



- **Fearfulness**
- **Sadness**
- **Dysphoria**
- **Intrusive thoughts**
- **Frustration**
- **Irritability**

### **TREATMENT OF INJURIES**

On January 11, 2019, Ms. XXXX presented to XXXX, M.D., at the emergency department of ABC Hospital (*Exhibit-1*) for the complaints of having post-traumatic stress disorder and anxiety producing incidents. She was literally crying from time to time while being triaged. She reported that she had insomnia alleged due to being harassed by her ex-boss. She underwent psychiatric assessment. She was diagnosed with anxiety attack. Clonazepam was prescribed. She stated that she had involvement with the shooter of the Mercy Hospital killings and she had a law suit against the assailant for harassment. She also stated that she was physically, mentally, and sexually abused by that man. She stated that she always watched her back, checked her windows and doors at home for fear that someone was there, and woke up in sweats most of the time. She was referred to Rajiv Kandala, M.D. She was discharged from the facility.

On March 14, 2019, Ms. XXXX presented to XXXX, M.D., at ABC County Health (*Exhibit-2*) for the complaints of having mood disorder and anxiety disorder and medication refill as well. She also had depression, paranoia, crying spells, insomnia, panic attacks, flashbacks, nightmares, and feeling desperate, hopeless, helpless, and worthless. She also had problems sleeping, poor appetite, guilt, and behavior change. Her psychological symptoms were exacerbated by family stress and financial stress. She reported having changes in her eating habits, sexual activity, sleeping patterns, social interaction, energy, and behavior. She had hard time talking about the incidents, became anxious, and started crying. She used to work for CHA, for three years, during which time she got three promotions. She started been harassed by her boss, she complained to HR, the boss needed to resign. In his place, his best friend became her boss who also started to harass her. She went to HR and moved to the down town office, and she was working near the killer from the Mercy Hospital, Juan Lopez. He too started to sexually harass her, he got her fired and 3 days after he killed his former fiancée. She was also suing CHA for wrongful termination. She was unemployed, had no income, and about to lose her house. Her 34 years old son lived with her as he was sick, and dependent totally on her. She reported having signs and symptoms of PTSD (Post-traumatic stress disorder) like nightmares and stated that she was always afraid and scared that of Lopez, knowing that he was dead, she felt his smell, his presence, intrusive thoughts about him, and his attitude towards her. Her mental status examination revealed that her mood was angry, depressed, anxious, helpless, and hopeless. Her affect was anxious, angry, apathetic, fearful, sad, and dysphoric along with paranoia and delusions. She was diagnosed with major depressive disorder, anxiety disorder, post-traumatic stress disorder, and her GAF (Global Assessment of Functioning Scale) was 40. She was prescribed Wellbutrin and Quetiapine. She was advised to follow up in two months.

On May 16, 2019, Ms. XXXX presented to Dr. XXXX the Emergency Department of ABC County Health for the medication management of her major depressive disorder and post-traumatic stress disorder.

She reported having difficulty sleeping, intrusive thoughts, flash backs, and hyperarousal state. She reported that she was unemployed and she was looking for another job. She was devastated by her situation. Her laboratory studies were obtained and reviewed. She was diagnosed with major depressive disorder. Her prescribed medications included Albuterol, Hydrocodone-Acetaminophen, Quetiapine, Wellbutrin, Dicyclomine, Methocarbamol, Naproxen, Ondansetron, and Pantoprazole. She was advised to follow up in two to three months.

On August 8, 2019, Ms. XXXX presented to Dr. XXXX ABC County Health for the medication management of her major depressive disorder, generalized anxiety disorder, and post-traumatic stress disorder. She was depressed, anxious, and had intrusive thoughts, flash backs, and nightmares. Most of the time, she was unable to sleep. She felt very tired, frustrated, and very depressed. She reported having depressive mood, anxiety, and panic attacks. She was fearful, and at times paranoid, although she knew that the man who harassed her was dead. She claimed that she was hopeless, helpless, worthless, and that she would never get her life again. Her sleep and appetite was variable. She stated that she was working 2 part time jobs in order to take care of her son who had Charcot Tooth Marie disease and he was legally blind. She appeared desperate, anxious, frustrated, and angry. Her mental status examination revealed that her mood was depressed, irritable, helpless, and hopeless. Her affect was anxious, angry, apathetic, depressed, and withdrawn. Her laboratory studies were obtained and reviewed. She was diagnosed with post-traumatic stress disorder. She was recommended to stop Seroquel and start Valium. She was also recommended to increase Wellbutrin and add Atarax as well. She was advised to follow up in two to three months.

#### **PAST LOSS OF INCOME**

Ms. XXXX used to work for CHA. Due to the workplace harassment she suffered post-traumatic stress disorder, generalized anxiety disorder, and major depressive disorder. She got fired at no fault on her own. As a result of the wrongful termination, she suffered a significant loss of income.

#### **FUTURE LOSS OF INCOME**

Ms. XXXX continued having post-traumatic stress disorder, generalized anxiety disorder, and major depressive disorder. She may not be able to work efficiently as before. This may lead to loss of income in the future.

