BLACKBURN CLINIC

Association Of Independent Medical Practitioners

195 Whitehorse Road, Blackburn, Victoria, 3130 Telephone 9875-1111 Fax 9875-1100 Please note NEW POSTAL ADDRESS:

PO Box 42, Blackburn South, Victoria, 3130

This practice encourages secure email communication between medical professionals via HealthLink: EDI = blackbun

Please consider as electronically signed any soft copy communication.

Dr Andrew Broad Dr Peter Lovass Dr Grant Connoley Dr Robert Rametta Dr Sean Das Dr Ann Donaghy Dr Peter Elliott Dr Emma Fehmel Dr Scott Gardiner Dr Elise Harrison Dr Melanie Hattotuwa Dr Christopher Ineson Dr Yeganeh Khavar Dr Alvin Kong

Dr Suzanne Ashdown

Dr Praba Ratnarajah Dr Claire St John Dr Jasdeep Sandhu Dr Adrian Tang Dr Terence Ting Dr Siobhan Trivers Dr Yashar Zadeh Dr Aaron Zhang Dr Samuel See Dr Jonathon Telianidis

Dr Janice Kreltszheim

Mr Bryden Dawes Level 5, 182 Victoria Parade East Melbourne 3002 Tel: (03) 9663 5399 Fax: (03) 9663 5299

16/09/2025

Dear Bryden,

Mrs LEIMORE CUNNINGHAM Re:

16/07/1946

20 EUGENIA STREET NUNAWADING 3131 0433 557 797

Thank you for seeing Mrs LEIMORE CUNNINGHAM, 79 yrs, for your opinion and management. She presented with 3 months of lumbar radiculopathy symptoms (See initial consult notes below). Subsequent MRI showed Baastrup's disease along with disc degenerative disease. Her symptoms are persisting and in this context your input would be greatly appreciated.

Presenting Problem(s):

- 1. Right leg symptoms
- · 3-month history of right leg numbness, heaviness, and tingling
- · Symptoms predominantly affect right thigh to right foot, particularly on inside aspect of foot
- · Some difficulty walking and balance issues
- · Symptoms worsen with prolonged sitting
- · Condition deteriorating, with August being worst month
- · Recent severe episodes on Friday and Sunday
- · During episodes:
- Foot becomes heavy
- · Requires assistance to walk
- · Needs to point toes down to grip floor
- Must wait for symptoms to settle or massage affected area
- Pertinent negatives:
- No urinary difficulties
- No bowel incontinence
- Walking generally tolerable except during episodes
- Saw myotherapist who thinks L4/5 compression

Past History as recorded:

1997	ASTHMA	first presentatn admitted to BHH
03/05/1999	Oesophagitis	,
01/03/2001	UTI - recurrent	
08/10/2001	Osteoporosis	
02/11/2005	EQUIVOCAL RESULT - SCREENING	
	MAMMOGRAM	
12/05/2010	Hypertension	
12/01/2011	Vitamin D deficiency	
25/05/2015	Vaginal atrophy	

Allergies as recorded:

 $\mbox{{\it mild}}$ right and moderate left neural foraminal stenoses. The central canal appears adequate.

L3/4:

Mild broad based disc bulge and mild bilateral facet joint degeneration, without evidence of associated stenosis.

L4/5:

Mild broad based disc bulge and moderate right and mild left facet joint degeneration, without evidence of associated stenosis.

L5/S1:

Severe bilateral facet joint degeneration, otherwise unremarkable.

Conclusion:

1. Moderate multilevel lumbar disc degenerative disease, as described. This is most prominent at L1/2 where there is severe bilateral neural foraminal stenoses. 2. Moderate to severe Baastrup's disease from L1/2 to L4/5. 3. Mild bilateral SIJ degeneration. 4. A possible hepatic cyst has been partially imaged. Further evaluation with abdominal ultrasound is recommended.

Electronically signed by: Dr Daniel Lee at 10:55 AM Fri, 12 Sep 2025

Yours sincerely,

Dr Terence Ting MBBS(Hons), B.Physio(Hons), FRACGP 474236AK

Current Medications as recorded

Flixotide 250 CFC-Free 250mcg Inhaler Ostelin Vitamin D 1000IU Gel Capsule

Prolia 60mg/mL Injection

Ventolin CFC-Free 100mcg/dose Inhaler Ventolin Nebules 5mg/2.5mL Solution

1 Inhalation In the morning.

2 Capsules Daily.

1-2 Every 4 hours.

1 neb Every 4 hours p.r.n.

Investigations

Cunningham, Leimore

20 Eugenia Street, NUNAWADING VIC.

Medicare Number: 3112374582 Birthdate: 16/07/1946 Sex: F

Birthdate: 16/0//1570

Your Reference: 64.703804

Lab Reference: Find

Referred by: Dr Terence Ting

Name of Test: CT Lumbosacral Spine - no contrast

Requested: 09/09/2025 Collected: 12/09/2025 Laboratory: Imaging Associates Reported: 12/09/2025 10:07

Patient ID: 64.703804

Order: 64.1933838 1 Dr Terence Ting

Folio: UR Number:

ID: 64.703804 CUNNINGHAM, Ms Leimore Patient Details:

DOB: 16/07/1946 Gender: F Acc No: 64.1933838

20 Eugenia Street NUNAWADING VIC UR Number:

3131

DR T TING COPIES TO: Report To:

Suite 2, 195 Whitehorse Road

BLACKBURN VIC 3130

Friday, 12 September 2025 Exam Date:

Imaging Associates Mitcham Site:

Private Hospital

Address: 27 Doncaster East Road Mitcham

VIC 3132

Phone: 0388733600

CT LUMBOSACRAL SPINE

Clinical Notes:

Three months of right sided pain from hip region to medial foot with paraesthesia. ? Nerve root compression.

Technique:

Non-contrast scan from T11 to S3.

Report:

Accentuated lumbar lordosis, normal AP alignment. Mild curvature of the lower lumbar spine convex right centred at L4/5. Moderate degenerative endplate changes throughout the lumbar spine, with loss of disc height at T12/L1. The other disc heights and vertebral body heights are preserved. Moderate to severe interspinous degenerative change (Baastrup's disease) from L1/2 to L4/5.

No fractures or destructive osseous lesions. Mild bilateral SIJ degeneration. Mild calcification of the abdominal aorta and bilateral iliac arteries. A possible hepatic cyst has been partially imaged, which measures at least 19mm in size.

T12/I.1:

Mild broad based disc bulge and moderate bilateral facet joint degeneration, without evidence of associated stenosis.

Mild broad based disc bulge and mild bilateral facet joint degeneration causes severe bilateral neural foraminal stenoses. The central canal appears adequate.

L2/3: