



Internal Medicine/Women's Health
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Re: Triller, Ryan
ID no: 828782172
DOB: 7/25/86

To Whom It May Concern:

I have the pleasure of serving as the internist for Ryan Trines since February of 2005. I have seen him regularly since that time. I am writing for an emergency appeal for a recent denial of his home nursing care.

Ryan has an extraordinary medical history which began at birth with severe hypoxic brain injury, resulting in severe cerebral palsy, autonomic dysfunction, spastic quadriparesis, and sleep apnea. Ryan requires 24 hour nursing care for several reasons. He has dysautonomia which manifests as tachycardia/bradycardia. He wears a 24 hour heart monitor which may alarm several times a day. List nurses assess him for bradycardia, know how to stimulate him to get the heart rate back up, and know when to call 911 when he gets too low.

He also wears a 24 hour pulse oximeter because of his sleep apnea. Ryan frequently becomes apneic and has to have his oxygen levels adjusted. Because he is at risk for CO2 retention with his severe encephalomalacia and his chronic apnea, oxygen titration cannot be done by family members.

Ryan has had multiple bowel surgeries for chronic distention of the stomach as well as severe reflux. His feeding schedule needs frequent adjustments depending on his inputs and outputs for the days. He also needs strict attention to his bowel regimen with digital stimulation each evening. In addition to the strict feeding schedule, Ryan requires precision with his free water. He has been given the presumptive diagnosis of diabetes insipidus and his free water schedule also needs careful titration.

Ryan has neurogenic bladder with frequent incontinence. Because he is mostly non-verbal, his cues are subtle, but they are evident to the nurses who know him well.

When Ryan is hospitalized, he is placed in the stepdown unit or ICU regardless of his admitting diagnosis because he must have one to one nursing care at all times, whether he's in or out of the hospital.

In short, Ryan has absolutely no chance of survival without 24 hour nursing care. He was not expected to live beyond infancy. He has made it to the age of 20 years with

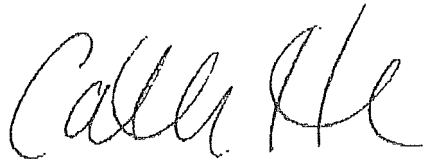
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intense treahrrent *by 24 hoar* nursing. He absolutely needs to maintain the level of service *that* has been *provided*.

I am happy to address any further questions that may arise.

Sincerely,



Catherine Hermann, M.D.