#### **MEDICAL EXPENSES**

The medical expenses (*Exhibit-3*) for treatment of injuries that Ms. XXXX suffered because of the workplace harassment amounted to \$2,915.75. Copies of the medical bills are attached and itemized below:

<b>ABC Hospital</b>	<b>:</b>	<b>\$922.75</b>
<b>ABC County Health&amp; Hospitals System</b>	<b>:</b>	<b><u>\$1,993.00</u></b>
<b>Total Medical Expenses</b>	<b>:</b>	<b>\$2,915.75</b>

### **FUTURE MEDICAL EXPENSES**

Ms. XXXX continues to suffer from post-traumatic stress disorder, generalized anxiety disorder, and major depressive disorder as a result of the workplace harassment. She may require psychiatric consultations to evaluate her symptoms. She may require psychological counseling/psychotherapy and behavioral therapy to cope up with her ongoing psychological issues. In addition, medication management may be needed to control her anxiety and panic attacks and to improve her sleep as well.

The estimate of her medical expenses in the future is as follows:

<b>Psychiatric consultations</b>	<b>:</b>	<b>\$2,000.00-\$3,000.00</b>
<b>Psychotherapy/behavior therapy</b>	<b>:</b>	<b>\$2,000.00-\$5,000.00</b>
<b>Medication management</b>	<b>:</b>	<b><u>\$2,000.00-\$4,000.00</u></b>
<b>Total Future Medical Expenses</b>	<b>:</b>	<b>\$6,000.00-\$12,000.00</b>

### **LIFESTYLE IMPACT**

Ms. XXXX was fit as a fiddle until she was involved in the workplace harassment which happened on September 17, YYYY. There came a storm which tossed her life upside down and she continues to face the consequences with a weakened body and mind. She was physically, mentally, and sexually abused. Her emotional state weakens her body functions as well. She still continues to struggle for a restful sleep and complete her daily activities. She states that she is always watching her back, checking her windows and doors at home for fear, and wakes up in sweats most of the time. She is struggling from depression, paranoia, crying spells, insomnia, panic attacks, flashbacks, and nightmares. She is having feelings of hopelessness, helplessness, and worthlessness. She is having changes in her eating habits, sexual activity, sleeping patterns, social interaction, energy, and behavior due to her psychological damages. She states that her symptoms continue to be bothersome which were worsened by her financial and family stress. In addition, her 34 years old son is living with her as he is sick, and is dependent totally on her. She is forced to work in order to meet her financial crisis and to take care of her disabled son, despite having so many psychological damages. She is unable to manage her medical expenses due to the financial insufficiency. She is experiencing a lot of distress over how the incident has impacted and turned her life miserable at no fault of her own. Her emotional symptoms are significant and impacting on her self-esteem, self-confidence, and ability to interact with her environment. She is anxious and often recollects the day of incident and leads her life with the horrible moments of harassments which made the enjoyment of her life questionable. She is unemployed, has no income, and she is about to lose her house. Her depressed mood is detrimental which impacts her social and occupational functions. She is totally devastated by her pathetic situation. She claims that she is hopeless, helpless, worthless, and that she would never get her life again. This makes her feel desperate and she definitely deserves a peaceful life in the future.

The incident have definitely brought about a lot of undesirable physical sufferings, psychological damages, emotional distress, and financial burden for which she must be rightfully compensated.

**SUMMARY OF DAMAGES**

<b>Medical expenses</b>	<b>:</b>	<b>\$2,915.75</b>
<b>Future medical expenses</b>	<b>:</b>	<b>\$6,000.00-\$12,000.00</b>
<b>Future loss of income</b>	<b>:</b>	<b>Unknown at this time</b>
<b>Lifestyle impact/loss of activities</b>	<b>:</b>	<b>\$</b>

**CONCLUSION**

We recognize that your insured maintained only \$100,000.00 in available liability coverage to respond to this incident. In the spirit of compromise and in an effort to resolve this matter without the time and expense necessarily involved in formal litigation, I have been authorized by my client to demand settlement in the amount of \$100,000.00 from this policy, **if you tender this amount and the settlement check and Release are received in my office on or before** [redacted]. If this amount exceeds your insured's available policy limits, please consider this a policy limits demand. Acceptance of the policy limits is conditioned upon a receipt of a certified copy of the policy declarations page. Please be advised that if settlement cannot be accomplished in accordance with the terms as set forth, I have been instructed to file a lawsuit against your insured, and I feel confident that we will receive a verdict in excess of your insured's policy limits and will then be forced to commence unpleasant collection activities directly from your insured.

This demand for settlement is subject to verification of no excess coverage and permission from the UM carrier to accept same.

I trust that your reasonable evaluation of this file will lead to a settlement and you will not subject your insured to the litigation process. Copies of my client's relevant medical records and Bills Are Enclosed.

This letter is intended for settlement purposes only and shall not be deemed admissible pursuant to § [redacted], Florida Statutes.

Sincerely,

Enclosure  
cc:

**EXHIBITS**

- Exhibit 1** : **ABC Hospital**
- Exhibit2** : **ABC County Health**
- Exhibit 3** : **Medical Expenses**