

DR. DIANNE HAYDON
BOARD MEMBER

5

August 1, 2006

TO: State of Arizona
Board of Chiropractic Examiners
5060 N. 19th Avenue, Suite 416
Phoenix, AZ 85015
Attn: Charles Brown, Investigator
Deputy Director

This letter is submitted as a complaint against the chiropractor whose name appears on the enclosed copy of a patient record, who allowed the original of the enclosed full or partial patient record to be placed in the public domain, revealing significant personal, private information about this specific patient as can be seen from the document itself.

This complaint is being made anonymously. It is quite clear where the original of this document came from. If you are holding a copy of it, then the chiropractor did not properly protect it.

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No one else has been contacted about this matter to date. The copy enclosed is document number 1001.

Thank you for your attention, and anticipated professional corrective action.

Anonymous

Data exposed:

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Patient Name | <input type="checkbox"/> Patient DOB | <input type="checkbox"/> Insurance data |
| <input type="checkbox"/> Patient Address | <input type="checkbox"/> Patient SSN | <input checked="" type="checkbox"/> Treatment Cost |
| <input checked="" type="checkbox"/> Patient Telephone # | <input checked="" type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

DIANNE HAYDON, D.C.

HAYDON, DIANNE

Tuesday, June 27, 2006

| Time | Name | Phone | Length | Notes |
|-------------------------------|------------------------------------|-----------------|--------|---------------------------------------|
| Tuesday, June 27, 2006 | | | | |
| 2:00p | L [REDACTED], R [REDACTED] D | [REDACTED]-2443 | 15 | benies 10% cp \$10 acu |
| 2:00p | B [REDACTED], T [REDACTED] K | [REDACTED]-1204 | 15 | \$15 cp, \$10 acu, \$1200 yr max |
| 2:00p | M [REDACTED], M [REDACTED] L | [REDACTED]-7805 | 15 | \$10 20 visits per yr 10.00 acu |
| 2:15p | W [REDACTED], J [REDACTED] | [REDACTED]-4160 | 15 | 20%coins A9170 |
| 2:15p | K [REDACTED], T [REDACTED] L | [REDACTED]-6501 | 15 | \$25cp, \$10acu, \$1200 max |
| 2:15p | B [REDACTED], L [REDACTED] F | [REDACTED]-9533 | 15 | |
| 2:30p | H [REDACTED], M [REDACTED] R | [REDACTED]-9452 | 15 | |
| 2:45p | S [REDACTED], S [REDACTED] | [REDACTED]-2171 | 30 | NP WEBS |
| 2:45p | NP | | 30 | |
| 3:30p | P [REDACTED], T [REDACTED] | [REDACTED]-3319 | 15 | |
| 3:45p | P [REDACTED], L [REDACTED] A | [REDACTED]-7427 | | |
| 3:45p | A [REDACTED], J [REDACTED] | [REDACTED]-7427 | | |
| 4:00p | T [REDACTED], J [REDACTED] | [REDACTED]-7427 | | REALITY... \$100... \$100... |
| 4:00p | [REDACTED] | [REDACTED] | | |
| 4:30p | A [REDACTED], J [REDACTED] | [REDACTED]-1187 | | NP MEDICAL REPAIR DR MONSON |
| 4:30p | NP | | | |
| 5:00p | [REDACTED], [REDACTED], [REDACTED] | [REDACTED]-247x | 15 | benies 20% coins A9170 |
| 5:00p | L [REDACTED], R [REDACTED] A | [REDACTED]-9147 | | |
| 5:00p | P [REDACTED], J [REDACTED] | [REDACTED]-488x | | |
| 5:30p | M [REDACTED], N [REDACTED] | [REDACTED]-9645 | 30 | benies 25% coins A9170 \$10 PER VISIT |
| 5:30p | NP | | | NP DR DR MONSON |

[REDACTED]

August , 2006

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Anonymous

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|--|---|---|
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| <input type="checkbox"/> Patient Telephone # | <input checked="" type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

Patient SOAP Notes

D [redacted], **L** [redacted] **DOB:** [redacted] / 1939 **SSN:** [redacted]

SOAP Date 10 / 13 / 2005

S Low back pain on left for last 7-8 months. Got better and then came back. Saw doctors at First Chiropractic in Tucson April 2 x for several weeks and was fine, then back again and last time was seen was Monday. Did not bring Xrays but has them. Treated with side posture and heat and electric. Ice didn't help. Riding in the car moving up here was bad but one month ago didn't bother. Sleep fine. Mornings are OK. Was moving when it first came on. Also had an ankle injury, torn ligament, no casting but a surgery was recommended, he hasn't done it but is no longer favoring it. Dull ache currently 5/10.

Good health otherwise. No medication.
Sx: none but had a kidney stone 1992

Family: HTN: no Diabetes: no HD: yes father died but he also smoke and had rheumatic fever. CA: no Arthritis: no MOM had RA but not severe. Mother died of old age and enlarged 89.
No smoke, alc: 2-3 /wk, exercise: not since hurt ankle. Has a bike and bow flex time machine

O ht: 5' 5" wt: 187 pulse: 72 temp: 96.3 resp: 20 BP Rt: 100/80 BP Lt: 91/60 Valsalva maneuver is negative. Patient can heel walk and toe walk though he does have ankle discomfort with total walk. Lower extremity DTRs are intact. He has some hamstring tightness but full forward flexion and pulling pain in the left lumbosacral spine during this motion. No pain arising from flexion but slight pain as we move into extension. Increased pain with left lateral flexion and with left Kemp maneuver but no radicular involvement into the leg. SLR bilaterally is negative but there is hamstring tightness. Gaenslen's is negative bilaterally. Palpation reveals tenderness with fixation over the left lumbosacral articulation with a slight trigger point activity into the gluteal muscle around the sacroiliac joint. There is left L4-L5 and right sacroiliac subluxation, grade 2 hypertonicity and the left Q. L. musculature

A Lumbar subluxation
lumbar strain

P Patient was treated with high posture CMT achieving very good release followed by 10 minutes of moist heat and electric muscle stimulation into the lumbar paraspinal muscles. He signed a release of the so that I may obtain his records from first chiropractic in Tucson. He will follow-up with us on a p.r.n. basis. I rechecked his blood pressure the right side is 120/78. The left is 116/60. Advice and there is no need for concern regarding his blood pressure.

