

ATTACHMENT C

**RESPONDENT'S ARGUMENT REGARDING THE PETITION FOR
RECONSIDERATION**

Respondent's argument Ref: 2022-0415. Joy D. Jordan

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- To brush my teeth, I place the toothbrush and into my mouth using my teeth to hold it and my right hand to squeeze a toothpaste on it. Then I put the toothpaste down with my right hand and turn the water on and brush my teeth with my right hand
- I cannot shave my right armpit or wash it.
- I cannot hold a plate in my left hand while adding food to it like at a barbecue or a buffet, so I must set the plate down put food on it and then move onto the next item and then set it down again put the food on it that I want etc.
- I cannot open the doorknob with my left hand.
- I cannot turn on water with my left hand.
- I cannot wave with my left hand.
- I cannot cut my food.
- I cannot tie my shoes.
- I struggle putting pants on
- I have had several accidents trying to get my pants down and not being able to because I can only use my right hand to pull them down.
- To put my bra on I latch it together with my right hand put it on the floor step in the middle of it and pull it up with my right hand and arm going to my right end of my left sides.
- Shampoo conditioner lotions hair products I cannot squeeze onto my right hand to apply so I must squeeze them out onto the counter and scoop them off with my right hand.
- I can't put my hair in a ponytail by myself.
- I cannot put my left hand in my pocket and look for anything.
- For me to do dishes I have to soak them overnight and load them in the dishwasher with my right hand
- I can't fold clothes.
- If I have stuff in my right hand, I cannot open any door I have to put my stuff down then open the door then pick it back up.
- To take medication, I must prop the pill bottle with the bottom in my mouth and I bite down hard on it with my teeth and with my right hand I turn the safety lids off. Then I put the lid off on the counter take the bottle out of my mouth take the medication out of the bottle then put the lid back on the bottle all with my right hand and then I put the medication in my mouth with my right hand and I drink with my right hand

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- I can't open Ziploc bags, lunch meat bags like salami are sealed up and bags of chips.
 - I struggle putting butter or jelly or peanut butter on bread because the piece of bread keeps moving.
 - I wear flip-flops all the time rain or shine or slip on shoes because I can't put my shoes on by myself.
 - I do not have money for personal assistant to do my housework take care of me or do my shopping. I do try and get help when I'm at the stores but due to Covid there are hardly any employees so sometimes I get stuck trying to figure out how to do things myself and I use my mouth my teeth my knee my bum to maneuver waste to get things taken care of
 - Every single person that I know and or have worked with for the state of California can tell you that I worked with just my right hand.
1. Dr. Xeller, an IME doctor on 68 of 2020 confirmed my dystonia diagnosis & stated I was unable to perform my job duties. Dr. Lee QME doctor 629 of 2022 agreed with my dystonia diagnosis and that I would be unable to return to work and perform my job duties. Dr. Wiesibein, PA Kim Bellows, and a doctor that I saw regarding my SDI also confirm and agree with the dystonia diagnosis given to me by Dr. Margaret Schlater who is a neurologist and my treating physician at the time in 2005.

Regarding agenda item 8b1

- Staff argument to deny the petition for reconsideration attachment B Page 2 Second paragraph line 8 Dr. Khasigian testified under cross examination that he did not know the weight of any of the items he said I was picking up.
- Cal Pers Investigation, Decision attachment D Page 6 line 7 States that 2,640 minutes of surveillance there was only 36 minutes of me doing anything. I don't see how 36 minutes can tell anyone what I'm capable of doing for work.
- Section 10 of the CalPERS investigation it states that I drove all over when I drove to Kaiser for my Covid shot Long to pick up a prescription and then I stopped to get a frozen yogurt. My cell phone has a Device on it that helps me be able to hold it with my fingers and I can push my yogurt cup up against my left hand and arm to keep it from sliding around why I use my right hand to eat.

