

No acute osseous fracture or dislocation. There is mild tricompartmental joint space narrowing and hypertrophic changes, worst in the medial tibiofemoral compartment. There is mild lateral patellar tilt and mild lateral subluxation. Moderate prepatellar soft tissue edema. No significant knee joint effusion is identified.

I have personally reviewed the images and agree with the resident's interpretation.

#### **Preliminary result**

#### **Narrative:**

XR KNEE 4+ VW LEFT 8/10/2018 12:33 PM

HISTORY: fall, left knee/patella tenderness, edema

COMPARISON: None.

TECHNIQUE: 5 views of the left knee.

## Imaging Results (continued)

### FINDINGS/IMPRESSION

No acute osseous fracture or dislocation. There is mild tricompartmental joint space narrowing and hypertrophic changes, worst in the medial tibiofemoral compartment. There is mild lateral patellar tilt and mild lateral subluxation. Moderate prepatellar soft tissue edema. No significant knee joint effusion is identified.

### XR Shoulder 3 View Right (Edited Result - FINAL)

Result time 08/10/18 15:16:18

Addendum 1 of 1

Interval CT was performed demonstrating a fracture across the surgical neck of the humerus.

#### Final result

#### Impression:

##### FINDINGS/IMPRESSION:

The humeral head is appropriately positioned within the glenoid. Mild-to-moderate glenohumeral joint osteoarthritic changes. Normal alignment across the acromioclavicular joint. Mild acromioclavicular joint arthropathy. No evidence of fracture. There are chronic appearing calcifications adjacent to the greater tuberosity, likely representing calcific tendinosis.

I have reviewed the images and agree with the Resident interpretation.

I have personally reviewed the images and agree with the resident's interpretation.

#### Narrative:

XR SHOULDER 3 VW RIGHT 8/10/2018 12:32 PM

HISTORY: fall, right shoulder pain

COMPARISON: Right shoulder radiographs 10/26/2017

TECHNIQUE: 3 views of the right shoulder.

#### Preliminary result

#### Impression:

The humeral head is appropriately positioned within the glenoid.

## Imaging Results (continued)

Mild-to-moderate glenohumeral joint osteoarthritic changes. Normal alignment across the acromioclavicular joint. Mild acromioclavicular joint arthropathy. No evidence of fracture. There are chronic appearing calcifications adjacent to the greater tuberosity, likely representing calcific tendinosis. Diffuse bony demineralization.

I have reviewed the images and agree with the Resident interpretation.

### Narrative:

XR SHOULDER 3 VW RIGHT 8/10/2018 12:32 PM

HISTORY: fall, right shoulder pain

COMPARISON: Right shoulder radiographs 10/26/2017

TECHNIQUE: 3 views of the right shoulder.

FINDINGS/

## CT Facial Bones (Final result)

Result time 08/10/18 12:26:45

### Final result

### Impression:

IMPRESSION: No acute facial or orbital fracture identified.

//Location Code: SLMC

### Narrative:

EXAM: CT FACIAL BONES WO CONTRAST

CLINICAL INDICATION: 71 years-old Female, presenting history of FACIAL FRACTURE(S), fall, landed on right side of face.

COMPARISON: CT head 11/3/2015

TECHNIQUE: Using a multidetector, multislice helical CT imaging system, CT of the maxillofacial bones is performed, without contrast. Coronal and sagittal multiplanar reformats.

### FINDINGS:

Nasal Arch: Intact

Orbits/Zygoma: Intact

Globes and intraorbital structures: Intact

Mandible/Maxilla: Multiple dental amalgams and extractions with attendant streak artifact. No fracture.

**Detail of New Activity**

Thank you for choosing Aurora Health Care. We appreciate your prompt payment.



