



Wayne C. Luker, President  
Steven N. Kline, Vice President  
Michael LeFevre, Manager  
Jay W. Blumenthal, Treasurer

1176 Old York Road Abington PA 19001-3713 Telephone: 267-536-1000

## Zoning Hearing Notice

Notice is hereby given that the Zoning Hearing Board of the Township of Abington will hold a meeting as required by the Township's Zoning Ordinance at the Abington Township Administration Building, 1176 Old York Road, Abington, Pennsylvania, on:

**Tuesday, August 16, 2016** at 7:00 p.m., at which time a public hearing will commence on the following application:

**16-23:** This is the application of **Doris & Arnold Globerson**, owners of the property located at 1777 Melmar Road, Huntingdon Valley, Pa. 19006. The applicants have requested a dimensional variance from Section 301.3 of the Zoning Ordinance of the Township of Abington. The applicants seek approval to construct a carport attached to their home that will encroach 15 feet into the required 20 foot side yard setback area.

The property is zoned within the (R-1) Residential District of Ward #2 of the Township of Abington. A copy of the application and site plan are on file with the Planning & Zoning Office and is available for review during normal business hours.

By Order of the Zoning Hearing Board.

Mark A. Penecale  
Planning & Zoning Officer

**Note:** There is a 30 day period after the date the decision is rendered for any and all aggrieved persons to file an appeal in the appropriate court to contest the actions of the Zoning Hearing Board. Applicants that take action on a Zoning Hearing Board Approval during the 30 day appeal period, do so at their own risk. If there are questions that you may have, please feel free to contact the Zoning Officer at 267-536-1014. If you are unable to attend the hearing, written comment may be entered into the record by submitting them in advance of the hearing to the Planning & Zoning Officer.



# Zoning Hearing Board Application

Abington Township, PA

1176 Old York Road, Abington PA 19001, Fax: 215-884-8271, Telephone: 267-536-1000



This application must be accompanied by a minimum of ten (10) copies of the plot plan of the property, prepared and signed by a registered land surveyor or professional engineer. The plan must include lot area, lot dimensions, coverage percentages, existing structures, other improvements, proposed improvements, off-street parking, buffers and all characteristics on the site.

The Undersigned herein makes application for:

- Request for Variance from the Zoning Ordinance.
- Request for a Special Exception as provided by the Zoning Ordinance.
- Appeal from the actions of the Zoning Officer.

1. Name and address of the owner of the land: Phone number: 215-947-2068  
Arnold and Doris Globerson  
1777 Melman RD  
Huntingdon Valley, PA 19006

2. Name and address of the applicant: Phone number: 215-674-5950  
Michael Girard  
Luce Architects  
67 Byberry RD  
Hatboro, PA 19040

3. Name and address of the attorney: Phone number:  
N/A

4. If the applicant is not the owner of the property, list the applicant's interest in filing this application. Example: equitable owner, agent, lessee, etc.  
Hired by Owner

5. Description of the property:

Address/location 1777 Melman RD  
Present use Single Family Residence  
Proposed improvement Car Port

RECEIVED  
JUN 21 2016

BY: .....

**Zoning Hearing Board Application**

Abington Township, PA

1176 Old York Road, Abington PA 19001, Fax: 215-884-8271, Telephone: 267-536-1000



6. State briefly the reasons for which the proposed improvements or use does not meet the requirements of the Zoning Ordinance, and the nature of relief you are seeking:

(See Attached)

7. List the specific section of the Zoning Ordinance upon which the application for a variance or special exception is based:

(See Attached)

8. Describe in detail the grounds for the appeal, or the reasons both in law and in fact for the granting of the variance or special exception, describing in detail the nature of the unique circumstances, and the specific hardship justifying your request for approval of the application.

(See Attached)

9. List any and all prior Zoning Hearing Board action regarding the property. List the date, case number and the nature of the zoning relief granted.

Application #14-07 Withdrawn at request of applicant

10. List any and all additional information, records, transcripts which may be helpful to the Zoning Hearing Board in rendering a decision: A minimum of eight (8) copies are required to be submitted.