Dianne Haydon, DC, DABCO

CHARGES: _____

NEW ONSET DATE: _____

NEW DIAGNOSIS: 1. _____ 2. _____
3. _____ 4. _____
5. _____ 6. _____

TREATMENT PLAN: _____

TABLE:

August 27, 2006

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Anonymous

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|--|---|---|
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| <input type="checkbox"/> Patient Telephone # | <input checked="" type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

Patient SOAP Notes

V [redacted], A [redacted] D DOB: [redacted] 1985 SSN: GH

SOAP Date 06 / 02 / 2006

Subjective

Objective ht: 5'1" wt: 106 pulse: 76 temp: 97.1 resp: 16 BP Rt: 80/50 BP Lt: 75/50

Assessment

Procedures

Dianne Haydon, DC, DABCO

JUN 02 2006 CHARGES: 1, 16, 20x

NEW ONSET DATE: _____

NEW DIAGNOSIS: 1. _____

2. _____

3. _____

4. _____ Ex 8m -

6. _____ Ex 8m -

TREATMENT PLAN 2x - 2wks

TABLE: _____

PRECAUTIONS: _____

DR

Any alterations need legends

August 22, 2006

TO: State of Arizona
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Deputy Director

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Anonymous

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| <input checked="" type="checkbox"/> Patient Telephone # | <input checked="" type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

DIANNE HAYDON, D.C.

HAYDON, DIANNE

Tuesday, July 18, 2006

| Time | Name | Phone | Length | Notes |
|-------------------------------|-----------------------------------|-----------------------|--------|---|
| Tuesday, July 18, 2006 | | | | |
| 8:00a | CLOSED | | 30 | |
| 8:15a | T ██████████, J ██████████ | (928) ██████████-1039 | 15 | PER DR. MONSON, COURT PATIENT |
| 8:30a | S ██████████, R ██████████ | (928) ██████████-3108 | 15 | A9170, \$10 acu |
| 8:45a | T ██████████, M ██████████ L | (928) ██████████-4368 | 30 | REACT \$10 cp, \$10 acu, |
| 8:45a | REACT | | 30 | |
| 9:15a | W ██████████, J ██████████ | | 30 | NP, REQ DR MONSON |
| 9:15a | NP | | 30 | |
| 9:45a | G ██████████, J ██████████ | (928) ██████████-7061 | 30 | NP, CASH, REQ DR MONSON Is |
| 9:45a | NP | | 30 | |
| 10:15a | C ██████████, A ██████████, I | (928) ██████████-7795 | 15 | \$10 cp, \$10 acu |
| 10:30a | T ██████████, M ██████████, M | (928) ██████████-9100 | 30 | 20% COINS, \$10 ACU WAVE O/V CHARGE ALWAYS PT |
| 10:30a | REACT | | 30 | |
| 11:15a | IL ██████████, A ██████████, C | (928) ██████████-2244 | 15 | 0 cp \$10 acu, BILL THERAPIES |
| 11:45a | S ██████████, R ██████████ | (928) ██████████-3140 | 15 | CERVICAL CASE A-9170 |
| 12:00p | LUNCH | | 120 | |
| 2:00p | C ██████████, E ██████████, J | (928) ██████████-3164 | 15 | A9170, \$10 acu |
| 2:00p | H ██████████, K ██████████, C | (928) ██████████-5554 | 15 | \$50 cp, \$10 acu, GF covered, 20 visit max |
| 2:15p | S ██████████, JR, R ██████████, B | (928) ██████████-8402 | 15 | 20% coins, A9170 for therapies |
| 2:30p | G ██████████, J ██████████ | (928) ██████████-3436 | 15 | |
| 2:45p | K ██████████, D ██████████, I | (928) ██████████-9228 | 30 | REACT |
| 2:45p | REACT | | 30 | |
| 3:15p | I ██████████, D ██████████ | ██████████-5695 | 15 | W/C |
| 3:30p | H ██████████, J ██████████ | (928) ██████████-7155 | 15 | |
| 4:00p | N ██████████, S ██████████, L | (928) ██████████-6710 | 30 | REACT benies \$10 cp, \$10 acu, 20 visits per yr (R |
| 4:00p | REACT | | 30 | |
| 4:30p | L ██████████, J ██████████, R | (928) ██████████-4194 | 15 | |
| 4:30p | D ██████████, H ██████████, K | (928) ██████████-1975 | 15 | 1x \$30 ov, 20% of therapies after \$500 ded, \$10 |
| 5:15p | K ██████████, S ██████████, M | ██████████-1950 | 15 | 10% cp 1500.00max |
| 5:30p | V ██████████, N ██████████ | (928) ██████████-5082 | 15 | HAVE PT SIGN CASH POLICY, MAINT PLAN |
| 5:30p | H ██████████, J ██████████ | (928) ██████████-2262 | 15 | CASH, MAINT PLAN |

August 1, 2006

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Patient: N [REDACTED] D [REDACTED]

DOB: [REDACTED]-1984

Date: 7-3-2006

Chief Complaint: Patient complains of Headaches, neck, mid back pain.

