

Cover Letter

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August 5, 2025

Clerk of Court  
Washington State Court of Appeals, Division I  
600 University Street, 26th Floor  
Seattle, WA 98101

RE: Refiling of 5th through 9th Motions to Supplement Record — Appellate Case No.  
86389-4

Dear Clerk,

This cover letter accompanies my refiling of the 5th through 9th Motions to Supplement the Petition for Review in the above-referenced matter. These motions were previously submitted via the appellate portal but were rejected on procedural grounds, as they were not routed back to Division I where the underlying denials occurred.

The attached Motions are now being properly refiled with Division I in accordance with the guidance provided by the Washington Supreme Court on August 4, 2025. Each motion addresses newly discovered material evidence or corrects structural voids in the adjudication process that materially affect the outcome of this case.

These include but are not limited to:

- The introduction of the January 7, 2018 Virginia Mason spine MRI interpreted by Dr. Kathleen Fink, which timestamps permanent structural injury and disproves the "sprain" theory that formed the basis of the July 7, 2023 denial.
- Ongoing constitutional violations including silent burden-shifting, exclusion of trauma-confirming evidence, and failure to rebut medical expert testimony.

As authorized under RAP 9.11 and compelled by the structural due process violations outlined in *Arizona v. Fulminante*, I respectfully request that the Court accept these motions and consider them in the interest of justice.

Please confirm receipt of these filings and do not hesitate to contact me with any questions or further instruction.

Dated 5<sup>th</sup> day of August, 2025

  
Aedin Quinn

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August 5, 2025

To:  
Washington State Supreme Court  
Temple of Justice  
415 12th Avenue SW  
Olympia, WA 98501

RE: Notice of Constructive Record Correction and Supplemental Damages

Dear Justices,

**I. NOTICE OF CONSTRUCTIVE RECORD CORRECTION IN SUPPORT OF  
MOTIONS TO SUPPLEMENT (Fifth through Ninth Motions)**

Petitioner Aedin Quinn respectfully submits this Notice to clarify that the Washington Supreme Court, by accepting Petitioner's August 4, 2025 filing containing the dispositive January 7, 2018 Virginia Mason spine MRI report, judicial mandate demand letter & 17 structural voids are constructively correcting the appellate record that was previously incomplete due to omissions by Respondent King County.

Respondent failed to produce this report despite its critical role in evaluating disability. Instead, Respondent pursued a denial based on a "sprain" theory unsupported by medical evidence, while silently shifting the burden of proof. The July 7, 2023 denial order was therefore issued without the dispositive record necessary to adjudicate the claim.

This filing accompanies the Fifth through Ninth Motions to Supplement the Petition for Review and identifies critical evidence and structural defects that render the July 7, 2023 disability denial void from inception.

**II. TIMESTAMPED DISPOSITIVE EVIDENCE OMITTED FROM RECORD**

- The January 7, 2018 Virginia Mason spine MRI confirms structural disc injury, disc height loss, annular tear, and disc protrusion at L5-S1.
- Timestamps Appellant's legal entitlement date to disability and pension rights; its omission constitutes a fatal error that voids the denial of benefits.

**III. SUPPLEMENTAL DAMAGES AND FEDERAL NOTICE**

Because the denial of benefits occurred with knowledge or reckless disregard of this dispositive MRI and corresponding entitlement, and because the appellate process failed to cure the defect, Appellant asserts his right to:

- Retroactive lost wages and disability compensation from January 7, 2018 forward,

- Lifetime disability classification under RCW 51.32.060,
- Permanent Partial Disability (PPD) compensation under RCW 51.32.080,
- Statutory penalties and treble damages under RCW 19.86.090, RCW 4.24.630, and 18 U.S.C. § 1964(c).

Damages include, but are not limited to:

- \$10,000.00 in lost storage contents,
- Over \$25,000.00 in storage arrears and penalties,
- Delay-related losses from inability to litigate Atlanta contractor fraud now subject to federal RICO filing.

#### IV. NOTICE OF PENDING FEDERAL PROCEEDINGS

This correction coincides with filings in the U.S. District Court (Case No. 2:25-cv-01356-JNW), where the same timestamped MRI and structural voids are under review. The Supreme Court is now on notice that the record correction retroactively affirms disability, and that all prior rulings must be reconsidered in light of this dispositive evidence.