(See Attached)

Michael Girard

Signature of Applicant

[Signature]

Signature of Owner

Internal Validation:

Date Received: 6/21/16

Fee Paid: \$400.00 v# 2115

Case:

16-28

[Signature]

Signature of the Zoning Officer

Glaberson Residence  
1777 Melmar Rd.  
Abington Township, Montgomery County, Pennsylvania

6. The proposed car port is attached to the house and is extending into the required side yard setback by 15'-0" and are proposing a setback of 5'-0" to the carport. We are seeking relief for the side yard setback.

7. We are requesting a variance from section 301.3 Dimensional Regulations requiring a minimum side yard setback of 20 feet.

8. The existing lot is currently non-conforming. The minimum lot size for the R-1 district per section 301.3 is 1 acre or 42,560 S.F. The existing lot size at 1777 Melmar is .5099 acres or 22,209.39 S.F. The minimum required lot width at the building setback line for the R-1 zoning district is 200 Ft. Our existing lot is only 106.75 Ft. at the building setback line. Our proposed car port added to the existing house would only be 125.75 Ft. wide which would fit in the required 200 Ft. lot width and not require a variance. Since our lot is non-conforming in width we do not have the ability to accommodate the car port. We are looking that the carport is to help provide accessibility to the residence. If this was a covered handicapped ramp, per Section 801.C Yard Requirements item E. there would not be any restriction for the projection into the side yard.

10. Mr. & Mrs. Glaberson built an addition on the house in 2015 to allow Arnold have access to his house and each of the main two floors. The addition has an entrance at grade, and has an elevator so Mr. Glaberson can enter the house without the need to use steps which is a hindrance due to his on going back issues (see attached letter from Arnold Glaberson). The Glabersons found the addition with the entrance at grade is great at allowing Arnold to enter & exit the house without the need of assistance but he still needs to have some additional help during inclement weather. The existing garage does not have enough room to allow Arnold and Doris to pull their cars in out of the weather and provide a ramp for Arnold to access the house. By granting the variance to allow Arnold to build the car port, where the at grade entrance is located, will allow him to park in a covered parking space and be protected from the elements as he enters and exits the house without the use of steps or need of a ramp, as well as less worry if he is going to fall and injure his back again.

May 12, 2016

To whom it may concern:

I wish to give the Zoning Board a brief outline of my medical health for which my wife and I applied for a variance to construct a Carport at our home.

1. Beginning in 2012-2013 I was suffering with pain in my Lower Back for which I received Physical Therapy and Injections at University of Pennsylvania Hospital and Rothman Institute.
2. Came under the care of Paul Marcotte, MD at HUP in August of 2013.
3. MRI on August 2, 2012( attached)
4. Diagnosis Spinal Stenosis; Herniated disc L2-5
5. Operated at HUP January, 2013 L2-5 Laminectomy (attached)
6. Operated at HUP on 9/10/2013: L2-5 Disc Fusion with screw at L4-5
7. Because of having pains in back area put in 2015 added an addition to home with an elevator since had pain when walking up steps  
In 2016 pain became so severe, had MRI on 4/16/2016 ( attached) which showed Disc Bulge , spinal stenosis and nerve damage as well as arthritis. The pain is different from before since the pain runs down the front of both legs, worse on left side. At times, my leg seems to give way as well as an issue with my balance. I am presently taking Neurontin, a drug which causes balance issues
8. Letter from Steven A. Feinstein, M.D attesting to my need of Carport for medical needs.

The reason we are requesting the Carport is that I can enter the house on ground level and go right to elevator and go the first or second floor without going up steps to enter house as well it is a shorter distance to travel. The carport would protect me from the elements and make it easier to walk and avoid inclement weather which makes ground slippery, etc. Without the carport to protect me from rain, snow, ice as well as inability to clean snow or ice off my car creates a danger to my health.