Date of Service	Description	Charges	Payments/ Adjustments	Balance Due
<b>Patient Name: RIVERA, RUTH T</b>				
08/10/18	165561817	Location: AHCM St Lukes Emergency Services		
	IV THERAPY - GENERAL CLASSIFICATION	720.00		
	MEDICAL/SURGICAL SUPPLIES AND DEVICES - GENERAL CLASSIFICATION	80.00		
	LABORATORY - GENERAL CLASSIFICATION	295.00		
	RADIOLOGY - DIAGNOSTIC - GENERAL CLASSIFICATION	1,260.00		
	CT SCAN - GENERAL CLASSIFICATION	3,840.00		
	EMERGENCY ROOM - GENERAL CLASSIFICATION	1,650.00		
	PHARMACY - EXTENSION OF 025X - SINGLE SOURCE DRUG	447.96		
	EKG/ECG (ELECTROCARDIOGRAM) - GENERAL CLASSIFICATION	412.00		
09/10/18	UNITED H Payments		-811.61	
09/10/18	UNITED H Adjustments		-7,828.35	
	<b>Patient Balance</b>			<b>\$65.00</b>
	<b>New Activity Balance Due</b>			<b>\$65.00</b>

**Total Amount Owed to Aurora (As of this Statement) \$65.00**

**Detail of New Activity**

Thank you for choosing Aurora Health Care. We appreciate your prompt payment.



Date of Service	Description	Charges	Payments/ Adjustments	Balance Due
<b>Patient Name: RIVERA,RUTH T</b>				
09/11/18 to 09/30/18	166420498			
				Location: Aurora Physical Therapy-Greenfield
09/11/18	THERAP ACTIVITIES PER UNIT	135.00		
09/11/18	PT EVAL MOD COMPLEXITY	370.00		
09/11/18	MOBILITY CURRENT STATUS	0.01		
09/11/18	MOBILITY GOAL STATUS	0.01		
09/14/18	THERAPEUTIC EXER PER UNIT	405.00		
09/14/18	E STIM UNATT NON WOUND CARE	75.00		
09/17/18	THERAPEUTIC EXER PER UNIT	270.00		
09/17/18	MANUAL THERAPY PER UNIT	135.00		
09/17/18	E STIM UNATT NON WOUND CARE	75.00		
09/19/18	THERAPEUTIC EXER PER UNIT	270.00		
09/19/18	E STIM UNATT NON WOUND CARE	75.00		
09/25/18	THERAPEUTIC EXER PER UNIT	135.00		
09/25/18	MANUAL THERAPY PER UNIT	135.00		
09/25/18	E STIM UNATT NON WOUND CARE	75.00		
09/27/18	THERAPEUTIC EXER PER UNIT	270.00		
09/27/18	MANUAL THERAPY PER UNIT	135.00		
10/25/18	United Healthcare Medicare Solutions Payments		-358.48	
10/25/18	United Healthcare Medicare Solutions Adjustments		-2,081.54	
10/25/18	PATIENT PAYMENT		-35.00	
	<b>Patient Balance</b>			<b>\$85.00</b>
	<b>New Activity Balance Due</b>			<b>\$85.00</b>

**Total Amount Owed to Aurora (As of this Statement)****\$85.00**



**KNUEPPEL**  
HEALTHCARE  
SERVICES, INC.

1444 S. 113th St.  
West Allis, WI 53214  
414-258-2800

**Oxygen One, Inc.**  
The Home Respiratory & Sleep Specialists

1900 Pewaukee Rd, Ste F  
Waukesha, WI 53188  
262-522-9228

Franklin Hospital Emergency Department 10101 S 27th St Franklin, WI 53132

Ruth Torres Rivera

(MR # E870759)

**\*\*\*PATIENT COPY\*\*\***

You have been fitted for and given the following orthopedic supplies:

**Orthopedic Supplies**


<b>Supply Order Upper; Shoulder Immobilizer; Comfort Universal (Bird &amp; Cronin - \$65.00); Right; 2 weeks</b>			Ordered 08/12/18 0032
Electronically signed by: Susan D Gedanke, MD			
Question	Answer	Comment	
Region	Upper		
Supply Type	Shoulder Immobilizer		
Shoulder Immobilizer Supply	Comfort Universal (Bird & Cronin - \$65.00)		
Side	Right		
Length of Need	2 weeks		