History of Present Illness: The pain began two days ago. She was at a complete stop and she was rear-ended by another vehicle that hit her and ran. She was wearing her seatbelt. No air bags deployed. She states she was gripping the steering wheel with both hands at 10 and 2. She was aware that the accident was going to happen and braced for the impact. She has pain sitting causes immediate pain in the neck. She has pain in her neck all of the time and she has been getting headaches daily since the accident. She rates her pain at 5/10 VAS in her neck and the headache today. She states that the headache decreases as the day goes on.

Medications: Ambien as needed to sleep.

Allergies: None.

Social History: Currently living at home working for the Real estate broker

Family History: Mother has fibromyalgia.

Surgical History: Tonsilectomy 2004.

Significant Illnesses: None.

Review of Systems:

Vitals: BP:120/70 Right 120/70 left Pulse: 86 bpm strong and regular Respiration: 16 bpm
Temperature: 98.0

Cardiovascular: Heart sounds regular.

Lungs: Clear to auscultation.

Musculoskeletal:

Cx arm decreased flexion 40, ext 10, RLF 10, LLF 5, Rrot 42, Lrot 50. Georges is negative for dizziness and nystagmus. Sotohall is negative for lhermites. Cx compression is positive for cervical pain local no radiation. Max cervical compression is positive bilat for cervical and upper trap pain ipsilateral to the test, no radiation down the arms. No audible bruits in the subclavian or carotid arteries. Up and low ext DTR are 2+/4 bilat and muscle strengths are 5/5 bilat.

Palpation: Palpable pain and spasm 3+/4 of the cx paras. levator scaps, middle scalenes, SCM, upper traps, ty paras, lumbar paras, QL, and glute meds all bilaterally. Palpable pain and spasm 3+/4 of the wrist flexors, pronator teres, and brachial radialis muscles bilat. Palp restriction of

C1 right, C3 left, C6 right, T4 right, T6 left, L2 right, L5 left.

Skin: No visible bruising or skin lesions.

Summary and Impression: We have a female who is experiencing headache, neck, mid back, pain which began following an auto accident on 7-1-2006.

1. Cx st/sp
2. Tx st/sp
3. Cervicogenic headache

Treatment: She was treated with CMT supine to the cervical, and thoracic spine. EMS to thoracic spine ten minutes with heat. IFC to the cervical spine bilat for ten minutes. Acupuncture to BL pts 18, 19, T2-6 as well. She felt some mild relief after the treatment.

Recommendations PTR times a week 3 weeks.

E. Shayne Monson, D.C.
not edited

August 11, 2006

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DIANNE HAYDON, D.C.

HAYDON, DIANNE

Thursday, July 20, 2006

| Time | Name | Phone | Length | Notes |
|-------------------------|--|-----------------|--------|--|
| Thursday, July 20, 2006 | | | | |
| 8:00a | C [REDACTED] | | 60 | |
| 9:00a | B [REDACTED] R [REDACTED] | [REDACTED]-0828 | 15 | CASH |
| 9:00a | C [REDACTED] R [REDACTED] | [REDACTED]-9699 | 15 | |
| 9:00a | U [REDACTED] C [REDACTED] | [REDACTED]-2817 | 15 | A9170 |
| 9:00a | W [REDACTED] J [REDACTED] | [REDACTED]-2265 | 15 | |
| 9:15a | NP | | 30 | |
| 9:45a | R [REDACTED] J [REDACTED] W | [REDACTED]-9643 | 15 | 10.00 cp 20 visits per yr |
| 9:45a | S [REDACTED] D [REDACTED] S [REDACTED] | [REDACTED]-1057 | 15 | \$40cp. \$10 acu afer ded |
| 10:00a | D [REDACTED] S [REDACTED] J [REDACTED] | [REDACTED]-5424 | 15 | A9170 |
| 10:15a | G [REDACTED] D [REDACTED] | [REDACTED]-4953 | 15 | \$10 CP, \$10 acu, 20 VISITS PER YR |
| 10:15a | G [REDACTED] D [REDACTED] | [REDACTED]-4953 | 15 | \$10 CP, 20 VISITS PER YR, \$10 ACU |
| 10:15a | G [REDACTED] J [REDACTED] | | 15 | \$10 CP, 20 VISITS PER YR, \$10 ACU |
| 10:30a | M [REDACTED] S [REDACTED] | [REDACTED]-9637 | 30 | REACT, NEW INS |
| 10:30a | R [REDACTED] | | 30 | |
| 11:00a | M [REDACTED] K [REDACTED] D [REDACTED] | [REDACTED]-8113 | 15 | \$10acu. 20% of therapies after \$2500 ded |
| 11:15a | L [REDACTED] A [REDACTED] C [REDACTED] | [REDACTED]-2244 | 15 | 0 cp \$10 accu. BILL THERAPIES |
| 11:30a | B [REDACTED] D [REDACTED] R [REDACTED] | [REDACTED]-1559 | 15 | |
| 12:00a | LUNCH | | 120 | |

August 17, 2006

TO: State of Arizona
Board of Chiropractic Examiners
5060 N. 19th Avenue, Suite 416
Phoenix, AZ 85015
Attn: Charles Brown, Investigator
Deputy Director

This letter is submitted as a complaint against the chiropractor whose name appears on the enclosed copy of a patient record, who allowed the original of the enclosed full or partial patient record to be placed in the public domain, revealing significant personal, private information about this specific patient as can be seen from the document itself.

