2:13-CV-0068-JMS-WGH

Joshua Lindsey
PATIENT Signature

B529

X-RAY CONSULTATION PROVIDED BY CAHABA IMAGING, P.C.

Homewood Plaza Office Bldg.
3125 Independence Drive, Suite 105
Homewood, Al 35209
(205) 802-6100 * 1-800-535-2189 * Fax: (205) 870-1207

NAME	AGE	DOB	DOC#	ORDER DATE	EXAM DATE
Lindsey, Joshua	35	3/2/77	112177	1/15/13	1-17-13

CLINIC NAME:	PROVIDER NAME:
WABASH VALLEY CORRECTIONAL FACILITY	REGINA HALL, R.T. (R) (M)

TYPE OF X-RAY EXAM:	REASON FOR X-RAY:
lower back	lower back pain

DR's SIGNATURE: K Dirchin RN for Dr Orseph

****

DO NOT WRITE BELOW THIS LINE

Lindsey

PROCEDURE:
Lumbar spine

FINDINGS:
AP and lateral views show evidence of fracture, subluxation and acute bony abnormality. Vertebral body heights, disc interspaces and overall alignment are disrupted. Paraspinal soft tissues are remarkable. No previous studies are available for comparison.

CONCLUSION:
Normal plain film views of the spine.

D: 01-21-13 & T: 01-22-13 Steven R. Parris, M.D./tr

surgical consultation recommended

01/22/2013 10:59 FAX Cahaba Imaging 0003/0014