Thank you for your consideration

Arnold Glaberson



**Weight Bearing MRI**

- 1838 S Columbus Blvd Philadelphia PA 19148 | Phone 215-462-1500 | Fax 215-462-2000
- 2487 Grant Ave Philadelphia PA 19144 | Phone 215-484-0160 Fax 215-484-0174
- Cedarbrook Plaza 1000 Easton Rd Suite 290 Plymouth, PA 19066, Phone 215-576-0100 | Fax 215-576-5332
- 1320 MacDade Blvd Woodbury PA 2034 | Phone 610-333-2799 | Fax 610-333-2793
- 50 Monument Rd Suite 100 Bala Cynwyd PA 19004 | Phone 610-660-6161 | Fax 610-660-8000
- 70 E Swedesford Rd Suite 120 Malvern PA 19359 | Phone 610-647-6700 | Fax 610-647-2044
- 2140 Trexont Ave Trexore PA 19053 | Phone 215-322-3222 | Fax 215-322-4733

**High Field MRI**

- 7632 City Ave, Philadelphia PA 19154 | Phone 215-433-1500, Fax 215-473-5290

University Dynamic MRI

PATIENT **GLABERSON ARNOLD**  
 FILE # **NF15566**  
 DOB **04/21/40**

EXAM DATE **04/16/16**  
 REPORT DATE **04/19/16**

**STEVEN A FEINSTEIN, M D**  
**250 KING OF PRUSSIA RD**  
**RODNOR, PA 19087**

**SUMMARY OF ORDER**  
 Neutral sitting

009430455

**MAGNETIC RESONANCE IMAGING SCAN OF THE LUMBAR SPINE**

**BRIEF HISTORY** 75 year-old with back and bilateral leg pain History of surgery previously at L1-L2  
**PURPOSE OF STUDY** R/O HNP

**TECHNIQUE** The lumbar spine was imaged in the sagittal and axial planes utilizing various standard pulse sequences

**FINDINGS** Patient is status post pedicle screw placement with stabilizing bars traversing the L4-5 intervertebral disc level which does appear to limit prosthetic disc placement as well. There is normal alignment with only a mild degenerative posterior offset at L2 in relation to L3 measuring perhaps 2 mm. There is no fracture

Spinal canal is developmentally within normal limits of width. Cord ends at T12 without expansion

There is loss of disc height and signal at each level in the lumbar spine including the lower thoracic intervertebral disc levels

At the L1-2 level there is disc bulging measuring perhaps 1 mm without canal stenosis

At L2-3 there is a 2.5 mm disc bulge extending into both right and left neural exit foramina. There has been prior laminectomy at this level. With facet arthritis there is bilateral neural foraminal stenosis which could affect the right and left L2 nerve roots

At the L3-4 level there is loss of disc height and signal with diffuse disc bulge measuring perhaps 3 mm extending into both neural exit foramina. These are further compromised by facet arthritis as well as posterior ligamentous thickening. There is canal and neural foraminal stenosis resulting at this level which could affect the right and left L3 and L4 nerve roots. There is no disc herniation or stenosis at L4-5

At L5-S1 there is 1 mm disc bulging. Facet arthritis minimally narrows the left more than right neural exit foramina at this level

THE REGION'S LEADING MULTI-DIAGNOSTIC FACILITIES MRI & EMG'S AND PCE'S



4/16

Apr 20 16 03 28p  
From

Arnold Glaberson

215 947 2069

p 3

04/19/2016 22:16

#727 P 002/002



Med 4550-1500-10-001

PAGE 2

PATIENT GLABERSON ARNOLD  
FILE # NE15566  
DOB 3/21/1940

EXAM DATE 04/16/16  
REPORT DATE 04/19/16

STEVEN A FEINSTEIN M.D.  
250 KING OF PRUSSIA RD  
RODNOR, PA 19887

SUMMARY OF ORDER  
Neutral sitting

MAGNETIC RESONANCE IMAGING SCAN OF THE LUMBAR SPINE

IMPRESSION

- 1 Disc degeneration with bulge at L1-2
- 2 Degenerative 1-2 mm posterior offset of L2 in relation to L3 DDD with disc bulge and facet arthritis at this level with bilateral neural foraminal stenosis
- 3 DDD with disc bulge, facet arthritis and posterior ligamentous thickening at L3 & results in canal and neural foraminal stenosis
- 4 Status post bilateral pedicle screw placement in L4 and L5
- 5 Disc bulge with facet arthritis and left, more than right neural foraminal stenosis at L5 S1

Thank you for your kind referral of this patient.

