The four topics listed below will be able to scientifically refute the Deceptive Rhetoric utilized by the insurance carriers to mitigate just settlements demands for your clients. These four topics most used by the carriers are as follows:

1. All sprains are transient and not serious.

2. All disc herniations on MRI's are preexisting.

3. No or low damage crashes equals no injury.

4. Pre-existing arthritis indicates current injuries are also pre-existent.

Learning how to scientifically refute this deceptive rhetoric in our narratives as well as during trial will substantially increase your settlements. I introduced the concept of **age dating herniations** and changes in the vertebrae **(Modic Changes)** to demonstrate the accident occurred contemporaneously with the changes in the spine thus **linking symptomatology, bodily injury, and persistent functional loss to the accident**. In lieu of a herniated disc, we can use digital X-ray analysis to demonstrate significant permanent impairment based on the AMA Guides to Evaluation of Permanent Impairment.

At this time, I would like to expand on these topics to delve into actual settlements. These following two topics define the continuum of settlements which I would like to call "From Colossus (or CPEC) to the Courtroom. "Colossus was used by the governmental office of Australia in the 1980s and was popularized by Allstate in the 1990s. Allstate turned to Colossus, which was developed by the Computer Science Corporation, to engineer a computer software program to allow insurance companies help to evaluate, value and ultimately limit settlement offers consistently to your demand letters. Nearly 50% of Insurance carriers still use a prototype of Colossus but all insurance companies now use CPEC which is an acronym for "Computer Programs to Evaluate Claims."

In the next several topics, I will discuss in detail of not how to defeat the carriers (CPEC) but working within the carriers' requirements (CPEC) to definitively demonstrate and document what CPEC requires as our national strategists and carrier representatives are privy to the most important algorithms of the CPEC programs.

However, in today's topic, I want to focus on the Courtroom.

COURTROOM

The other type of settlement is the courtroom which bypasses the carrier's influence on settlement and leaves it up to the judge and jury. Colossus and CPEC no longer have any influence once your case hits the courtroom. At least 99% of lawyer's cases settle before the "courtroom" however, the threat of going to trial can be used as a strategy to maximize settlements. To utilize this threat, law offices must have a reputation or willingness to go to trial. It is important to know that CPEC programs analyze every personal injury attorney's office on whether the (attorney's office) will go to trial.

Importantly, the courts are what drive everything in law and thus personal injury lawyers set up their cases "as if" the case will go to trial (court). I understand that almost all personal injury lawyers are "wired" for a verdict from the onset of a new case as that is your training. From the beginning you must decide what the resources will be if you must take it to trial and whether you believe the case will be cost effective. Indeed, one of the most important aspects of your preparation is whether you have a physician with credentials and knowledge that will "carry the

day” in court. These doctors must have the knowledge and the prerequisite credentials that can withstand Voir Dire and Daubert standards to act as an expert witness should the case go to trial.

Indeed, I am part of a National Medical Legal Association that works with national strategists, trial lawyer associations, and carrier representatives and I have accrued a significant amount of postgraduate education from chiropractic and medical academia which has led me to be Primary Spine Care qualified, Trauma qualified, and most recently MRI qualified (please see CV attachment). I have been a Qualified Medical Evaluator (QME) in the state of California since 1992 and I have performed hundreds of medical legal evaluations. As an expert witness my fee is $5000 to testify for personal injury cases. I am qualified to opine on a myriad of topics pertaining to trauma and personal injury.

However, if I have been personally treating a patient for a minimum of 30 days, it is my policy not to charge for testifying. It's not that I wouldn't charge the lawyer, but I don't want to charge my patient, because at the end of the day that is who is paying for my testimony. I believe if your office knows that they can take me all the way to court if needed, it will allow the patient/client and attorney’s office to maximize their rightful and just settlement.

Summary

In evaluating your new potential cases, it is important to perhaps look at the case from a perspective of the Courtroom to the Carriers (CPEC or Colossus) which in some ways is upside down, given the fact that 99% of cases settle before trial. However, you must always set up the case as if it will end up in trial, but we cannot neglect the importance of the other 99% of your cases which do not go to trial.

In these next several topics, I will break down the algorithms of the four most important aspects of settling cases (before trial), which include **neurological damage, impairment rating, and functional loss which includes loss of enjoyment of life and duties under duress.** I will also sprinkle in other topics such as the importance of slice thickness in MRI protocols as well as the importance of using a neuroradiologist instead of general radiologist when reading MRI films from MRI facilities. I also personally read the MRI images to assure there are no mistakes made by the reading radiologist. Ultimately, it is important to have a physician who has the credentials and knowledge to take the case to court, if necessary, as well as a detailed knowledge of the other 99% of cases which settle before trial.