- The following items are *NOT COVERED* by Medicare, Medicare Advantage and most commercial insurance plans: Knee Orthosis Elastic Knee Cap, Surgical Cast Boots/Post-op Shoe, Sling
- The following items are *NOT COVERED* by Medicaid plans: Knee Orthosis Elastic Knee Cap, Sling



### September 2018

Monday	Tuesday	Wednesday	Thursday	Friday
Sep 3	Sep 4	Sep 5	Sep 6	Sep 7
Sep 10	Sep 11	Sep 12	Sep 13	Sep 14
	<u>8:15a - Initial Visit Therapy</u> with Mary K Casey, PT in Aurora Physical Therapy-Greenfield ✓			<u>1:45p - Follow-Up Therapy</u> with Mary K Casey, PT in Aurora Physical Therapy-Greenfield ✓
Sep 17	Sep 18	Sep 19	Sep 20	Sep 21
<u>11:15a - Follow-Up Therapy</u> with Mary K Casey, PT in Aurora Physical Therapy-Greenfield ✓		<u>10:30a - Follow-Up Therapy</u> with Mary K Casey, PT in Aurora Physical Therapy-Greenfield ✓		
Sep 24	Sep 25	Sep 26	Sep 27	Sep 28
<u>8:45a - Follow-up Visit</u> with Katelyn K Stange, NP in Aurora Orthopedics-ASLMC MOB 3, Ste 370 ✓	<u>10:45a - Follow-Up Therapy</u> with Mary K Casey, PT in Aurora Physical Therapy-Greenfield ✓		<u>10:45a - Follow-Up Therapy</u> with Mary K Casey, PT in Aurora Physical Therapy-Greenfield ✓	


**Aurora Health Care**  
 Aurora Health Care Physical Therapy  
 4131 W. Loomis Road, #200  
 414-281-5151

✓ = \$20 x 7 = \$140.00

*vc 2/1 copy*

October 2018

Monday	Tuesday	Wednesday	Thursday	Friday
Oct 1	Oct 2	Oct 3	Oct 4	Oct 5
10:30a - Follow-Up Therapy with Mary K Casey, PT in Aurora Physical Therapy- Greenfield  ✓		10:30a - Follow-Up Therapy with Mary K Casey, PT in Aurora Physical Therapy- Greenfield  ✓		
Oct 8	Oct 9	Oct 10	Oct 11	Oct 12
10:30a - Follow-Up Therapy with Mary K Casey, PT in Aurora Physical Therapy- Greenfield  ✓		10:30a - Follow-Up Therapy with Mary K Casey, PT in Aurora Physical Therapy- Greenfield  <del>                         canceled                     </del>		
Oct 15	Oct 16	Oct 17	Oct 18	Oct 19
Oct 22	Oct 23	Oct 24	Oct 25	Oct 26
Oct 29	Oct 30	Oct 31	Nov 1	Nov 2

*54.820 = \$ 60.00*

## AFTER VISIT SUMMARY

Ruth T. Rivera MRN: 1116388 9/24/2018 9:00 AM Aurora Orthopedics-ASLMC MOB 3, Ste 370 414-649-7900

## Today's Visit

You saw Katelyn K Stange, NP on Monday September 24, 2018 for:

- Shoulder Pain
- Forearm

The following issues were addressed:

- Closed fracture of proximal end of right humerus, unspecified fracture morphology, initial encounter
- Right hand pain
- Right wrist pain

## What's Next

SEP  
25  
2018 **Follow-Up Therapy** with Mary K Casey, PT  
Tuesday September 25 10:45 AM

Aurora Physical Therapy-Greenfield  
4131 W LOOMIS RD  
STE 200  
GREENFIELD WI 53221-2041  
414-281-5151

SEP  
27  
2018 **Follow-Up Therapy** with Mary K Casey, PT  
Thursday September 27 10:45 AM

Aurora Physical Therapy-Greenfield  
4131 W LOOMIS RD  
STE 200  
GREENFIELD WI 53221-2041  
414-281-5151

OCT  
1  
2018 **Follow-Up Therapy** with Mary K Casey, PT  
Monday October 1 10:30 AM