Sincerely,

Joel Swartz, M.D.  
Intern, Diagnostic, M.D.  
Electronically signed by Joel Swartz, M.D.

For: Radiologist: Med J Swartz, M.D. (R)  
Supervisor: Dr. J. Swartz, M.D. (R)  
J.S. 10/16/16

*m*

**Discharge Instructions - Patient Copy**

**Patient Name: GLABERSON, ARNOLD**

**Birth Date: 4/21/1940**

**Admit Date: 11/26/2013 6:17:00 AM**



**Penn Medicine**

MRN/Visit#: 9430455  
/79972462

Hospital of the University of Pennsylvania

**Discharge Information**

Your hospital discharge date was Dec 2 2013

Your main (attending) physician in the hospital was Dr. Paul Marcotte.

The main reason you were in the hospital was lumbar stenosis

Additional Secondary Diagnosis: synovial cyst; osteoarthritis; Chronic sinusitis ; Acute pharyngitis; Cough; Pleurisy; chronic controlled hypertension; Myocardial Infarction; asthma; restless leg syndrome; plantar fasciitis; renal cell carcinoma; laparo partial nephrectomy 2/2013; Right eye glaucoma surgery; laminectomy 9/2013;

Procedures that you had in the hospital include: 11/26/13: L4-5 PLIF (Dr. Paul Marcotte).

Important tests in the hospital and their results were The results of all tests performed during your hospitalization are maintained in the Department of Medical Records. Please call 215-662-4000 and ask for Medical Records if you wish to obtain a copy of your tests results..

Important provider follow-up appointments (i.e., primary care, sub-specialty) and contact information: Please follow-up with Dr. Marcotte in 4 to 6 weeks. You have staples that need to be removed in 7 to 10 days after surgery with the nurse practitioner in the neurosurgery clinic or by your home visiting nurse. Call 215-662-3487 to schedule both appointments.; You have been given a prescription for xrays to be completed PRIOR to follow up appointment in 4 -6 weeks. Call 215-662-3000 to schedule this appointment with HUP Radiology. If this study is performed at another institution, please have the radiologist report faxed to ATTN: Dr. Marcotte at 215-349-5534. Bring films to follow up appointment.

Please refrain from smoking over the next 6 weeks. Smoking inhibits bone growth and may cause your fusion to fail. You must wear your brace at all times when you are out of bed until your follow up visit. **MUST WEAR BRACE AT ALL TIMES W/ THE FOLLOWING EXCEPTIONS:**

1. While laying down
2. While showering
3. While going to the bathroom/commode in the middle of the night

Please **DO NOT** take any NSAIDS (ex. Advil, Aleve, Naproxen, Ibuprofen) as this can inhibit the fusion process.;

**Allergies**

Environment: Adhesive Tape. Adhesive Tape (Rash; Blisters)  
Drug: atorvastatin (Muscle Aches)

*JL*

**Discharge Instructions - Patient Copy**

**Patient Name: GLABERSON, ARNOLD**

**Birth Date: 4/21/1940**

**Admit Date: 11/26/2013 6:17:00 AM**



**Penn Medicine**

MRN/Visit#: 9430455  
/79972462

**Vaccinations**

No vaccines were given for this visit.

**Discharge Medications**

AP and Lateral Lumbar Spine Xrays. Complete prior to follow up appointment in 4-6 weeks. Call 215-662-3000 to schedule this appointment with HUP Radiology. If this study is performed at another institution, please have the radiologist report faxed to ATTN: Dr. Marcotte at 215-349-5534. Bring films to follow up appointment.

