



CRALLÉ PHYSICAL THERAPY SERVICES, P.A.

525 N.E. 3rd Avenue • Suite 106 • Delray Beach, FL 33444

RAYMOND H. CRALLÉ, R.P.T.
Registered Physical Therapist
Reg No. 1043

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September 10, 2009

Dear Dr. Hall,

Thank you for referring R. B. to us for evaluation and treatment for complications following 15 ½ years of Military Service that include Blast Injury.

R.B. complains of sleeplessness, irritability, severe headaches, depression, memory problems, stiff neck, various joint aches and pains, inability to concentrate, reliance on GPS device, following loss of consciousness on several occasions including a scud missile near hit. He reports being hit in the head by a crane ball and knocked overboard and unconscious during a boat extraction at sea. Another blow to the head was caused by NBC vehicle door in Iraq. R.B. states he can't tolerate crowds of people and concern that he can't function and experience anxiety attacks and nightmares. "I feel like I'm just broke".

Initial examination found loss of active Cervical range of motion. Cervical rotation to left was -28°, there was hypertonicity in Thorax Para Spinal muscles. He has some delay in responding to questions at times. He reports several hospitalizations during his service and four episodes of loss of consciousness, some lasting greater than 4 minutes. He reported an extensive list of drugs provided by the Military- Dr. Scherer has recorded these. He complains of tinnitus but does not appear to have vestibular symptoms.

R.B. is to begin Hyperbaric Oxygen treatments two times a day as prescribed by Dr. Charles Scherer. He will also receive two Physical Therapy sessions twice a day that will include one Myofascial release session of approximately 1 hour per day. Multiple modalities for pain suppression. Neuro-Rehabilitation focusing on increasing static and dynamic balance issues, gait training and vestibular stimulation.

Forensic psychologist, Dr. Jeffery Gran and psychiatrist William Romanos, MD will evaluate the before and after effects of HBO rehab protocols.

Shelby Hayes of Hayes Clinical Laboratories will draw blood and Dr. Sudputh and Dr. Chengus will be looking for biomarkers.

R.B.

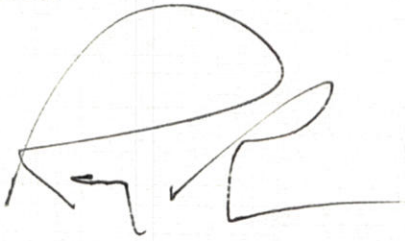
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William Maxfield, MD will read SPECT scans provided by Alex Cruz of South East Imaging. We will rescan after 20 HBO visits and then after 2nd set of 20 HBOT.

Thank you Dr. Hall for this opportunity to be of assistance to you and this fine brave young man.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Cralle'. The signature is stylized with a large, rounded initial 'R' and a long horizontal stroke at the end.

Raymond H. Cralle, RPT

cc: Charles Scherer, MD



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October 9, 2009

Dear Dr. Hall,

This discharge summary of R. B. will hopefully reflect the almost spectacular improvements he has realized during this month of intensive rehabilitation and Hyperbaric Oxygen treatment.

A review of R.B.'s three SPECT scans and Dr. Maxfield's conclusions coincide with the progressive improvements noted clinically.

R.B. reports several episode indicative of his desperate mental and emotional state before arriving here. His failed marriages, filing chapter 11 twice, a long period of cocaine addiction for pain relief, living out of the back of his pick up truck in the woods because he could not make payments on his truck, a suicide attempt (not gesture) where his dog "saved his life" by alerting a neighbor was reflected by an episode where he married his present wife after overcoming the aforementioned and had driven approximately 4 miles from home in rural Indiana and suddenly found himself totally lost, not knowing where he was, why he had left home or where he was going. He was frightened and had to call home to be reassured he was safe and ok. Reading was impossible, headaches, sleeplessness, depression, hopelessness were comforted by his new wife. R.B. wanted his old life back was angry at the Military who discharged him with "TBI within normal limits"!

One look at R.B.'s first SPECT scan, when compared to a "normal", would allow a child to see that Dr. Maxfield's conclusion that R.B. suffered from markedly abnormal SPECT brain scan with a severely patchy pattern of localization in both cerebral hemispheres was dead on.

I bring this into the equation because R.B. extensive brain injuries explain so much about his life spiraling out of control... the desperation to the point of not wanting to live anymore.

Your phone call, Dr. Hall, was the literal life line R.B. needed to get back to his old self.

The reports from our forensic psychologist, our lab reports on blood studies have yet to be completed but one has to anticipate positive outcomes based on the quite obvious changes in personality and affect of this brave man.

Forty dives at 1.75 ATA were completed along with Physical Therapy. Physical Therapy included myofascial release, a hands on procedure of approximately one hour. Michael G. Gershon, MD in his book "The Second Brain" refers to serotonin release from Intrinsic Primary Afferent Neurons in the gut where 98% of the body's serotonin is stored. The myofascial sessions were paramount in controlling depressive moods.

Cranial electrotherapy stimulation also was provided and two units were provided free of charge to R.B and his friend A.B for continued use at home.

Conventional use of moist heat, ultrasound, and electrical stimulation were utilized PRN for muscle and joint pains.

The first change was sound sleep, followed by progressive comfort in body aches and pains. This was accompanied by increased affect, obvious mood elevation, socializing with staff and other patients and short term memory improvements.

Reading ability, and memory are markedly improved. Following the 2nd 5 hour forensic psychological battery. R.B. was surprised he could read and answer the 500 questionnaire where during his 1st exam the psychologist had to read the questions to him. More surprising to R.B. was that he could remember questions of the exam the next morning. He stated that it would not have been possible before. Headaches are now few and mild when they occur.

A discharge summary was filmed, at my expense, of R.B. and A.B. the morning of their last day with us. Each vet testified to their observations of improvement in each other. A copy of the unedited CD will be forwarded to you along with reports from our other team members.

There was an excellent response to the treatment you advocated. We feel R.B. may improve from another bout of HBO 3 to 4 months from now as was recommended by Dr. Maxfield. Dr. Maxfield concludes minimal abnormal SPECT brain scan on the 3rd scan at the end of our treatments. Notably the Basal Gonglia appear normal. See attached reports from Dr. Maxfield.

Sincerely,

Raymond H. Cralle, RPT

Note: The morning R.B. was to take a train back to Indiana, he was informed his 20 year old daughter had been killed in a traffic accident the night before. As tragic as this is, R.B. got to see his two daughters for the first time in many years and more importantly is in much better shape to deal with this unfortunate and tragic event. The undersigned will be attending the service.