Aurora Physical Therapy-Greenfield  
4131 W LOOMIS RD  
STE 200  
GREENFIELD WI 53221-2041  
414-281-5151

OCT  
3  
2018 **Follow-Up Therapy** with Mary K Casey, PT  
Wednesday October 3 10:30 AM

Aurora Physical Therapy-Greenfield  
4131 W LOOMIS RD  
STE 200  
GREENFIELD WI 53221-2041  
414-281-5151

OCT  
8  
2018 **Follow-Up Therapy** with Mary K Casey, PT  
Monday October 8 10:30 AM

Aurora Physical Therapy-Greenfield  
4131 W LOOMIS RD  
STE 200  
GREENFIELD WI 53221-2041  
414-281-5151

OCT  
10  
2018 **Follow-Up Therapy** with Mary K Casey, PT  
Wednesday October 10 10:30 AM

Aurora Physical Therapy-Greenfield  
4131 W LOOMIS RD  
STE 200  
GREENFIELD WI 53221-2041  
414-281-5151

# Froedtert Health

*Froedtert.com*

--- Payment Receipt ---

Guarantor Name: RUTH RIVERA  
Account Number: E2807867

Payment Date: 11/6/2018  
Payment Amount: \$20.00  
Confirmation Number: 310192142402

Card Number: XXXX9363

Date	Description	Name	Account	Amount
10/27/2018	IMAGING	RUTH RIVERA	76427975	\$20.00

Thank you for your payment.

P.O. BOX 3136 | MILWAUKEE WI 53201-3136

**INVOICE**

For customer service or to make a payment please call 800-803-8155 or visit our website.

Froedtert.com/bill

**Addressee**

RUTH RIVERA  
5072 S 19TH ST  
MILWAUKEE WI 53221-3541

Page 1 of 1

Make a time payment

**QUICK PAY**



Fast



Simple



Secure

**Pay Online: Froedtert.com/bill**

Patient Number	Due Date	Amount Due	Amount Paid
E2807867	Upon Receipt	\$20.00	\$

Please make checks payable and remit to:

Froedtert Health  
P.O. Box 3136  
Milwaukee, WI 53201-3136

10000086829985300000028078670000000020006

myEasyMatch Code: P-QNFWL-22952-JVXYVT

Please detach and return top portion with payment.

Patient Number	Patient Name	Invoice Date	Due Date
E2807867	RUTH RIVERA	10/27/2018	Upon Receipt

Date	Service Description	Charges	Payments/ Adjustments	Patient Balance
10/10/2018	Froedtert Health Charges Account # 76427975 Provider: MARCUS W BICKFORD MD IMAGING	\$706.00	-\$686.00	\$20.00

**IMPORTANT MESSAGES**

- Only accounts that currently have a patient due balance are shown on this invoice.
- Please see reverse side for additional information about financial assistance.
- To request an itemized bill, please call us at the phone number listed above.
- Patient or guarantor acknowledges if sending a payment that is less than the total amount due, absent specific direction from patient or guarantor, the payment will be allocated to the oldest self-pay balance first.

**INVOICE SUMMARY**

Total Charges.....\$706.00  
Payments/Adjustments .....-\$686.00  
Total Amount Due .....\$20.00

**AMOUNT DUE:**

**\$20.00**

## Insurance Information

Primary Insurance:  
Policy Name: MEDICARE PRIMARY  
Policy Holder: RIVERA RUTH T  
Policy ID: 11012011

Secondary Insurance:  
Policy Name: MEDICARE UHC  
Policy Holder: RIVERA RUTH T  
Policy ID: 01012015



Make a quick and easy payment online with your checking account by scanning the QR code to the left. Download a QR code scanner from the Apple App Store or Google Play Store

## If Paying By Credit Card, Fill Out Below

CHECK CARD USING FOR PAYMENT    **VISA**    

CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_

PRINT NAME \_\_\_\_\_

PAYMENTS WILL BE APPLIED TO OLDEST ACCOUNTS FIRST UNLESS YOU ALLOCATE YOUR PAYMENT TO A SPECIFIC ACCOUNT, IN WHICH CASE, PLEASE PROVIDE ACCOUNT NUMBER AND AMOUNT BELOW.

