

██████████ M.D.
██████████
██████████

30 June 2006

Dear Sir or Madam:

1. Thank you for the opportunity to evaluate ██████████. Enclosed is my preliminary medical evaluation of Mr. ██████████ a summary of my findings, the resources utilized during my evaluation, and my opinion on the matter. Mr. ██████████ was examined at the facilities of the ██████████. A fourth year medical student, ██████████, was in attendance for the evaluation.

I. Qualification of examiner

██████████ I am a licensed physician in the State of Georgia. I completed medical school at the ██████████. I have recently completed my training in ██████████. I will be joining the ██████████.

II. Pertinent background and summary of reported symptoms

3. ██████████ is a 36 year-old male from ██████████. He described four events in his life with pertinent physical health consequences related to his asylum application. ██████████ reported that Episode #1 occurred in ██████████, at which time he was arrested and detained for two days after attempting to stop the demolition of his church. He reported that was held in a prison cell and beaten three times daily for two days (six beatings total). He reports that the beatings lasted approximately 10-20 minutes each. He states that he was repeatedly kicked and punched to his back, chest, abdomen, and extremities.
4. ██████████ reported that Episode #2 occurred in ██████████ after he was stopped by the police for being on the streets after curfew. He stated that he was held in a prison cell overnight and was beaten by two policemen. He reported that he, again, was kicked and punched to his back, chest, and extremities. He states that he sustained lacerations to his right knee and suffered lumbar back pain for several days after this event. Additionally, he reports that he was slapped several times by the police officers to his right ear. He states that he suffered decreased hearing in that ear for approximately two weeks, which subsequently resolved.
5. ██████████ reported that Episode #3 occurred in ██████████, when he was involved in missionary work in ██████████. At this time, he reports being

arrested for 8 hours by the police after he was beaten by local villagers. He reported being held between the hours of 2pm and 10pm. He reported, again, being kicked and punched repeatedly by the police to his back, chest, abdomen, and extremities. He stated that he was beaten with truncheons and was forced to lie on a table in the prison cell, at which time the soles of his feet were beaten with a truncheon for approximately 30 minutes. Additionally, he reported that he was forced to hold his distal right forearm in an open flame. He reported having to be treated with medications by a physician in [REDACTED] after being released. He stated that he had severe bruising and muscle aches that lasted three days after his release. He stated that he sustained redness, swelling, and blistering to his distal forearm after being burned.

6. Mr. [REDACTED] reported that Episode #4 occurred in [REDACTED] of [REDACTED]. He states that the police at this time forcibly came into his home and beat him in front of his wife. He stated that they pointed their guns at him, and that he was kicked and punched in his head and all over his body and was beaten with truncheons. He reported being beaten with a gun to his head, sustaining three lacerations and losing consciousness for an unknown period of time.

III. Medical examination and current health condition

7. Mr. [REDACTED] denies any past medical history preceding the aforementioned events. He denies any history of traumatic injury or accidental trauma. He has no past surgical history. He denies any significant family medical history. He denies smoking, alcohol, or drug use. He denies taking any medications, except when prescribed to him during the above-described treatment in [REDACTED] [REDACTED]. He denies any allergies to medications.
8. An extensive review of systems was performed. He complains of chronic headaches that occur at least one to two times weekly and are accompanied by flashes of light and decreased peripheral vision. He complains of chronic back pain and neck pain. He reports having short-term memory deficits occurring after the events described above. He complains of generalized fatigue. He states that he has difficulty making a full inspiratory effort. All other systems were reviewed and negative.
9. Physical Examination:
 - a. **Head-ears-eyes-nose-throat:** Normocephalic, atraumatic. Tympanic membranes were clear bilaterally. Neck was supple, nontender, with full range of motion.
 - b. **Neurological:** Cranial nerves II-XII were grossly intact. Extraocular movements were intact. Strength was intact and equal throughout both his upper and lower extremities. Deep tendon reflexes and sensation to light touch were intact throughout. Gait was normal.

- c. **Chest:** Normal inspection, easy work of breathing equal rise bilaterally, no rashes or deformity were noted to the chest wall. Lungs were clear to auscultation bilaterally with no wheezes, rales, or rhonchi. He did have mild tenderness to palpation of his sternum. Additionally, he did have some mild tenderness to palpation of his left 8th and 9th ribs laterally with some irregularity of his ribs noted at that site.
- d. **Back:** Normal inspection, no rashes or other lesions noted. Mr. Negut was tender to palpation in the area of the 1st and 2nd thoracic vertebrae.
- e. **Cardiovascular:** Regular rate and rhythm. No jugular venous distension or peripheral edema noted.
- f. **Abdomen:** Positive bowel sounds, soft, nondistended, and nontender to palpation.
- g. **Skin:** Several well-healed scars were noted. **1.** Approximately 0.75 inch linear scar to his posterior occiput. Well-healed, difficult to visualize in photograph (figure 1), but is easily palpable on exam. **2.** Approximately 0.5 inch linear, well-healed scar to the left forehead (figure 2). **3.** Approximately 0.5 inch scar noted to the mid right eyebrow. Linear and well-healed (figure 3). **4.** Distal right forearm shows well-demarcated, well-healed, irregularly pigment scar with noted decreased hair growth over the burn area. Measures approximately 3 by 3 inches at the greatest diameter (see figures 4 and 5). **5.** Two well-healed scars to the right anterior knee over the area of the patella noted, one is linear and horizontal over the superior aspect of the patella, approximately 0.5 inch in length, and the other vertical and over the mid patella, extending approximately 0.5 inches in length.
- h. **Musculoskeletal:** All joints were nontender, no deformities were noted. He had full range of motion noted in all joints.

IV. Medical Opinion

- 10. Regarding reliability of the interview, my impression is that Mr. [REDACTED] was a reliable historian.
- 11. Mr. [REDACTED] has several scars that he reports having sustained during the events described above. The scars on his face and scalp are consistent with previous lacerations that could have plausibly been caused by either direct physical blows or by a blunt instrument such as a gun or a truncheon. Also, he reports being forced to hold his forearm over an open flame and describes sustaining second degree burns to that area. The pigmentation and scar distribution noted above is consistent with a healed burn scar. All scars described appear to be of the appropriate age in relation to when he sustained the reported injuries.
- 12. Mr. [REDACTED] reports having difficulty with full chest excursion after having sustained the injuries described above. The etiology of this is unclear, and the differential diagnosis includes numerous causes, including traumatic arthritis, old rib fractures, costochondritis, pleurisy, or other lung disorders.

13. Mr. [REDACTED] reports having chronic headaches with associated visual changes that began after he was reportedly beaten and lost consciousness. Additionally, he reports a decline in his short-term memory after the incident. These findings are consistent with postconcussive syndrome, which is a range of symptoms suffered by some patients after they have sustained a concussion. The symptoms can last a lifetime after the injury. Given Mr. Negut's description, it is reasonable to conclude that his symptoms are consistent with his description of having had a significant head injury, as he described above in June 2002.

14. Taking the cumulative physical findings into account, I find that Mr. Negut's medical condition is highly consistent with the history of persecution described.

Thank you again for the opportunity to examine Mr. [REDACTED]. Please contact me if I may be of any additional assistance in this case. I declare under penalty of perjury that the foregoing is true and correct.

[REDACTED] M.D

Figure 1



Figure 2



Figure 3



Figure 4



Figure 5



Figure 6