This complaint is being made anonymously. It is quite clear where the original of this document came from. If you are holding a copy of it, then the chiropractor did not properly protect it.

The original of this document was found in or about the waste disposal container(s) associated with the chiropractor's office, on or about 8/10/06. In some cases piles of documents relating to patients and their treatment were strewn about the area and this document was retrieved from the street. To this day, this chiropractor's office disposes of its patient records in similar fashion.

The patient's personal information on the original patient record, including variously the patient name, date of birth, social security number, address, telephone number, insurance data, credit card numbers, cost of treatment and medical record of treatment has been partially removed from this copy so as to avoid the patient's personal information being exposed to the public... again. The chiropractor involved will surely recognize the patient name from the data remaining on the copy.

As you are well aware, given the warnings you issue, the reason for state and federal laws, not to mention your agency's own disciplinary sanctions and rules for determining loss of license for such unethical and improper behavior, is to avoid a patient's private, personal information from getting into the hands of identity thieves and others with bad intent, among other professional reasons for protecting such information. Identity thieves, and others, regularly target doctors', lawyers' and other offices to obtain this kind of information and use it to ruin people's financial and personal lives.

Clearly the chiropractor involved is not sensitive to these issues, and should be punished. Your agency's website states that every single complaint that is filed with your office is investigated. As a member of the public I trust this one will get the same attention and scrutiny as any other.

No one else has been contacted about this matter to date. The copy enclosed is document number 336.

Thank you for your attention, and anticipated professional corrective action.

Anonymous

Data exposed:

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Patient Name | <input type="checkbox"/> Patient DOB | <input type="checkbox"/> Insurance data |
| <input type="checkbox"/> Patient Address | <input type="checkbox"/> Patient SSN | <input checked="" type="checkbox"/> Treatment Cost |
| <input checked="" type="checkbox"/> Patient Telephone # | <input checked="" type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

DIANNE HAYDON, D.C.

HAYDON, DIANNE

Wednesday, June 28, 2006

| Time | Name | Phone | Length | Notes |
|---------------------------------|---|-----------------------|--------|--|
| Wednesday, June 28, 2006 | | | | |
| 8:00a | CLOSED | | 30 | |
| 8:30a | H [REDACTED], N [REDACTED] E | (928) [REDACTED]-0251 | 15 | MAINTENANCE PLAN, CASH |
| 8:30a | D [REDACTED], F [REDACTED] H | (928) [REDACTED]-6429 | 15 | ROF, XRAY REPORT A9170 |
| 8:30a | G [REDACTED], P [REDACTED] A | (928) [REDACTED]-7028 | 15 | A9170 -- PAT TO PAY FOR VERNES ACCT 1000! |
| 8:45a | K [REDACTED], D [REDACTED] | (928) [REDACTED]-4871 | 15 | A9170, acu \$10 |
| 8:45a | R [REDACTED], D [REDACTED] | (928) [REDACTED]-3316 | 15 | |
| 8:45a | L [REDACTED] M [REDACTED], K [REDACTED] | (928) [REDACTED]-1337 | 15 | 20% coins therapies \$10 acu \$1000 max |
| 9:00a | P [REDACTED], D [REDACTED] | | 15 | NP, CASH UNWILLING TO GIVE INFO |
| 9:00a | NP | | 30 | |
| 9:30a | V [REDACTED], D [REDACTED] W | (928) [REDACTED]-1717 | 15 | A9170 |
| 9:30a | W [REDACTED], J [REDACTED] R | [REDACTED]-0456 | 15 | A9170 & coins, GI not covered |
| 9:30a | B [REDACTED], D [REDACTED] P | (928) [REDACTED]-2426 | 15 | P.I. |
| 9:45a | M [REDACTED], J [REDACTED] | (928) [REDACTED]-4798 | 15 | |
| 9:45a | B [REDACTED], J [REDACTED] W | (928) [REDACTED]-5740 | 15 | |
| 9:45a | H [REDACTED], M [REDACTED] | (928) [REDACTED]-4425 | 15 | \$10 ep; \$10 acu, per DR. H |
| 10:00a | K [REDACTED], J [REDACTED] | (928) [REDACTED]-5279 | 15 | A9170 |
| 10:15a | M [REDACTED], M [REDACTED] A | (928) [REDACTED]-5130 | 15 | EXERCISES |
| 10:15a | EXERCISES | | 15 | |
| 10:30a | S [REDACTED], V [REDACTED] M | | 15 | A9170 |
| 10:30a | C [REDACTED], C [REDACTED] C | (928) [REDACTED]-2949 | 15 | W.C. |
| 10:30a | M [REDACTED], C [REDACTED] | (928) [REDACTED]-8940 | 15 | CASH |
| 10:45a | P [REDACTED], J [REDACTED] E | (928) [REDACTED]-6193 | 30 | REACT |
| 10:45a | REACT | | 30 | |
| 11:15a | B [REDACTED], E [REDACTED] | (928) [REDACTED]-7920 | 15 | 10% therap. \$10acu, 20 visits per yr on 2nd. TO SEE |
| 11:15a | EXRAYS | | 15 | |
| 11:30a | A [REDACTED], C [REDACTED] D | (928) [REDACTED]-9384 | 15 | BENIES |
| 11:30a | G.T. | | 15 | |
| 11:45a | S [REDACTED], C [REDACTED] E | (928) [REDACTED]-0965 | 15 | 20%, A9170 |
| 11:45a | S [REDACTED], L [REDACTED] J | (520) [REDACTED]-0965 | 15 | 20% coins A9170 |
| 12:00p | LUNCH | | 120 | |
| 1:45p | D [REDACTED], S [REDACTED] | (928) [REDACTED]-5435 | 15 | A9170 waver m/c ded |
| 2:00p | F [REDACTED], M [REDACTED] G [REDACTED] | (928) [REDACTED]-5144 | 15 | |
| 2:00p | H [REDACTED], T [REDACTED] S | (928) [REDACTED]-4531 | 15 | |
| 2:00p | R [REDACTED], S [REDACTED] | (928) [REDACTED]-2905 | 15 | |
| 2:15p | R [REDACTED], L [REDACTED] | (928) [REDACTED]-7734 | 15 | \$20 ep |
| 2:15p | EXTRA TIME ACCL. | | 15 | |