ACCOUNT #	AMOUNT	ACCOUNT#	AMOUNT
_____	_____	_____	_____
_____	_____	_____	_____

### Hours of Operation:

Telephone Hours • 800-803-8155

Monday through Thursday 8:00 am – 8:00 pm

Friday 8:00 am – 5:00 pm

Saturday 9:00 am – 1:00 pm

### Walk-In Hours

Monday through Friday 8:00 am – 4:30 pm

Located in the Froedtert Health Corporate Center building in Menomonee Falls

### Financial Assistance Policy – Plain Language Summary

We understand there are times when patients are not able to afford their hospital or physician bills. The Froedtert & the Medical College of Wisconsin Financial Assistance Program is designed to assist patients with their financial obligations. This Financial Assistance Program provides eligible patients full or partial discounts on their hospital bills for emergency or medically necessary hospital care. This is a summary of the Froedtert & the Medical College of Wisconsin Financial Assistance Policy and the financial assistance application process.

**Availability of Financial Assistance:** Patients who receive eligible hospital or physician services, submit a Financial Assistance Application (including the required documentation and other information), and are determined to be eligible for assistance under Froedtert & the Medical College of Wisconsin's Financial Assistance Policy, will be eligible to receive financial assistance in paying for those hospital services. Please note that there are certain services that are not eligible for financial assistance, for example transplants, cosmetic services, bariatric services, reproductive medicine and other services.

**Financial Assistance Eligibility:** Generally, patients are eligible for financial assistance through the Financial Assistance Program based on their household income level and certain other assets. Patients and/or the responsible parties with household income of 250% of the Federal Poverty Level or less may be eligible for a discount of 100%. Patients and/or the responsible parties with family income of over 250% of the Federal Poverty Level may be eligible for a discount ranging from 65% - 90% determined by a sliding scale. No person eligible for financial assistance under the Financial Assistance Program will be charged more for emergency or other medically necessary care than amounts generally billed to individuals who have insurance covering such care. If you and/or the responsible party have sufficient insurance coverage or assets available to pay for your hospital care, you may not be eligible for financial assistance.

**How To Obtain Information:** Financial Assistance applications (and assistance in completing the application) as well as Froedtert & the Medical College of Wisconsin's Financial Assistance Policy may be obtained as follows:

- Obtain an application at the hospital's admissions desk or the Patient Financial Services office located at each Froedtert Health hospital.
- Request to have a free application mailed to you by calling 414-805-5951.
- Request a free application by mail at: Froedtert Health, Inc., Patient Financial Services, 400 Woodland Prime, N74W12592 Leatherwood Court, Menomonee Falls, WI 53051.
- Download a copy of the Financial Assistance Policy and/or a financial assistance application free of charge through the website: [www.froedtert.com/financial-services](http://www.froedtert.com/financial-services).

This plain language summary, the Financial Assistance Policy, and the Financial Assistance application are available in Spanish at each of the locations listed above.

Please refer to the full Financial Assistance Policy for a complete explanation and details of the Froedtert & the Medical College of Wisconsin Financial Assistance Program.

# Appointments and Visits

## Next 7 Days

**OCT 29** **New Patient** with TRANG LE DO, DO  
 12:30 PM CDT  
 Arrive by 12:15 PM  
 Mon

*\$35*

*CO-pays*

Drexel Town Square Health Center  
 7901 S 6TH ST  
 Oak Creek WI 53154

**OCT 30** **Established Patient** with BETHANY BROOKS OT, OT  
 11:15 AM CDT  
 Tue

*\$20*

Rehabilitation Services Hand and Upper Extremity  
 9200 W Wisconsin Ave, 5th Floor  
 MILWAUKEE WI 53226

## Future Visits

*\$20*  
**NOV 6** **Occupational Therapy Established**  
 MICHELLE  
 Tue BAUMEISTER OT, OT  
 8:00 AM CDT