Dx: Posterior Lumbar Interbody Fusion.

fluticasone 50 mcg/inh nasal spray. 2 sprays in each nostril daily.

MiraLax oral powder for reconstitution. 1 PKT(S) orally once a day as needed for constipation.

senna 8.6 mg oral tablet. 2 tab(s) orally 2 times a day as needed for constipation.

**Medication Information**

Other prescriptions provided at discharge: Xrays, Percocet for pain, Miralax and senna for constipation.

Please stop taking the following medications: Please start your home aspirin (81mg by mouth daily) TOMORROW (12/3/13)

\*\*\* PLEASE DISCARD OLD MEDICATION LISTS AND USE THE UPDATED LIST ABOVE. BE SURE TO ALSO SHARE THIS LIST WITH YOUR PHARMACY AND OTHER CARE PROVIDERS.\*\*\*

**Post-Discharge Plan-CRM/SW:**

Home care: Home Skilled Nursing  
Care Agency Name: Penn Care at Home  
Care Agency Phone Number: 610-747-3400

*Kim  
610 992-5620*

Home care: Physical Therapy  
Care Agency Name: Penn Care at Home  
Care Agency Phone Number: 610-747-3400

Home physical therapy  
Home VNA for wound check.

**Tubes/Lines/Drains**

## Discharge Instructions - Patient Copy

Patient Name: GLABERSON, ARNOLD

Birth Date: 4/21/1940

Admit Date: 9/10/2013 10:40:00 AM



# Penn Medicine

MRN/Visit#: 9430455  
/73864061

## Hospital of the University of Pennsylvania

### Discharge Information

You were discharged to home.

Your hospital discharge date was Sep 12 2013

Your main (attending) physician in the hospital was Dr. Paul Marcotte.

The main reason you were in the hospital was Other: and Lumbar stenosis.

Additional Secondary Diagnosis: HTN; Osteoarthritis; sinusitis, pharyngitis, cough; pleurisy without mention of effusion or current tuberculosis; Extrinsic asthma; Sciatica, myalgia and myositis; Enthesopathy of ankle and tarsus, Restless leg syndrome, Plantar fasciitis; MI, Renal cell carcinoma; Radex spine cervical; glaucoma right eye; partial nephrectomy 2/20/2013;

Procedures that you had in the hospital include: 9/10/13 L2-5 laminectomy (Dr. Paul Marcotte).

Important provider follow-up appointments (i.e., primary care, sub-specialty) and contact information: Please call 215-662-3487 to schedule your Neurosurgical follow-up appointments. Please follow-up with Dr. Marcotte in 4 - 6 weeks from the date of surgery.

You have staples that need to be removed in 10-14 days from the date of surgery. Your home visiting nurse may remove them, or alternatively, you can call the Neurosurgery office at 215-662-3487 and your surgeon's nurse practitioner can remove them. If there is any concern about the appearance of your incision, call the neurosurgery office to have the staples removed.;

### Allergies

Environment: Adhesive Tape. Adhesive Tape (Rash; Blisters)

Drug: atorvastatin (Muscle Aches)

### Vaccinations

No vaccines were given for this visit.

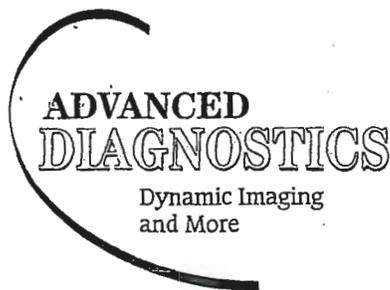
### Discharge Medications

aspirin 81 mg oral tablet. 1 tab(s) orally once a day - resume on September 17th.

atorvastatin 10 mg oral tablet. 0.5 tab(s) orally three nights a week.

Azoft 1% ophthalmic suspension. 1 drop to each eye twice daily.

Colace 100 mg oral capsule. 2 cap(s) orally 2 times a day for constipation while taking pain medication.