August 29, 2006

TO: State of Arizona
Board of Chiropractic Examiners
5060 N. 19th Avenue, Suite 416
Phoenix, AZ 85015
Attn: Charles Brown, Investigator
Deputy Director

This letter is submitted as a complaint against the chiropractor whose name appears on the enclosed copy of a patient record, who allowed the original of the enclosed full or partial patient record to be placed in the public domain, revealing significant personal, private information about this specific patient as can be seen from the document itself.

This complaint is being made anonymously. It is quite clear where the original of this document came from. If you are holding a copy of it, then the chiropractor did not properly protect it.

The original of this document was found in or about the waste disposal container(s) associated with the chiropractor's office, on or about 07/21/2006. In some cases piles of documents relating to patients and their treatment were strewn about the area and this document was retrieved from the street. To this day, this chiropractor's office disposes of its patient records in similar fashion.

The patient's personal information on the original patient record, including variously the patient name, date of birth, social security number, address, telephone number, insurance data, credit card numbers, cost of treatment and medical record of treatment has been partially removed from this copy so as to avoid the patient's personal information being exposed to the public... again. The chiropractor involved will surely recognize the patient name from the data remaining on the copy.

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Clearly the chiropractor involved is not sensitive to these issues, and should be punished. Your agency's website states that every single complaint that is filed with your office is investigated. As a member of the public I trust this one will get the same attention and scrutiny as any other.

No one else has been contacted about this matter to date. The copy enclosed is document number 261.

Thank you for your attention, and anticipated professional corrective action.

Anonymous

Data exposed:

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Patient Name | <input type="checkbox"/> Patient DOB | <input checked="" type="checkbox"/> Insurance data |
| <input type="checkbox"/> Patient Address | <input type="checkbox"/> Patient SSN | <input checked="" type="checkbox"/> Treatment Cost |
| <input checked="" type="checkbox"/> Patient Telephone # | <input type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

DIANNE HAYDON, D.C.

HAYDON, DIANNE

Wednesday, July 19, 2006

| Time | Name | Phone | Length | Notes |
|---------------------------------|------------------------------|-----------------------|--------|---|
| Wednesday, July 19, 2006 | | | | |
| 8:00a | CLOSED | | 30 | |
| 8:15a | H [REDACTED], N [REDACTED] E | (928) [REDACTED]-9251 | 15 | MAINTENANCE PLAN, CASH |
| 8:15a | T [REDACTED], J [REDACTED] | (928) [REDACTED]-4088 | 15 | 20% coins A9170 |
| 8:30a | D [REDACTED], F [REDACTED] H | (928) [REDACTED]-6429 | 15 | A9170 |
| 8:30a | B [REDACTED], L [REDACTED] | (928) [REDACTED]-3335 | 15 | |
| 8:30a | B [REDACTED], B [REDACTED] | (928) [REDACTED]-3335 | 15 | MAINTENANCE PLAN |
| 8:45a | A [REDACTED], W [REDACTED] O | (928) [REDACTED]-9387 | 15 | \$20 cp |
| 8:45a | G [REDACTED], W [REDACTED] | (928) [REDACTED]-3484 | 15 | |
| 9:00a | R [REDACTED], P [REDACTED] | (928) [REDACTED]-3777 | 30 | NP, CIGNA |
| 9:00a | NP | | 30 | |
| 9:30a | C [REDACTED], R [REDACTED] | (928) [REDACTED]-1873 | 15 | |
| 9:30a | D [REDACTED], J [REDACTED] D | (928) [REDACTED]-3219 | 15 | |
| 9:30a | I [REDACTED], S [REDACTED] | (928) [REDACTED]-1838 | 15 | BENIES 20% AFTER DED 10.00 ACU |
| 9:45a | F [REDACTED], N [REDACTED] | (928) [REDACTED]-2481 | 30 | NP, MEDICAREX. (ls) |
| 9:45a | NP | | 30 | |
| 10:15a | W [REDACTED], P [REDACTED] A | (928) [REDACTED]-3650 | 15 | A-9170 |
| 10:15a | D [REDACTED], M [REDACTED] | (928) [REDACTED]-5135 | 15 | A 1970, \$10 acu |
| 10:15a | W [REDACTED], J [REDACTED] R | [REDACTED]-0456 | 15 | A9170 & coins, GT not covered |
| 10:30a | R [REDACTED], R [REDACTED] | | 15 | o cp until benefit fund exhausted, fund of \$1500 |
| 10:30a | R [REDACTED], B [REDACTED] J | (928) [REDACTED]-7213 | 15 | A9170 |
| 10:30a | H [REDACTED], H [REDACTED] | (928) [REDACTED]-2573 | 15 | 20% + A9170 |
| 10:45a | S [REDACTED], G [REDACTED] D | (928) [REDACTED]-2972 | 15 | NP arizona foundation bk |
| 10:45a | NP | | 30 | |
| 11:15a | S [REDACTED], J [REDACTED] | (520) [REDACTED]-8857 | 15 | A9170 |
| 11:15a | T [REDACTED], J [REDACTED] | (520) [REDACTED]-2390 | 15 | \$15 CP, \$10 ACU, Max # visits 10 per yr |
| 11:30a | V [REDACTED], D [REDACTED] W | (928) [REDACTED]-1717 | 15 | A9170 |
| 11:30a | V [REDACTED], K [REDACTED] L | (928) [REDACTED]-1717 | 15 | A9170 |
| 11:45a | H [REDACTED] | (928) [REDACTED]-4679 | 15 | 1 X \$30 CP 20% THERAPIES, \$10 ACU |
| 11:45a | M [REDACTED], C [REDACTED] | (928) [REDACTED]-8940 | 15 | CASH |
| 12:00p | LUNCH | | 120 | |
| 2:00p | C [REDACTED], G [REDACTED] A | (928) [REDACTED]-3702 | 15 | \$15 cp, \$10 acu |
| 2:00p | C [REDACTED], W [REDACTED] | (928) [REDACTED]-2171 | 15 | |
| 2:00p | K [REDACTED], C [REDACTED] L | (928) [REDACTED]-4531 | 15 | |
| 2:15p | C [REDACTED], G [REDACTED] A | (928) [REDACTED]-2370 | 15 | |
| 2:30p | G [REDACTED], J [REDACTED] M | (928) [REDACTED]-0884 | 15 | |
| 2:30p | R.O.F. | | 15 | |
| 2:45p | P [REDACTED], B [REDACTED] J | (928) [REDACTED]-7492 | 30 | NP CASH bk |
| 2:45p | NP | | 30 | |

