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The Medical Center at the University of California, San Francisco



Herbert C. Moffitt Hospital
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UCSF Children's Medical Center
Langley Porter Psychiatric Hospital
Ambulatory Care Center
Herbst Emergency Service

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To Whom It May Concern:

I am writing this letter at the request of Mr. Steven Sakac, whose son, Tony, has been my patient in the General Medicine Clinic at UCSF Medical Center since November 1993. His care was transferred from the Adolescent Medicine Clinic when Tony turned 20 years old. Tony is now 21 years old.

Tony suffers from severe neurological disabilities secondary to a viral encephalitis illness in December 1990. After a long acute hospitalization, it was recommended that Tony receive custodial care at Laguna Honda Hospital. It appeared that Tony's prognosis was very poor, and that allocation of extensive resources toward Tony's rehabilitation was not appropriate. Tony's father, Mr. Sakac, however, would not believe that Tony's prognosis was so poor and took it upon himself to care for his son at home and structure his own rehabilitation program for Tony. With funds garnered from private donations through diligent and tireless effort, and minimal services provided from state agencies, Mr. Sakac has masterminded an impressive program for his son, including acupuncture therapy, somatic therapies, bodywork massage therapy, chiropractic therapy, and home teaching. With very little assistance he provides excellent daily care and feeding for Tony. Because of this kind of loving care, Tony has not required hospitalization or even medical visits for common illnesses in the last year or so.

Even more impressive is the progress Tony has made toward rehabilitation beyond what doctors, specialists, and therapists thought was possible. This progress continues to provide hope for those who know and care for Tony.

I have spoken with or met most of the individuals that work closely with Tony and recently saw him during an office visit. Observing him in my office, it was clear to me that Tony is cognizant of and responsive to his environment and he appears to be actively participating in his own rehabilitation. It also became clear to me that while Mr. Sakac may have his difficulties and frustrations in fighting for resources for his son's recovery, he does, in fact, utilize these resources appropriately and to full advantage.

All of Tony's teachers and therapists report continued progress. In January of 1994 Tony began to swallow for the first time since his illness and now takes 8 oz. of Gerber juice by mouth with a spoon every night. This has seemed to help Tony's progress and make him more alert. In July of 1994, Tony began to stand for 3 hours on crutches with little support and without the use of a tilt table. His father no longer needs to use a lift to transfer Tony from the bed to the wheelchair. He places the wheelchair next to the bed, stands Tony on his feet, and transfers him to the wheelchair. Since Tony has started to stand on his own feet, he has become more active and alert and takes more fluids by mouth. In January of 1994, his father took Tony on an airplane trip to Canada. This was the first time since his illness that Tony had been able to take a trip, indicating that he can now safely travel. He continues to progress in his physical therapy on the tilt table and be more alert, responsive, and communicative.

I feel confident that Mr. Sakac will put to good use any and all resources that can be obtained for the care and rehabilitation of his son, Tony. He especially needs his own transportation vehicle, as existing community options provide only the most minimal service, and Mr. Sakac's energetic program includes being able to take Tony out of the home for basic needs and therapeutic sessions as well as for the stimulation of mind and spirit that the beautiful Bay Area can provide.

I hope this information will be helpful to Tony and his father.

Sincerely,

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