

Notebook

November 19, 2003

Michael Geitz, MD  
2741 DeBarr Road, Suite 415-C  
Anchorage, AK 99508

RE: Krystin M. Gardiner  
DOB: 2/2/2002

Dear Mike,

I had the pleasure of seeing Krystin today for evaluation of her infantile scoliosis. A copy of the office note is included for your records.

From their visits with you the family was well prepared for brace recommendation and had an overall good understanding of what the goals and difficulties were in treating this type of situation. A Milwaukee brace will be fitted later this morning and after that I will be seeing Krystin back when the brace is ready in about three or four weeks.

They saw Dr. Steege, the pediatric neurosurgeon, this morning and although I don't have his official report the word is that there is not any active intervention planned at this point in regards to her syrinx. He will be monitoring this on an interval basis.

Thank you for the opportunity of participating in Krystin's care.

Best regards,

Mark C. Dales, MD

MCD:rmw

RIC  
LISTS

DEFICIT  
man, MD

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RGERY  
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roctor, MD

FANT FOLLOWUP  
z, MD

DISEASES  
ver, MD  
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URGERY  
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DIOTHORACIC SURGERY  
s, MD, PhD

n, MD  
ID

St.

3104  
15-2700  
2702  
org

**PATIENT:** KRYSTIN M. GARDINER  
**DOB:** 2/2/2002

**11/19/2003** MCD:rmw  
**SEATTLE**

**REASON FOR EVALUATION:**

Krystin's a 21-month-old toddler who is referred for management of infantile scoliosis by Michael Geitz, MD.

**HISTORY OF PRESENT ILLNESS:**

She was noted initially to have some asymmetry by mom at a little over a year of age. She is full term pregnancy, c-section for encephalopelvic disproportion and had no perinatal complications. Her early developmental milestones have been on time. When evaluated by her pediatrician a scoliosis was confirmed and she was referred to Dr. Geitz. He subsequently confirmed the scoliosis radiographically with a 60° left thoracic curve noted. She had an MRI which revealed a syrinx.

Mom has not noticed any deterioration in her apparent coordination or activity. She is not yet potty trained. She does not have a limp or other obvious signs of asymmetry. Her neurologic screening exams have always been normal. She does not have any apparent back pain.

She was seen earlier this morning by Dr. Steege for neurosurgical consultation. His report is not yet available but mom states that he was planning on observation and did not feel the syrinx needed active intervention in the way of decompression at this time. The anticipated plan therefor is for management of her scoliosis with interval rechecks of her syrinx.

**PAST MEDICAL HISTORY:**

Allergies: none. Medications: none. Illnesses: none. Surgeries: Anesthetic for MRI.

**REVIEW OF SYSTEMS:**

Review of systems is otherwise negative per new patient intake sheet.

**FAMILY HISTORY:**

Family history is negative for scoliosis.

**SOCIAL HISTORY:**

Patient lives with mom who is divorced. They live in Anchorage, Alaska.

**PHYSICAL EXAMINATION:**

Krystin is a very cooperative, friendly toddler without dysmorphic features. She is walking and moving about the exam room without any apparent limitations or dyskinesia. She has a mild thoracic hypokyphosis. She has no cutaneous evidence of dysraphism. She has some asymmetry at the waist but overall given her curve magnitude her trunk is well balanced and her clinical deformity is fairly minimal. Forward bending she does not have obvious dyskinesia or

**PATIENT: KRYSTIN M. GARDINER**  
**DOB: 2/2/2002**

**11/19/2003 MCD:rmw**  
**SEATTLE**

discomfort. She has roughly 15° of axial trunk rotation left thoracic. Her neurologic screening appears to be normal still. Her feet are symmetrical and plantigrade. Hips abduct widely and symmetrically. Her limb lengths are equal and she has symmetrical thigh and calf circumference. No obvious spasticity, velocity dependent tone change, clonus, or other long track signs.

**ROENTGENOGRAMS:**

X-ray interpretation: Review of her initial film from August of 2003 shows a 60° left thoracic curve apex at about T9. Her MRI is reviewed and does show an obvious syrinx. In looking at her vertebral formation I don't see an obvious congenital anomaly either in the form of type I or type II lesion.

A new film today, upright PA scoliosis shows her curve remains at 60° apex T9. Overall very well balanced C7 to center sacral line.

**IMPRESSION:**

Infantile scoliosis. I suspect this is more secondary to the syrinx and that mom did not notice it until after a year of age although it is possible this represents an idiopathic infantile scoliosis as well and there is certainly some overlap in those two entities.

We discussed at length the need to control her curvature. She has a good understanding of the situation overall from Dr. Geitz.