Respectfully submitted,

Aedin Quinn  
Plaintiff / Appellant  
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Washington Supreme Court Case No. 1043279  
Court of Appeals 86389-4  
U.S. District Court Case No. 2:25-cv-01356-JNW  
Dated: August 5, 2025



**IN THE SUPREME COURT OF THE STATE OF WASHINGTON**

**Aedin Quinn, Appellant v. No. 1043279 King County, Respondent**

**SEVENTH MOTION TO SUPPLEMENT PETITION FOR REVIEW: VIRGINIA MASON TIMESTAMP MRI REFUTES SPRAIN THEORY & DEFINES SUPREME COURT'S ROLE**

Appellant respectfully files Seventh Motion to Supplement the Petition for Review to emphasize that the fictional "sprain" theory used to deny disability benefits on July 7, 2023, has been timestamped by 1/2018 Virginia Mason spine MRI. This diagnostic evidence was introduced into the record on July 31, 2025, and permanently undermines the factual and legal legitimacy of the July 7, 2023 denial. The Washington Supreme Court's constitutional role is now clearly defined: to reverse the denial and restore earned benefits based on structural due process violations.

**I. TIMESTAMPED TRAUMA VS. NONEXISTENT SPRAIN WINDOW**

1. The Virginia Mason MRI was conducted within six months of the July 27, 2017 injury and documented:
  - Circumferential disc bulge
  - Ligamentum flavum
  - Facet hypertrophy
2. These findings are medically and anatomically incompatible with a soft-tissue sprain and confirm a trauma-linked degenerative injury.
3. No medical report, timestamp, or testimony in the record ever confirmed a sprain diagnosis. The July 7, 2023 denial of disability was issued in reliance on a theory that:
  - Was never disclosed while the record was open
  - Was unsupported by expert testimony
  - Has no date of occurrence, documentation, or diagnostic basis
4. Appellant, through prolonged litigation and out-of-state legal advice, realized there was never a valid or medically identifiable "sprain window" between the date of injury and the 1/12/2018 Virginia Mason MRI. Nothing in the evidentiary record supports any sprain event occurring after January 2018. The absence of any timestamped sprain confirmation—despite trauma-anchored evidence spanning multiple institutions—confirms that the "sprain" theory is a post hoc judicial fiction. It cannot be reconciled with the record.
5. Defendants likely intended to rely on the "sprain" theory through a future IME (Independent Medical Examination) process. That strategy was effectively nullified

once the Virginia Mason 1/12/2018 spine MRI was submitted to the Washington Supreme Court, timestamping the trauma and making any retrospective claim of "sprain" medically indefensible. To date, defendants have not identified when the alleged "sprain" occurred, nor produced any diagnostic imaging or expert report confirming it. This reframes the entire denial as not just baseless, but preemptively neutralized once trauma was timestamped.

6. Dr. Nwosu provided causation testimony confirming Appellant's injury was trauma-linked, his testimony was never rebutted by defendants. The 1/2018 Virginia Mason spine MRI independently corroborates Dr. Nwosu's findings, confirming that trauma-linked structural injury was present within six months of the accident and that there was never medical support for the "sprain" theory. This interaction between unrebutted expert testimony and timestamped imaging extinguishes any reliance on speculative diagnoses and further voids the July 7, 2023 denial.
7. Because the "sprain" theory was never introduced while the evidentiary record was open, Appellant is constitutionally permitted to rebut it upon first opportunity. The submission of the 1/2018 Virginia Mason MRI on July 31, 2025 was both procedurally appropriate and mandated by due process: "sprain" theory wasn't timely disclosed, "sprain" theory ambiguity collapsed now that timestamped trauma has been entered, disability denial can no longer be justified.
8. Appellant experienced "spine fragmenting" and tearing in right side pelvic on or about August 2, 2017 while seated in the transit driver's seat post accident drug test. On October 26, 2017, Dr. Heinen conducted a workers' compensation evaluation and audibly acknowledged right lower back pain when Appellant attempted to touch his toes. Dr. Heinen excused Appellant from work through November 27, 2017 (exhibit 3E), but subsequently refused to order spine MRI. This refusal critically delayed objective trauma documentation. Appellant self-referred to Virginia Mason where trauma was finally timestamped January 2018. Dr. Heinen's conduct directly contributed to the evidentiary gap that was later exploited to float the fictional "sprain" theory.