Printed 7/19/2006 7:56 am

August 2, 2006

TO: State of Arizona
Board of Chiropractic Examiners
5060 N. 19th Avenue, Suite 416
Phoenix, AZ 85015
Attn: Charles Brown, Investigator
Deputy Director

This letter is submitted as a complaint against the chiropractor whose name appears on the enclosed copy of a patient record, who allowed the original of the enclosed full or partial patient record to be placed in the public domain, revealing significant personal, private information about this specific patient as can be seen from the document itself.

This complaint is being made anonymously. It is quite clear where the original of this document came from. If you are holding a copy of it, then the chiropractor did not properly protect it.

The original of this document was found in or about the waste disposal container(s) associated with the chiropractor's office, on or about 7/28/06. In some cases piles of documents relating to patients and their treatment were strewn about the area and this document was retrieved from the street. To this day, this chiropractor's office disposes of its patient records in similar fashion.

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As you are well aware, given the warnings you issue, the reason for state and federal laws, not to mention your agency's own disciplinary sanctions and rules for determining loss of license for such unethical and improper behavior, is to avoid a patient's private, personal information from getting into the hands of identity thieves and others with bad intent, among other professional reasons for protecting such information. Identity thieves, and others, regularly target doctors', lawyers' and other offices to obtain this kind of information and use it to ruin people's financial and personal lives.

Clearly the chiropractor involved is not sensitive to these issues, and should be punished. Your agency's website states that every single complaint that is filed with your office is investigated. As a member of the public I trust this one will get the same attention and scrutiny as any other.

No one else has been contacted about this matter to date. The copy enclosed is document number 246.

Thank you for your attention, and anticipated professional corrective action.

Anonymous

Data exposed:

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Patient Name | <input type="checkbox"/> Patient DOB | <input type="checkbox"/> Insurance data |
| <input type="checkbox"/> Patient Address | <input type="checkbox"/> Patient SSN | <input checked="" type="checkbox"/> Treatment Cost |
| <input checked="" type="checkbox"/> Patient Telephone # | <input checked="" type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

DIANNE HAYDON, D.C.

HAYDON, DIANNE

Tuesday, July 18, 2006

| Time | Name | Phone | Length | Notes |
|-------------------------------|------------------------------|-----------------------|--------|--|
| Tuesday, July 18, 2006 | | | | |
| 8:00a | CLOSED | | 30 | |
| 8:15a | T [REDACTED], J [REDACTED] | (928) [REDACTED]-1039 | 15 | PER DR. MONSON, COURT PATIENT |
| 8:30a | S [REDACTED], R [REDACTED] | (928) [REDACTED]-3108 | 15 | A9170, \$10 acu |
| 8:45a | T [REDACTED], M [REDACTED] | (928) [REDACTED]-4368 | 30 | REACT \$10 cp, \$10 acu, |
| 8:45a | REACT | | 30 | |
| 9:15a | NP | | 30 | |
| 9:45a | G [REDACTED], J [REDACTED] | (928) [REDACTED]-7061 | 30 | NP, CASH, REQ DR MONSON is |
| 9:45a | NP | | 30 | |
| 10:30a | T [REDACTED], M [REDACTED] M | (928) [REDACTED]-9100 | 30 | 20% COINS, \$10 ACU WAVE O/V CHARGE ALWAYS PH |
| 10:30a | REACT | | 30 | |
| 11:45a | N [REDACTED], R [REDACTED] | (928) [REDACTED]-3140 | 15 | CERVICAL CASE A-9170 |
| 12:00p | LUNCH | | 120 | |
| 2:15p | D [REDACTED], B [REDACTED] K | (928) [REDACTED]-1975 | 15 | 1x \$30 ov, 20% of therapies after \$500 ded, \$10 |
| 2:30p | O [REDACTED], J [REDACTED] | (928) [REDACTED]-3436 | 15 | |
| 2:45p | K [REDACTED], D [REDACTED] L | (928) [REDACTED]-9228 | 30 | REACT |
| 2:45p | REACT | | 30 | |
| 3:15p | T [REDACTED], D [REDACTED] | [REDACTED]-5695 | 15 | W/C |
| 3:30p | H [REDACTED], J [REDACTED] | (928) [REDACTED]-7155 | 15 | |
| 4:00p | REACT | | 30 | |
| 4:30p | L [REDACTED], J [REDACTED] R | (928) [REDACTED]-4194 | 15 | |
| 5:30p | V [REDACTED], N [REDACTED] | (928) [REDACTED]-5082 | 15 | HAVE PT SIGN CASH POLICY, MAINT PLAN |
| 5:30p | B [REDACTED], J [REDACTED] | (928) [REDACTED]-2262 | 15 | CASH, MAINT PLAN |