**PLAN:**

The plan is to fit her for a Milwaukee brace. A sample of the brace was shown to mom and grandma and overall use and protocol was reviewed. They seemed to accept this well. They will go down later this morning to Madison Tower Orthotics and get molding and fit. We will plan on seeing her back then when the brace is ready for fitting for an in brace check.

Long term it is anticipated that she will need to be in this brace for a quite a number of years if not her whole childhood. We briefly discussed the option that if the brace cannot hold her curve we may need to consider subcutaneous "growing rod" procedure. Dr. Steege will be monitoring her syrinx as well.

We will see Krystin back in about three or four weeks when the brace is ready.

cc: Michael Geitz, MD

dt: 11/28/2003

& TIME

12/22/03 3:00 DONNA FROM DR DALES WALKED DOWN R. PT  
COMING FROM ALASKA NEEDS MOLDING APPT  
FOR CTLSO BEFORE LEAVING TO ALASKA.  
SEEING Dr. DALES 11/19/03 @ 940 APPT E  
Russell 11/19/03 @ 11:00 (MTO)

LAISZ

11/18/03 mold for cTLSO. See Intake, progress note.  
Return 12/17/03 9:30 Dales 11:00  
(Russ & Keith to pt) R. Carlson c.o.b.

MARK C. DALES, M.D.  
Pediatric Orthopedic Surgery  
Scoliosis

1101 Madison St., #510  
Seattle, Washington 98104  
(206) 215-2700

15419 NE 20th, #104  
Bellevue, WA 98007  
(206) 215-2700

Name

KRYSTIN GARDINER

Date

10/22/03

Address

Rx

CTLSO

737.3

☐ Label

Refills - 0 - 1 - 2 - 3 - 4 - PRN

Substitution Permitted

, M.D.

Dispense as Written

, M.D.

**Children's**

Hospital & Regional Medical Center  
SEATTLE, WASHINGTON 98105

OUTPATIENT RECORD

ADDRESSOGRAPH PLATE

CASE NO.

761980

NAME

GARDINER, KRYSTIN  
02/02/2002 OTC  
73946329

B-DATE

PCP: GEITZ, MICHAEL  
C97090



OF

ORTHOTIC/PROSTHETIC PATIENT PROGRESS NOTES

**761980**

PCP: GEITZ, MICHAEL  
C97090

PATIENT **GARDINER, KRYSTIN**  
**02/02/2002** OTC  
**73946329**



OF \_\_\_\_\_

AGE: \_\_\_\_\_ DOB: \_\_\_\_\_ MALE/FEMALE (please circle one)

LOCATION PT. SEEN OTM REQUESTING MD: Dales

DATE PATIENT SEEN: 11-19-03

PRESCRIPTION (RX): CTLSO for scoliosis (infinite)

DIAGNOSIS (DX): 60° (L) thoracic

HISTORY (HX): Pt from Alaska, saw Dr. Dales for scoliosis eval. Sent over a Rx for CTLSO (Milwaukee) to treat scoliosis.

ASSESSMENT (AX): Films show 60° (L) Thoracic curve. Meas taken on scoliosis intake form. Pt very upset/crying, but cooperated

PLAN/PROGES (PX): Fit a Milwaukee in ~4 wks when pt can come from Alaska.

SERVICE (SX): Took mold for Milwaukee. CTLSO

PT. EDUCATION (ED): Describe brace + goals.

RETURN APPOINTMENT (RTN APPT.): 12/17/03 9:30 OTM

PRACTIONER SIGNATURE: [Signature] D.R.  
[Signature] CORO

(Use "NA" if not applicable, Do Not leave anything blank)

# SCOLIOSIS INTAKE

Date Molded 11-19-03

Date Due 12/17/03

## MEASUREMENTS

TLSO

Xyphoid ● 50.5 ▲     

Waist ● 48 ▲ 21

Hip ● 51 ▲ 21

ASIS ● 50 ▲ 21

CTLSO

Neck  
AP 8

ML 9

Chin ↔ SP 30

SN ↔ SP     

CURVE TYPE L thoracic

COBB ANGLE 60°

LOCATION     

RISER SIGN 0

AGE 14.9

Adolescent Growth Spurt

Menarche

Yes ☐

No ☒

Pain

Yes ☐

No ☒

## CLINICAL EVALUATION

Shoulders

Tilt

Clockwise ☐

Counterclockwise ☒

Rotation

Clockwise ☒

Counterclockwise ☐

Decompensation Left ☒ 1 cm

Right ☐

Pelvis level

LLD     

ROM Good

ATR

Thoracic 15°

Lumbar     

Sagittal Plane

Thoracic

Hyperkyphotic

Lumbar     

Pads

Thoracic ☒

axillary sling

Kyphosis ☐

Lumbar ☐

Sternal bar/pad ☐

Oval ☐

Trochanteric ☐

**761980**

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02/02/2002 OTC  
73946329

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OF