

**Jacques J. Morcos, M.D., FRCS (Eng), FRCS (Ed)**

Professor of Clinical Neurosurgery and Otolaryngology  
Specializing in Cerebrovascular and Skull Base Tumor Surgery

December 13, 2011

Roy Heflin  
8968 Prince Jayme Drive  
Boynton Beach, FL 33436

**Re : Roy Heflin**  
**CSN: 27506644**  
**DOB: 1/5/1952**

To Whom it May Concern:

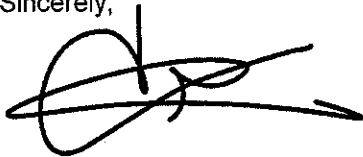
I am the neurosurgeon who has now consulted on Mr. Heflin twice, one time in September and again today. I had extensively studied his case; he has a very complex intracranial Type IV dural fistula that still needs to be treated. This is a very risky lesion that threatens to cause a devastating brain hemorrhage if it is not treated. He only had an attempt at treating it and it was only a partial treatment by Dr. Duong at Memorial Regional Hospital in Hollywood, Florida who embolized it back in May 2011. He now has recurrence of his headaches, neck pain and inability to walk too far. His course has been complicated by pulmonary embolism and bilateral asynchronous DVTs, deep venous thrombosis of the legs. He had an IVC filter placed in July 2011 and he has been on Coumadin since. He has not had any more flare ups of his DVTs.

I am hoping that we can proceed as soon as possible with an outpatient diagnostic angiogram to see what state of fistulization his brain is in and then as a second step proceed with a planning of the final treatment, which almost certainly will involve craniotomy to divide the venous arterialized leptomeningeal system and possibly skeletonize his sigmoid sinus. He and his wife understand the plan.

Mr. Heflin may not return to work until the angiogram is completed and the second phase of his craniotomy is performed.

If you have any further questions, please feel free to contact me.

Sincerely,



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Professor of Clinical Neurosurgery and Otolaryngology  
Department of Neurological Surgery

JJM:iiv

Cc: Dr. Widdows  
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