Virginia Mason spine physician Dr. Curtis elevated his voice to silence Appellant's Virginia Mason's 1/2018 spine MRI questions, Dr Curtis stated L5 spinal fluid "dried out", Appellant rebutted, "spinal fluid leaked out — that's an injury." Dr. Curtis unilaterally returned Appellant to work, Appellant opposed citing subjecting L5 void of spinal fluid to 100,000-lbs of vibration operating a transit coach. Appellant reported Dr Curtis to the Washington Medical Commission on May 9, 2018 (exhibit 3E). On or about February 22, 2018, Seattle Back Clinic's Dr. Haynes finally excused Appellant from work (exhibit 1).

9. The following timeline graphic establishes the documented progression of trauma;

**Timeline of Trauma-Linked Findings:**

- 8/2/2017: "Spine fragmenting, right side pelvic Tearing" (exhibit 57A) sitting in drivers' seat post accident drug test
- 10/26/2017: Dr. Heinen confirms right lower back pain, excuses Appellant (but denies MRI order)
- 1/2018: Virginia Mason MRI confirms disc bulge, ligamentum flavum, facet hypertrophy
- 1/2018 Virginia Mason Dr Curtis & Atlantic Base Chief Tutti Compton advocated to return Appellant to transit operation in opposition to Appellant citing L5 disc void of spinal fluid being subjected to 100,000 lbs of vibration
- 2/22/2018: Seattle Back Clinic (Dr. Haynes) excuses Appellant from work exhibit 1
- Exhibit 3V Appellant reported Dr Curtis to Olympia, Wa Medical Commission
- Dr Ayres & Dr Peterson determined Appellant achieved Maximum Medical Improvement
- 10/2019: Grady X-ray notes irregular right ilium appearance, sequela of trauma
- 1/25/2020: Grady MRI (Exhibit 11) shows trauma-linked degeneration, radiculopathy
- 11/27/2023: Penn Medicine MRI confirms right labral tear
- 2/6/2025: Penn Medicine MRI confirms severe spinal stenosis (linked to prior trauma)

This timeline:

- Destroys any presumption of natural healing
- Shows unbroken continuity of trauma-linked findings supported by multiple institutions
- Makes any "sprain" theory factually unsustainable

## II. SILENT BURDEN SHIFTING CONFIRMED

Appellant discovered through out-of-state legal advice that the burden of proof was silently shifted after the record closed. Defendants never produced a rebuttal report, and the court adopted a fictional diagnosis without affording Appellant a chance to respond. This confirms:

- Institutional entrapment
- Structural due process violations
- Void judgment under *Arizona v. Fulminante*, 499 U.S. 279 (1991)



### III. RELIEF REQUESTED

Appellant self-referred to Virginia Mason after Dr. Heinen refused to order a spine MRI. The 1/2018 Virginia Mason spine MRI timestamped trauma and permanently disproved the baseless "sprain" theory. Although defendants' experts stated on page 11, set 1, that Appellant most likely suffered a "sprain/strain" that would have resolved itself, the Virginia Mason 1/2018 MRI showed no evidence of a transient soft-tissue injury, instead, it documented lasting structural abnormalities consistent with trauma-linked degeneration. The July 7, 2023 denial, grounded in a fictional "sprain" theory, was irreparably voided by Virginia Mason 1/2018 spine MRI report. Appellant was entitled to lost wages and disability benefits as of July 7, 2023. The prolonged litigation that followed was unnecessary, and relief is now constitutionally and factually compelled.

The Supreme Court must reverse the July 7, 2023 disability denial because:

- Trauma has now been timestamped within 6 months of injury.
- The "sprain" theory has no date, no report, and no evidentiary foundation.
- The theory appeared after the record closed and could not be rebutted.
- The record supports reversal as a matter of constitutional law.

### IV. SUPREME COURT'S DUTY

Appellant respectfully demands an immediate award of lost wages and disability retroactive to July 7, 2023. The denial was based on a fictional "sprain" theory with no timestamp, no diagnostic confirmation, and no opportunity for rebuttal. The introduction of the Virginia Mason 1/2018 spine MRI into the record has permanently disproved the factual foundation of the denial and timestamped trauma within the critical six-month post-injury period.

The Washington Supreme Court is constitutionally obligated to reverse the July 7, 2023 disability denial and enforce immediate relief. Delay further entrenches a judicial fiction already rendered void.