August 14, 2006

TO: State of Arizona
Board of Chiropractic Examiners
5060 N. 19th Avenue, Suite 416
Phoenix, AZ 85015
Attn: Charles Brown, Investigator
Deputy Director

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This complaint is being made anonymously. It is quite clear where the original of this document came from. If you are holding a copy of it, then the chiropractor did not properly protect it.

The original of this document was found in or about the waste disposal container(s) associated with the chiropractor's office, on or about 7/11/06. In some cases piles of documents relating to patients and their treatment were strewn about the area and this document was retrieved from the street. To this day, this chiropractor's office disposes of its patient records in similar fashion.

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Clearly the chiropractor involved is not sensitive to these issues, and should be punished. Your agency's website states that every single complaint that is filed with your office is investigated. As a member of the public I trust this one will get the same attention and scrutiny as any other.

No one else has been contacted about this matter to date. The copy enclosed is document number 157.

Thank you for your attention, and anticipated professional corrective action.

Anonymous

Data exposed:

| | | |
|--|--|---|
| <input type="checkbox"/> Patient Name | <input type="checkbox"/> Patient DOB | <input type="checkbox"/> Insurance data |
| <input type="checkbox"/> Patient Address | <input type="checkbox"/> Patient SSN | <input type="checkbox"/> Treatment Cost |
| <input type="checkbox"/> Patient Telephone # | <input type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

DIANNE HAYDON, D.C.

2139 AIRWAY
KINGMAN, AZ 86401
(928)757-2800

| Statement Date | Chart Number | Page |
|----------------|-----------------|------|
| 06/26/2006 | [REDACTED] R001 | 1 |

B [REDACTED] S. A [REDACTED]
[REDACTED] AZ 85242

Make Checks Payable To:
DIANNE HAYDON, D.C.
2139 AIRWAY
KINGMAN, AZ 86401
(928)757-2800

| | | Previous Balance: | | 0.00 | | | |
|----------|------------------------------|-----------------------|-----------------|-----------------------|-------------------|-------------|-----------|
| Patient: | B [REDACTED] S. A [REDACTED] | Chart Number: | [REDACTED] R001 | | | | |
| Case: | 1/19/06 GH | Date of Last Payment: | 6/16/2006 | Amount: -15.00 | | | |
| Dates | Procedure | Charge | Paid by Primary | Applied to Deductible | Paid By Guarantor | Adjustments | Remainder |
| 04/12/06 | CMT1-2 SPINAL | 35.00 | -6.88 | | | -13.12 | 15.00 |

THIS BALANCE IS YOUR
INSURANCE CO-PAY.
PLEASE PAY IN FULL

| |
|------------|
| Amount Due |
| 15.00 |

August 29, 2006

TO: State of Arizona
Board of Chiropractic Examiners
5060 N. 19th Avenue, Suite 416
Phoenix, AZ 85015
Attn: Charles Brown, Investigator
Deputy Director

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This complaint is being made anonymously. It is quite clear where the original of this document came from. If you are holding a copy of it, then the chiropractor did not properly protect it.

The original of this document was found in or about the waste disposal container(s) associated with the chiropractor's office, on or about 10-30-06. In some cases piles of documents relating to patients and their treatment were strewn about the area and this document was retrieved from the street. To this day, this chiropractor's office disposes of its patient records in similar fashion.

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Clearly the chiropractor involved is not sensitive to these issues, and should be punished. Your agency's website states that every single complaint that is filed with your office is investigated. As a member of the public I trust this one will get the same attention and scrutiny as any other.

No one else has been contacted about this matter to date. The copy enclosed is document number 35.

Thank you for your attention, and anticipated professional corrective action.

Anonymous

Data exposed:

Patient Name
 Patient Address
 Patient Telephone #

Patient DOB
 Patient SSN
 Treatment Details

Insurance data
 Treatment Cost
 Other

HAYDON

Jan...
Employer:
Date of Loss: September 19, 1992

Wysocki:

request, I reviewed the submitted medical file of J. P. [REDACTED] with regard to the job injury that reportedly occurred on September 19, 1992.

In the body of the report, your specific interrogatories will be addressed.

REVIEW:

Working records were personally reviewed:

St. Joseph's Health Care Center office notes, February 1, 1999 through February 6, 2005. The initial visit on February 1, 1999 indicates that the reason for the injury was that Mr. P. [REDACTED] fell 12 feet off of a machine at work at [REDACTED] plant. The date of the injury is not listed. The pain and location was "Lower back, right and left legs fall asleep." The entrance form indicates that Mr. Cohen has taken care of [REDACTED] back for eight years." It is stated that the condition started in 1991, and it is constant. There are no details of the injury other than that he fell 12 feet off a machine at work. The date of the injury is not given.

