

**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR**

**ACTION REFERRAL**

TO <i>Milena</i>	DATE <i>8-11-08</i>
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<b>DIRECTOR'S USE ONLY</b>	<b>ACTION REQUESTED</b>
1. LOG NUMBER <i>000081</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Close per Zemorin, see attached e-mail.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>8-20-08</i>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

APPROVALS <small>(Only when prepared for director's signature)</small>	APPROVE	* DISAPPROVE <small>(Note reason for disapproval and return to preparer.)</small>	COMMENT
1.			
2.			
3.			
4.			



103 Omni Dr., Suite B • Seneca, SC 29672  
(864) 885-9866 • (864) 888-8307

*Demanded  
m 8/5/08*

Orlando A. Rick Ricalde, M.D.  
Board Certified Neurologist  
Jerry Sherrill, Jr., M.D.  
Board Certified Neurologist

EMG Evoked Potentials  
: EEG Sleep Studies

*Tanice*

# FAX



AUG 1 2008

From: Lake Ridge Neurological Staff → Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Fax: (864) 888-8307 Phone: (864) 885-9866

Date: 7-18-08

Number of Pages: 5 (including cover sheet)

To: Debbie Anderson

Fax: 803-355-8351

RE: Kastina Brooks

Urgent  For Review  Please Comment  Please Reply

Notes & Comments

*I need to get auth. for this pt to have botx Medicaid # is 4788339506*

Protected Health Care Information is Personal and Sensitive Information.  
You, as the recipient of this information, are to maintain it in a safe, secure, and confidential manner. Re-disclosure without additional patient consent is prohibited by law. Unauthorized Re-disclosure is subject to penalties described in federal and state law. Please Handle Information With Care.

# confidential

# Lake Ridge Neurological, P.A.

Orlando A. Ricalde, MD  
Jerry F. Sherrill, Jr., MD

EEG Evoked Potentials  
EMG Sleep Studies

103 Ormii Dr. Suite B • Seneca SC 29672  
(864) 885-9866 • Fax (864) 888-4307

May 27, 2008



AUG 11 2008

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

RE: BROOKS, Kristina

*This a letter of medical necessity for Botox.*

Dear Sir/Madam:

Kristina Brooks is twenty-years old with history of persistent right sided headaches. On her last evaluation there was associated with the above increasing tonus in right splenius capitus, longissimus coli, sternocleidomastoid on the right with some increased tone left superior trapezius, associated with the laterocollis of the head to the left. She has failed for relief of her pain all standard therapies and with an evolving laterocollis a trial of Botox of one hundred units is the next clinically appropriate intervention/trial. We would like to request one hundred units of Botox for EMG guidance for laterocollis to left hand side with associated right sided headaches. the Botox is not for the headache, but for the laterocollis.

Thank you very much.

Sincerely,

Orlando A. "Rick" Ricalde, MD

OR/cjh 06/03/08

Dictated, but not reviewed.

## Lake Ridge Neurological, P.A.

Orlando A. Ricalde, MD  
Jerry F. Sherrill, Jr., MD

EEG Evoked Potentials  
EMG Sleep Studies

103 Oriani Dr, Suite B - Greer SC 29617  
(864) 885-9866 • Fax (864) 888-8307

May 16, 2008  
Chart No: 2187

**RE: BROOKS, Kristina**

Kristina presents today for f/u. Her headaches are becoming more problematic. We tried Stadol and these were not effective at all. Depressive sx are clearly evolving, though she is not amenable to the feeling that this is a significant part of her migraine history. The migraines are essentially holocephalic. Occasionally there is a sharp knife-like pain with these. There is some nausea and vomiting. She had a heart cath several weeks ago with minimal CAD. She does c/o some leg pain. She does c/o constipation. Her vision is "fine".

**REVIEW OF SYSTEMS:** Per pt hx update form and as noted above.  
Denies any tingling or numbness.

As you are aware she has had normal CT-scan of the brain, normal angiogram, normal CT of brain.

She c/o diffuse muscle pains.

**MEDICATIONS:** Per medication log sheet. Reviewed.

**PHYSICAL EXAM:** Cognition: Decreased affect. BP-124/76. T-98.1.  
Heart rate-64.

Cranial nerve II: visual fields are grossly full. Fundoscopic exam shows flat and sharp optic discs bilaterally. III, IV, and VI: EOM's are full and fast.  
V: intact. VII: intact. VIII: normal to voice. IX, X, XI and XII:  
Unremarkable.

Re: Brooks, Kristina

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05/16/08

Carotids: No audible bruits bilaterally. Lungs: clear to auscultation all fields.  
Heart: Regular rate and rhythm. No murmur appreciated. Gait and station:  
Normal. Mild skull tenderness. Diffuse myalgias. Vibratory: Excellent.

Reflexes: Symmetrically brisk.

**ASSESSMENT:**

- #1. Elevated cholesterol. Positive family hx.
- #2. Minimal coronary artery disease post angiogram!
- #3. Depressive sx superimposed on the above.
- #4. Spastic colon.
- #5. Migraines since the age of 8yol

**PLAN:**

- #1. Discussed MUSC evaluation headache clinic. Consider Botox. There is an element of laterocollis associated with the above. It may be beneficial.
- #2. Strongly recommend long term psychiatric help with coping mechanisms.
- #3. Rheumatologic evaluation. Question fibromyalgia vs more prominent inflammatory condition

Kelly, I have seen some patient's over the last twenty-five years, approximately five in total, that have had intractable migraines or migraines for which nothing was consistently effective. When someone who has evolved headaches for this long of a period of time/persist with this degree of disability from it, then it is my concern that she may actually fall into that category. The short of it is that we continue to try to find something that is treatable, but be cautious about medication in the future that might lead to tolerance habituation dependence w/o some significant controls, and especially without the assistance of a psychologist/psychiatrist to keep a close eye on her overall frame of mind.

Thank you very much.

Re: Brooks, Kristina

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05/16/08

Sincerely,



Orlando A. "Rick" Ricalde, MD

OR/ejh 05/27/08

Dictated, but not reviewed.

**From:** Zenovia Vaughn  
**To:** Nancy Rabert; Tiffany Brown  
**Date:** 8/12/2008 4:32 pm  
**Subject:** Re: Put a new log letter in your box on 12th

**CC:** Melanie Giese  
Nancy - This is a routine PA request for a service that got to the 11th floor but was intended for Debbie (Hospital svcs). What is the process to have this removed from the log. The number is 000081.

>>> Nancy Rabert 8/12/2008 3:25 PM >>>

**From:** Nancy Rabert  
**To:** Brenda James  
**Date:** 8/13/2008 8:49 am  
**Subject:** Log 000081

**CC:** Margarete Keller; Melanie Giese; Tiffany Brow...

Per Zenovia's email. please cancel the letter as a log. Hospitals will handle the letter as they normally do.