Dated this 1<sup>st</sup> day of August, 2025  
Aedin Quinn  
1054 Glenwood Avenue SE  
Atlanta, GA 30316  
(404) 992-1235  
aedinquinn@gmail.com

  
\_\_\_\_\_  
Aedin Quinn

### CERTIFICATE OF SERVICE

I certify that on August 1, 2025, I served a copy of this Seventh Motion to Supplement the Petition for Review on the following party by email and U.S. Mail:

Tylar Edwards  
500 Fourth Avenue, Suite 900  
Seattle, WA 98104  
Email: [tylar.edwards@kingcounty.gov](mailto:tylar.edwards@kingcounty.gov)

Signature: 

## Document info

Result type:	MRI Lumbar Spine
Result date:	Jan 07, 2018, 10:48 a.m.
Result status:	authenticated
Verified by:	Kathleen Fink
Modified by:	Kathleen Fink
Accession number:	9402735

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Patient:	AEDIN QUINN	DOB:	May 01, 1963
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EXAMINATION: MRI of the lumbar spine without contrast. 1/7/2018

COMPARISON: None.

Clinical statement: Exam Reason: low back pain, h/o disc injury, eval for tear/herniation EBM: Lumbar 8 mL gadavist, 0 discarded from a multi dose vial.

TECHNIQUE: Sagittal T1, sagittal T2, sagittal STIR, axial T1 and axial T2 weighted images of the lumbar spine were obtained. No IV contrast.

Findings:

Alignment: Normal.

Marrow: No evidence of marrow infiltrative process. No compression fracture. Modic type II endplate degenerative changes at L5-S1

Disks: Disc desiccation with disc height loss at L5-S1. Findings indicate disc degeneration.

Conus: Normal in appearance. Terminates at L1.

Paraspinous/retroperitoneal regions: Visualized portions unremarkable. Normal appearance of anterior and posterior longitudinal ligaments. No edema in the paravertebral soft tissues and no edema in the interspinous ligaments.

Lumbar spine degenerative changes:



There is mild congenital central stenosis in the mid and lower lumbar spine, with an AP canal diameter on the order of 12 mm.

L1-2: Disk is preserved. No dural compression or neuroforaminal narrowing.

L2-3: Disk is preserved. No dural compression or neuroforaminal narrowing.

L3-4: Circumferential disc bulge with ligamentum flavum and facet hypertrophy. There is mild congenital central stenosis at this level. Mild neural foraminal narrowing.

L4-5: Circumferential disc bulge with ligamentum flavum and facet hypertrophy. There is congenital central stenosis. There is mild dural compression with left greater than right lateral recess narrowing. The left L5 nerve root is contacted and may be compressed in the lateral recess. The right is contacted. Mild bilateral neural foraminal narrowing.

L5-S1: Circumferential disc bulge. There is mild lateral recess narrowing. Mild facet degenerative changes. Moderate right and mild left neural foraminal narrowing.

Visualized lower thoracic spine: No significant finding.

\* Note: The following findings are so common in people without low back pain that while we report their presence, they must be interpreted with caution and in the context of the clinical situation. (Reference --Jarvik et al, Spine 2001)

Findings (prevalence in patients without low back pain)  
Disc degeneration (decreased T2 signal, height loss, bulge) (91%)  
Disc T2 -- signal loss (83%)  
Disc height loss (56%)  
Disc bulge (64%)  
Disc protrusion (32%)  
Annular tear (38%).

Impression:

Congenital lumbar stenosis in conjunction with disc and facet degenerative changes cause mild dural compression at L4-5 with lateral recess narrowing, and mild lateral recess narrowing at L5-S1.

Neural foraminal narrowing is most significant at right L5-S1 where it is moderate.

# AEDIN QUINN - FILING PRO SE

August 05, 2025 - 4:56 PM

## Transmittal Information

**Filed with Court:** Court of Appeals Division I  
**Appellate Court Case Number:** 86389-4  
**Appellate Court Case Title:** Aedin Quinn, Appellant v. King County, Respondent

### The following documents have been uploaded:

- 863894\_Motion\_20250805165546D1775291\_3153.pdf  
This File Contains:  
Motion 1 - Other  
*The Original File Name was Signed Seventh Motion To Leave To Supplement Motion For Review.pdf*

### A copy of the uploaded files will be sent to:

- aedinquinn@gmail.com
- anastasia.sandstrom@atg.wa.gov
- tylar.edwards@kingcounty.gov

### Comments:

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Sender Name: Aedin Quinn - Email: aedinquinn@gmail.com  
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