There were 26 visits in 1999 and 16 visits in 2000, with a hiatus in treatment from [REDACTED] 2000 to November 3, 2000.

fracture in the lumbar spine, whether fresh or old, the MRI scout film. If Mr. P [REDACTED] had a compression fracture or any other type of fracture in the lumbar spine, it could not have been serious; otherwise, it would have been evident on the MRI scout film.

It is noted in Dr. Haydon's letter of June 20, 2005, to Employer's Insurance Company at Wausau, that Mr. P [REDACTED] had a chronic permanent residual of the lumbar spine but not describe the nature of the disability.

On a reasonable degree of medical certainty, Mr. P [REDACTED] diagnosis is myofascial pain syndrome of the lumbar spine, most likely related to activities of daily living and normal activities of bending and lifting throughout the course of the day.

In the entrance form dated February 1, 1999, Mr. P [REDACTED] stated that he fell 12 feet. In the interview at Williams Surgical Center, he states that he fell six feet. This is a significant discrepancy in the description of the fall. It is noted also that the nerve conduction studies of the lower extremities performed on February 19, 2001 were normal.

Neither Dr. Schrimsher nor Dr. Haydon provide any rationale for a causal relationship between Mr. P [REDACTED] treatment starting in 1999 through the present with the fall that occurred in 1990 and 1991.

As noted above, there has been no causal relationship established between the injury of 1990 or 1991 or the recurrence of pain on September 19, 1992, and the present treatment Mr. P [REDACTED] is receiving. There are no neurologic deficits as shown by EMG studies and no pressure from the herniated disc or spinal stenosis as evidenced by the MRI study. Typically, after a sprain of the lumbar spine

HAYDON

AKOTA DIVISION OF
ND MANAGEMENT
ERNORS DR
D 57501-2291

NOTICE OF DENIAL OF
LIABILITY

[Redacted]
s Name)

State File No.: [Redacted] 5592

entennial HC #39
dress)

Insurer's File No.: WC 868-347360

A2 86401
(Zip)

and hereby denies liability for benefits to the above-
following reasons:

λ.

HAYDON



October 4, 2005

Anne Haydon DC
Airway Ave
Tucson AZ 86401

Employee: J [REDACTED] P [REDACTED]
Date of injury: 09-19-1992
Date of birth: [REDACTED]-1964
Insurance number: WC868-347360
Company: Art Advantage Inc.

RECEIVED OCT 17 2005

...ensation. It is

August 30, 2006

TO: State of Arizona
Board of Chiropractic Examiners
5060 N. 19th Avenue, Suite 416
Phoenix, AZ 85015
Attn: Charles Brown, Investigator
Deputy Director

This letter is submitted as a complaint against the chiropractor whose name appears on the enclosed copy of a patient record, who allowed the original of the enclosed full or partial patient record to be placed in the public domain, revealing significant personal, private information about this specific patient as can be seen from the document itself.

This complaint is being made anonymously. It is quite clear where the original of this document came from. If you are holding a copy of it, then the chiropractor did not properly protect it.

The original of this document was found in or about the waste disposal container(s) associated with the chiropractor's office, on or about 6/16/2006. In some cases piles of documents relating to patients and their treatment were strewn about the area and this document was retrieved from the street. To this day, this chiropractor's office disposes of its patient records in similar fashion.

The patient's personal information on the original patient record, including variously the patient name, date of birth, social security number, address, telephone number, insurance data, credit card numbers, cost of treatment and medical record of treatment has been partially removed from this copy so as to avoid the patient's personal information being exposed to the public... again. The chiropractor involved will surely recognize the patient name from the data remaining on the copy.

As you are well aware, given the warnings you issue, the reason for state and federal laws, not to mention your agency's own disciplinary sanctions and rules for determining loss of license for such unethical and improper behavior, is to avoid a patient's private, personal information from getting into the hands of identity thieves and others with bad intent, among other professional reasons for protecting such information. Identity thieves, and others, regularly target doctors', lawyers' and other offices to obtain this kind of information and use it to ruin people's financial and personal lives.

Clearly the chiropractor involved is not sensitive to these issues, and should be punished. Your agency's website states that every single complaint that is filed with your office is investigated. As a member of the public I trust this one will get the same attention and scrutiny as any other.

No one else has been contacted about this matter to date. The copy enclosed is document number 59.

Thank you for your attention, and anticipated professional corrective action.

Anonymous

Data exposed:

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Patient Name | <input type="checkbox"/> Patient DOB | <input checked="" type="checkbox"/> Insurance data |
| <input checked="" type="checkbox"/> Patient Address | <input checked="" type="checkbox"/> Patient SSN | <input type="checkbox"/> Treatment Cost |
| <input type="checkbox"/> Patient Telephone # | <input type="checkbox"/> Treatment Details | <input type="checkbox"/> Other |

KOTA DIVISION OF
IND MANAGEMENT
ERNORS DR
D 57501-2291

NOTICE OF DENIAL OF
LIABILITY



[Redacted]
s Name)

State File No.: 549- [Redacted]

[Redacted]
ress)

Insurer's File No.: WC 869- [Redacted]

A2 86401
ate) (Zip)

reby notified that the undersigned hereby denies liability for benefits to the above-
mant under the Workers' Compensation Law for the following reasons:

As on the attached report by Dr Dean Redington DC,
ing chiropractic care is not related to [Redacted]
'2 work related injury.

this denial is being sent to the claimant as notification that he she has two (2)
the date of this notice to file a Petition for Hearing with the Division of Labor
y.

s Name: Wausau Insurance Companies

Signed: [Signature]

Dated: 10-04-05

id one copy to Department of Labor
Claimant
Policyholder
File