

Misc Medical Correspondence

Subj: **RE: startling new medical symptom of Doug Copp**
 Date: 10/6/2007 5:44:46 PM Atlantic Daylight Time
 From: monicarrillo11@hotmail.com
 To: paulinacopp@aol.com

Hi Doug

Thank you for your message. I hope things are well for you and Paulina.

Your Dr is right about his approach, most of the times this visual symptoms are associated to a separation of the vitreous from the retina, which in most cases doesn't cause major problems but it's usually a good idea to get it checked since in some cases may indicate a tear in the retina.

As I may have told Paulina we're out of town with Horacio's family (who are visiting from Colombia) for the whole week and weekend. Unfortunately I'll be unable to check you this weekend.

I would strongly advice that if the symptom persists (flashing lights, shadows, big shower of floaters, visual field defects) you go through emergency at the regional hospital and mention that I recommended that you see the ophthalmologist any time you got this symptoms immediately. This weekend one of my colleages ophthalmologist is on call and could sort this out for you in no time.

If you decide to wait, I will be happy to see you again next week, my office will reopen on tuesday morning, come anytime..

Please keep me posted.

Take care

Monica

From: Paulinacopp@aol.com
 Date: Fri, 5 Oct 2007 21:25:38 -0400
 Subject: Fwd: startling new medical symptom of Doug Copp
 To: monicarrillo11@hotmail.com

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--Forwarded Message Attachment--

From: AmerRescue@aol.com
 Date: Fri, 5 Oct 2007 21:21:49 -0400
 Subject: startling new medical symptom of Doug Copp
 To: AmerRescue@aol.com; Paulinacopp@aol.com

Hi Doug:

I think you are probably experiencing either a posterior vitreous separation or a an ocular migraine. These are usually benign, self-limiting conditions where flashes of light appear at the periphery of the visual field, unaccompanied by pain or visual distortion (other than where the flashes of light are happening). It is almost certainly not related to WTC injuries.

There is a chance you might be experiencing separation of the vitreous from the retina, a retinal tear. This can be repaired by laser if occurring, but usually the flashes of light come without separation. It is important to have a dilated exam to make sure you are not experiencing a retinal tear. So be sure to run this past your ophthalmologist. Soon!

Subj: **FW: Attached Image**
Date: 12/02/2009 10:13:58 A.M. Atlantic Standard Time
From: Shelley Leblanc@gasha.nshealth.ca
To: paulinacopp@aol.com

Hi Paulina,

Here are the attached images.

I require Doug and yourself as a witness to sign and date the release of information form to discuss Doug's case with a GI specialist at Saint Martha's Regional Hospital in Antigonish, and you can fax it back to me with Attn: Shelley LeBlanc, to 902-625-2078.

I had discussion with Doug about potatoes, and to avoid the more starchy ones such as baking/yukon, but to choose more waxy potatoes such as round red or round white.

If you have further questions, don't hesitate to email or call at the contact below. Once I have received your release of information form, I will contact Dr. Periera to discuss Doug's case, that probably won't be until next week, and then I will email you to set a time to call Doug back if you don't mind.

Thanks in advance!~
Shelley

Shelley LeBlanc, P.Dt.
Dietitian
Strait Richmond Hospital

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shelley.leblanc@gasha.nshealth.ca

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From: SRH Administration Canon [canonSRH_scans@gasha.nshealth.ca]
Sent: Wednesday, February 11, 2009 11:15 AM
To: Leblanc, Shelley
Subject: Attached Image=

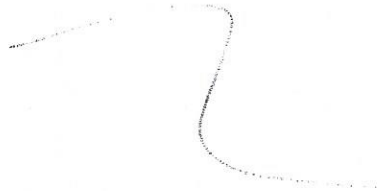
FAX TRANSMITTAL

sent
@ 12:11
Feb/12/09

To: Shelky LeBlanc
Fax: 902-635-2078
From: DOUG COFF
Date: Feb/12/09
RE: Release of Info.

of pages including this one 2

Thank you for ~~your~~ everything



HEALTH/CLIENT RECORD EXHIBIT A-1-120

GUYSBOROUGH ANTIGONISH STRAIT DISTRICT HEALTH AUTHORITY
25 BAY STREET, ANTIGONISH, NS B2G 2G5

CONSENT TO "RELEASE INFORMATION TO" OR "OBTAIN INFORMATION FROM"

I give permission to DR PERIERA to release

or obtain information on: Full Name: DOUGLAS FINNLEY COPP

Date of Birth: 03/08/1951 Health Card # 0011427564 Unit # SR 00043482
d m y (if required)

INFORMATION TO BE RELEASED:

- Discharge Summary
- History & Physical
- Operative Report
- X-Ray Report / Film
- Consultation Report
- Tissue Report
- Outpatient/Emergency Report

TYPE DATE TAKEN

Other information to be released (Specify): DR PERIERA

Information to be released to/or obtained from ↓ for
purpose of discussing patient's GI system
(the purpose or need for this information)

Feb 17 09
Date

[Signature]
Patient / Client or Representative
(if someone other than patient, please state relationship to patient)

Feb/2/09
Date

[Signature]
Witness

Date

Attending Physician/Alternate (where applicable)

The "Consent to Release or Obtain Information" is valid until 12/02/10
d m y

I hereby release the facility/program, its employees and attending physician(s) from any and all claims whatsoever which may arise as a result of the release of the above information. I do have the right to void this release at any time.

Original signatures, only, can be considered acceptable authorization for such requests.