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- Still in section 10 of the above Report sentence eight says I open closed my car door and I have a small newer car with very lightweight Doors that are easy to open and close.
- My treating physician, Dr. Weisbein has advised me to try and use my left hand and to do exercises to try and maintain what little muscle I have left so when I can I try to use my left hand. I did recently drop a gallon of milk in Raley's because my left hand could not hold that, but I tried.
- Section 11 line 4 in my QME report from Dr. Bruckman he stated that my left arm is and has always been used to aid/Help my right hand and arm.
- Section 12 again I try to use my left arm and hand for easy items like rolling my empty garbage cans. Trying to be a productive human being.
- Section 13 line 4 Mr. Sharma does not have the ability to know my feelings and how I'm feeling inside and what I struggle with. Disabled people find Ways and improvise to try to look normal.
- Section 14 third line my laundry baskets are on wheels for a reason because I cannot carry them and again, I improvise by using my other body parts such as my mouth my teeth my knees my back my bum and it might look like I'm using both of my arms, but my right arm is doing all the work along with my other body parts.
- Section 14 some days I have better use of my left hand and that depends on the injection areas of Botox, when I got the Botox and how much I've tried using my left arm and hand.
- Section 15-line 10 IME Dr. Khasigian for CalPERS. They picked him they paid him they paid him to testify so I don't see how he could be an IME Doctor when Dr.Khasigian is not a third-party independent medical professional used to issue unbiased opinion of me. It was obvious with his treatment towards myself and the questions he was asking me were pertaining to the surveillance video he already watched.
- Section 17 Second line Down the heavy medication card that held all the medication cassettes for delivery in the prison for the first and second floor of the DMH section. Same section line 3 that is when I noticed the pain. Line 4 due to the Botox and the muscle loss which is the atrophy from non-use my left arm most of the time feels like a wet noodle.
- Section 18 line 3 I can lift lightweight items sometimes I try to use my left arm for more things and little bit heavier things so I can maintain what little muscle I have and that is per the instructions of my treating physician doctor Weisbein.

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- Section 19 at the time of my appointment with Dr. Khasigian I was very depressed I hardly went anywhere, nor did I even get dressed. The battery in my car went bad from sitting for so long.
- Section 22 and three Dr. Khasigian stated I have obvious lean body mass atrophy. Muscle atrophy is defined as the wasting(thinning) of muscle tissue looking smaller than normal due to lack of physical activity. Line 7 I told Dr. Khasigian that I felt that I looked sick and weak as I just survived Intussusception, which is when your intestines go inside of each other and die, and this has a high death rate.
- Section 22 line 3 and four Dr. Khasigian said I had mild thinning yet previously in section 20 line 3 he states I have obviously lean body mass atrophy.
- Section 23 line 1, Dr no. K was very rude and said not to worry about performing the motor functions.
- Section 24 line 10 several disabled people drive handicap parking is everywhere which I also have yet he insisted I give him the number of blocks I drove because he had already watched the surveillance video and Mr. Sharma followed my husband all over and out of town thinking it was me because the windows were tinted dark.
- Section 25 line 8 Dr. Mitchell added an S one time when he stated she appears to have full strength in the arms proximately distally yet everywhere else in the report he States I am there for my right arm any talks about the chronic pain in my right upper extremity the intermediate numbness and tingling down into my right hand and decreased grip strength in my right hand and previous Cortisone injections done in my right carpal tunnel and his impression he says possible right carpal tunnel syndrome. Dr. Mitchell is human, and people make mistakes maybe it was done when he was dictating, I'm not sure because he is no longer in business when I went to have him correct it. Just as I stated before professional people are humans and they do make mistakes your office sent me paperwork stating my court date was on March 30 and that I would have my paperwork in by March 22 then I also received paperwork saying that my court date was 20 March and that I had to have my paperwork in by 20 March which was very confusing and wrong so I had to call and speak with Deb Jo and she confirmed she had made a mistake and let me know that I had to have this in by 5 PM today March 18.
- Section 26-line 5 Dr. K states that I have no abnormal postures or contractions when I clearly do, and he clearly put that I did in section 20. Line 8 Dr. Schlater who state comp had her as my treating physician and she is a neurologist, but

she no longer has my records from that far back nor does state compensation, but I did have an EMG ANCV and an NCS test that she used to diagnose me with dystonia and that was confirmed by Dr. Bruckman as he stated he reviewed them to do my QME.

- Section 28-line 3 Dr. Kay says my swan neck and finger deformities which he previously said I didn't have any deformities are all voluntary and I can control them and I'm making them posture like that. On December 4 of 2023 I fell just walking and your normal reaction is to put your hands out to break your fall but because I do not have any control over my deformed left hand my right hand broke my fall but my left hand got fingers broken and dislocated requiring me to have hand surgery because I have no control over its posturing and as of today March 18 I still cannot move my fingers and I'm still in so much pain. My cast and pins were removed last week.
- In October of 2011 at work, I was trying to walk up the stairs and because I could not grip onto the railing I fell back and broke my foot and in 2023 I was at the park and fell backwards and broke my arm because I could not hold onto the railing.
- Section 33 I referred to feeling the surveillance made me feel like I have been robbed or my privacy invaded it's just creepy as a woman to know that you've been followed around into stores and watched and I think any woman would feel that way.
- Section 34 Dr. Kay stated my purse was heavy when in fact on cross examination he testified that he has no idea how much any of the items I pick up weigh. I must use a backpack style purse because I can't use a left arm purse because it just falls off my shoulder and I can't put on my right arm because I must be able to use my right arm for everything.
- Section 36 line 7 I don't have money to pay professionals to come to court and testify for me, so I assume that all my medical records from all the different physicians I've seen give answers to any questions any of you have. I have never done more or above any of the limitations set forth by my QME doctor on my left arm which is Dr. Bruckman and my QME doctor for my right arm which is Dr. Lee.