*\$20*  
**NOV 8** **Occupational Therapy Established**  
 MICHELLE  
 Thu BAUMEISTER OT, OT  
 9:45 AM CDT

*\$20*  
**NOV 13** **Occupational Therapy Established**  
 MICHELLE  
 Tue BAUMEISTER OT, OT  
 9:45 AM CDT

*\$35*  
**NOV 14** **Established Patient**  
 JONATHAN CAMPBELL MD, MD  
 Wed 9:30 AM CDT

*\$20*  
**NOV 15** **Occupational Therapy Established**  
 MICHELLE  
 Thu BAUMEISTER OT, OT  
 9:45 AM CDT

*\$35.00*  
**NOV 16** **Established Patient**  
 ERIN ZEPEZAUER APNP, APNP  
 Fri 10:00 AM CDT

*\$20*  
**NOV 26** **PHYSICAL THERAPY NEW LONG**  
 JESSICA ONEIL PT, PT  
 Mon 1:45 PM CDT

*\$20*  
**DEC 10** **Physical Therapist Established**  
 JESSICA ONEIL PT, PT  
 Mon 10:30 AM CDT

*\$20*  
**DEC 27** **Physical Therapist Established**  
 JESSICA ONEIL PT, PT  
 Thu 11:15 AM CDT

## Last 3 Months

*\$35 doctors visit*  
*\$20 each therapy*

OCT Therapy  
26 BETHANY BROOKS  
2018 OT, OT

OCT Therapy  
23 BETHANY BROOKS  
2018 OT, OT

OCT Ortho Office Visit  
19 ERIN ZEPEZAUER  
2018 APNP, APNP \$35

OCT Therapy  
19 BETHANY BROOKS  
2018 OT, OT

OCT Hospital Outpatient  
10 Visit  
2018 Drexel Town Square  
Ultrasound

OCT Hospital Outpatient  
10 Visit  
2018 Drexel Town Square  
Health Center

OCT Ortho Office Visit  
10 JONATHAN  
2018 CAMPBELL MD, MD  
\$35

OCT Hospital Outpatient  
10 Visit  
2018 Drexel Town Square  
Health Center

Radiology

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Last 3 Months ○

OCT Hospital  
8 Outpatient Visit  
2018 Mary K Casey, PT

OCT Hospital  
3 Outpatient Visit  
2018 Mary K Casey, PT

OCT Hospital  
1 Outpatient Visit  
2018 Mary K Casey, PT

SEP Hospital  
27 Outpatient Visit  
2018 Mary K Casey, PT

SEP Hospital  
25 Outpatient Visit  
2018 Mary K Casey, PT

SEP Office Visit  
24 Katelyn K Stange,  
2018 NP

SEP Hospital  
19 Outpatient Visit  
2018 Mary K Casey, PT

SEP Hospital  
17 Outpatient Visit  
2018 Mary K Casey, PT

SEP Hospital  
14 Outpatient Visit  
2018 Mary K Casey, PT

SEP Hospital  
11 Outpatient Visit  
2018 Mary K Casey, PT

AUG Office Visit  
27 Nicholas P  
2018 Webber, MD

AUG Office Visit  
13 Nicholas P  
2018 Webber, MD

AUG Emergency  
10 Department  
2018 Kelly F Smith, DO

AUG Office Visit  
1 Gina S Dorneanu,  
2018 MD

3 Months Ago ○

~~JUL Hospital  
3 Outpatient Visit  
2018 Jamie H Chao,  
MD~~

~~JUN Office Visit  
21 Milka Mandich,  
2018 MD~~

~~JUN Office Visit  
11 Milka Mandich,  
2018 MD~~

X = unrelated  
to accident  
(fall on 8-10-18)

Oldest record loaded from 6/11/2018

# AFTER VISIT SUMMARY



Ruth Rivera DoB: 11/22/1946

11/7/2018 11:15 AM Orthopaedics, Drexel Town Square Health Center 414-346-8000

Total: \$220

## Today's Visit

You saw JONATHAN CAMPBELL MD, MD on Wednesday November 7, 2018 for: Follow-up.