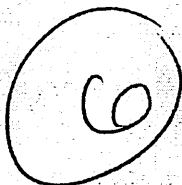
I have been receiving Botox injections to treat my dystonia since approximately 2005 and Botox injection is the treatment for dystonia, and it is working.

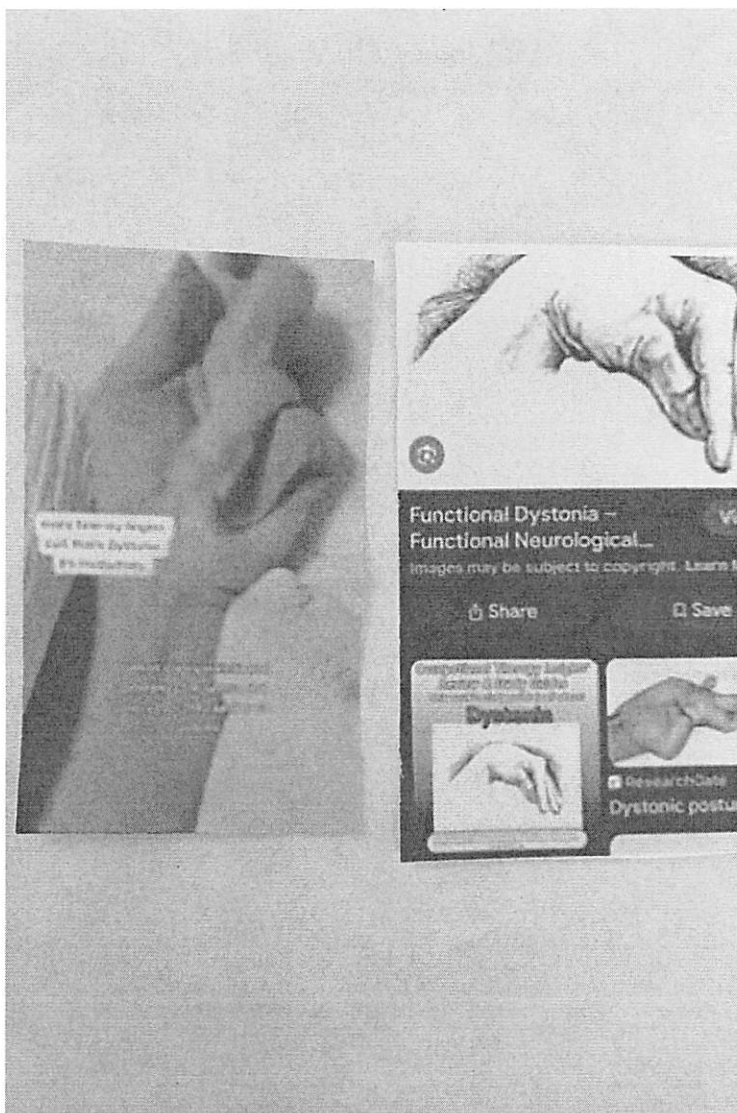
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With this letter I will submit some pictures of me taken by my ring camera and by other people throughout the years of my life showing that my left arm and hand is always

posturing. I do not enjoy it and I am embarrassed by it, and I do try my darndest to get it not to look so bad when I'm out and I avoid pictures of my left arm usually. I hope you can see in the pictures my left hand and these pictures date back to 2012. I would never pretend to be disabled and insult anyone who is disabled. If my intentions were too not work and get paid I would've done so when I was hurt in September 2005 and was given the disability rating of 77 percent but instead I wrote a letter to the judge pleading to let me stay working as I felt I could do it with my right arm and I had no other options that I could think of but it would've been nice to not work then I had a small child instead I stay working until August of 2017 and that is when my right arm I just couldn't take it anymore it hurts so bad I couldn't take it I can sit here and I can feel my heart beating through my arm my arm just aches and yet I still have to use it I'm at home and I still have to do stuff so I still have to suffer through it and I try not to do hardly anything which makes my husband mad at me because he's worked all day and the last thing he wants to do when he gets off is come and help me but that's my life so I hope you can see and allow me to stay retired. I promise you on my granddaughters lives I cannot use my left hand for hardly anything and I'm in pain all the time I'm not making any of this up I live a very boring life and I do struggle a lot with depression because of it as I feel like what is my purpose? So, with that said I hope that you can either put yourself in my position or what if I was your mom or what if I was your daughter how would you like them treated. I understand that there are other disabilities that are severe and are more severe than mine but that does not take away the severity of them to me. I cannot even open a door at a house along a heavy door at a prison or open bottles or open unit dose medication's or be able to defend myself from any of the inmates. Please I beg of you to consider all that I have said and the pictures and know that whenever anybody's out Side of their house they try to look as good as possible and as less disabled as possible because being disabled is embarrassing so just because my left arm or hand is on my steering wheel doesn't mean I'm using it to steer or if my left arm and hand go up above with my right hand to grab something it's because Number one it's a natural thing to do and number two it's my helping hand I just use it like so things don't fall over that way or guides it I don't use it with any kind of strength involved.

Thank you,
Joy D. Jordan







Wooten, Deborah (Deb Jo)

From: Joy Jordan
Sent: Monday, March 18, 2024 3:25 PM
To:
Subject: [**External**] -

Bill ID:
TE:09/22/2021
n, Joy
mber 17, 2021
EFFECTIVE FACTORS OF DISABILITY
my opinion to a reasonable degree of medical probability that the patient has
tive factors of disability resulting from her injury of CT to August 1, 2017
The neck was supple, but there were spams, guarding, and tenderness
Equivocal Spurling's maneuver.
Decreased active range of motion of the neck.
Equivocal Tinel's at carpal and Phalen's test in both hands.
Decreased sensation to pinprick and light touch in both hands, but mo
in left hand due to prior injury to the left hand.
There was sensory deficit involving the cutaneous dermatome involved: Pa
nerve (branch of median nerve (C6-8, T1)).
There was motor deficit involving abductor pollicis brevis, which is i
thenar muscular nerve
Decreased active range of motion of the neck.
Findings on diagnostic studies.
Well-healed surgical fusion scar in the neck.

Member Incapacity
To qualify for a disability retirement, the CalPERS member must be substantially incapacitated from the performance of the usual duties of his/her position with the current employer.
1. Is the member currently, substantially incapacitated from performance of the usual duties of the position for their current employer?
2. Was the incapacity for longer than 12 months?
3. Was the job duty substantially described reviewed to make your medical opinion?
4. Was the Physical Requirements of Position/Occupational Title form reviewed to make your medical opinion?
5. Was information reviewed that the member provided?
several medications, pain medical
CVA, repetitive injury, history, grasps

example, Dr. Bruckman's June 9, 2009 report at page four indicates the applicant told him that he had previously recommended a level of impairment which was "ouly rejected by State Compensation Insurance Fund and the DEU."
It is noted that applicant continues to perform her job duties as a pharmacy technician at Napa State Hospital albeit with little if any use of the left arm.
There is no substantial evidence supporting appointment of permanent disability to anything other than the industrial injury.
Medical Treatment: Based upon a review of all of the evidence, applicant is in need of future medical treatment to cure or relieve from the effects of the

Albert M. Mitchell, D.O.
BOARD CERTIFIED IN NEUROLOGY
ADULT NEUROLOGY - EEG - EMG
1261 Travis Blvd, Suite 170
Fairfield, CA 94533
Phone (707) 426-5915 Fax: (707) 426-6573
04-01-2021
DONALD LEE, DO
81767 DR CARREON BLVD STE 204
Berkeley Dunes CA 92201
Re: JORDAN JOY
DOB:
Insurance: ONE CALL MEDICAL INC
Claim #: OCMP01787479
DOI: 08-01-2017
Dear Dr. Lee:
Mrs. Jordan was in the office today for nerve conduction/EMG study of her right extremity. She is a 48-year-old female who complains of chronic pain in her right extremity. She is also had intermittent numbness and tingling down into her right hand. She's noticed decreased grip strength. She did have a previous cortisone injection done in the right carpal tunnel which seem to help for several weeks.
On exam today, she appeared to have full strength in the arms proximally (Right Tonia was normal). There was no atrophy noted. Sensation was intact in the right hand. Deep tendon reflexes were 1/4 at the biceps, triceps and brachioradialis bilateral. There is mildly positive Tinel's sign at the right carpal tunnel.
Initial Impression: Possible right carpal tunnel syndrome

can see, there are considerable problems."
complete review of the evidence, factors of permanent
marily from Dr. Bruckman's report of June 9, 2009 at pa
to fairly assess the applicant's permanent impairm

PAST MEDICAL HISTORY
Medications she takes include Clonazepam and Oxycodone.
PHYSICAL EXAMINATION
There is obvious atrophy of the left arm with Swan deformities of the 4th and 5th digits.
There is altered sensation in all fingers, which are 9-11 mm with 2-point discrimination.
...notes that the left side has dystonia. She

TESTING
MG/NCV
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absent.
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