Blood Pressure  
110/70



Pulse  
64



Respiration  
12

\$35.00 copay

## What's Next

- |             |  |         |  |
|-------------|--|---------|--|
| NOV 8 2018  | <b>Occupational Therapy Established</b> with MICHELLE BAUMEISTER OT, OT<br>Thursday November 8 9:45 AM   | \$20-   | Therapy, Drexel Town Square Health Center<br>7901 S 6TH ST<br>OAK CREEK WI 53154<br>414-346-8000           |
| NOV 13 2018 | <b>Occupational Therapy Established</b> with MICHELLE BAUMEISTER OT, OT<br>Tuesday November 13 9:45 AM   | \$20.00 | Therapy, Drexel Town Square Health Center<br>7901 S 6TH ST<br>OAK CREEK WI 53154<br>414-346-8000           |
| NOV 15 2018 | <b>Occupational Therapy Established</b> with MICHELLE BAUMEISTER OT, OT<br>Thursday November 15 9:45 AM  | \$20.00 | Therapy, Drexel Town Square Health Center<br>7901 S 6TH ST<br>OAK CREEK WI 53154<br>414-346-8000           |
| NOV 16 2018 | <b>Established Patient</b> with ERIN ZEPEZAUER APNP, APNP<br>Friday November 16 10:00 AM   | \$35.00 | Department of Orthopaedic Surgery<br>9200 W Wisconsin Ave, 5th Floor<br>MILWAUKEE WI 53226<br>414-805-7400 |
| NOV 26 2018 | <b>PHYSICAL THERAPY NEW LONG</b> with JESSICA ONEIL PT, PT<br>Monday November 26 1:45 PM<br>Please arrive 15 minutes prior to scheduled appointment and wear comfortable clothing. Please check insurance benefits for therapy coverage and copay. If you need to cancel, please call a minimum of 24 hours prior to your appointment. | \$20    | Therapy, Drexel Town Square Health Center<br>7901 S 6TH ST<br>OAK CREEK WI 53154<br>414-346-8000           |
| DEC 10 2018 | <b>Physical Therapist Established</b> with JESSICA ONEIL PT, PT<br>Monday December 10 10:30 AM<br>Bring/Wear shorts & t-shirt or gym attire.   | \$20-   | Therapy, Drexel Town Square Health Center<br>7901 S 6TH ST<br>OAK CREEK WI 53154<br>414-346-8000           |
| DEC 26 2018 | <b>Established Patient</b> with JONATHAN CAMPBELL MD, MD<br>Wednesday December 26 11:00 AM (Arrive by 10:45 AM)  | \$35    | Orthopaedics, Drexel Town Square Health Center<br>7901 S 6TH ST<br>OAK CREEK WI 53154<br>414-346-8000      |
| DEC 27 2018 | <b>Physical Therapist Established</b> with JESSICA ONEIL PT, PT<br>Thursday December 27 11:15 AM<br>Bring/Wear shorts & t-shirt or gym attire.   | \$20-   | Therapy, Drexel Town Square Health Center<br>7901 S 6TH ST<br>OAK CREEK WI 53154<br>414-346-8000           |

100.00

100.00

100.00

100.00

100.00

100.00

100.00

100.00

100.00

100.00

## Recent Payment Information

### Payments from 8/1/2018 to 11/30/2018

Date	Description	Source	Amount
10/26/2018	MYAURORA PAYMENT	Visa (x9972)	85.00
09/24/2018	PATIENT PAYMENT	Visa (x4774)	35.00
09/20/2018	MYAURORA PAYMENT	Visa (x9363)	36.39
09/11/2018	MYAURORA PAYMENT	Visa (x9363)	30.00
08/27/2018	PATIENT PAYMENT	Visa (x4774)	35.00
08/13/2018	PATIENT PAYMENT	Visa (x4774)	35.00
<del>08/01/2018</del>	PATIENT PAYMENT	Visa (x8900)	20.00

*not related  
to my  
fall on  
8-10-18*

Total: \$276.39

    20      
256.39