University Dynamic MRI

**Weight Bearing MRI**

- 1938 S. Columbus Blvd., Philadelphia, PA 19148 | Phone: 215-462-1500 | Fax: 215-462-2010
- 2487 Grant Ave., Philadelphia, PA 19114 | Phone: 215-464-0150 | Fax: 215-464-0174
- Cedarbrook Plaza, 1000 Easton Rd, Suite 290, Wyncote, PA 19095 | Phone: 215-576-0150 | Fax: 215-576-5132
- 1326 MacDade Blvd., Woodlyn, PA 19094 | Phone: 610-833-2789 | Fax: 610-833-2793
- 50 Monument Rd., Suite 100, Bala Cynwyd, PA 19004 | Phone: 610-660-6161 | Fax: 610-660-8016
- 70 E. Swedesford Rd., Suite 125, Malvern, PA 19353 | Phone: 610-647-6701 | Fax: 610-647-2044
- 3160 Tremont Ave., Trevese, PA 19053 | Phone: 215-322-3220 | Fax: 215-322-4733

**High Field MRI**

- 7632 City Ave., Philadelphia, PA 19151 | Phone: 215-473-1500 | Fax: 215-473-5293

**PATIENT:** GLABERSON, ARNOLD  
**FILE#:** NE15566  
**DOB:** 4/21/1940

**EXAM DATE:** 8/2/2012  
**REPORT DATE:** 8/3/2012

Adrian Popescu, M.D  
 1800 Lombard St  
 Philadelphia, PA 19146

**SUMMARY OF ORDERS:**  
 Neutral/Sitting

**MAGNETIC RESONANCE IMAGING SCAN OF THE LUMBAR SPINE**

**BRIEF HISTORY:** Lower back pain radiating to the legs.

**PURPOSE OF STUDY:** Rule out herniated nucleus pulposus.

**TECHNIQUE:** Sagittal T1, sagittal T2-weighted, axial T2-weighted and coronal T2-weighted sequences were obtained.

**FINDINGS:** The sagittal images show a large part of the sacrum and the five lumbar bodies and the lower three thoracic vertebral bodies. The L5-S1 disc has normal height with normal signal and the L5 vertebral body has normal height with normal signal with only a small focus of increased T2 signal within the L5 lumbar body posteriorly likely a small cavernous hemangioma.

There is mild anterior positioning of L4 vertebral body with respect to L5 with mild narrowing of the disc space and disc desiccation with anterior positioning measuring 3 mm with a broad herniation across the disc space with facet hypertrophy and prominent secondary canal stenosis.

The L3-4 disc has normal height with broad disc bulge with canal of adequate dimensions and the L3-4 disc showing a normal canal.

The L2-3 disc shows mild reduction in disc height with disc desiccation and a central herniation impinging the thecal sac without stenosis.

The L1-2 disc has concave disc margin and normal neural foramina. The lower three thoracic discs are unremarkable.

There is an area of cystic-like signal measuring 2.8 cm on the inferior left kidney likely an inferior left renal cyst. There is a similar but smaller such finding along the inferior right kidney.

The lower thoracic discs are unremarkable. The conus is normal at the T12-L1 disc space level.

THE REGION'S LEADING MULTI-DIAGNOSTIC FACILITIES. MRI'S, EMG'S AND FCE'S.

PAGE 2

PATIENT: GLABERSON, ARNOLD  
FILE#: NE15566  
DOB: 4/21/1940

EXAM DATE: 8/2/2012  
REPORT DATE: 8/3/2012

IMPRESSION:

1. Mild narrowing and disc desiccation of the L4-5 disc with anterior positioning of L4 vertebral body with respect to L5 which is a grade I anterior spondylolisthesis with a broad L4-5 disc herniation and prominent facet hypertrophy with prominent thecal sac compression and prominent secondary canal stenosis.
2. The L5-S1 disc has normal height with a central herniation with normal canal.
3. The L3-4 disc shows a broad disc bulge with canal of adequate dimensions.
4. There are degenerative changes and disc desiccation of the L2-3 disc with a central herniation impinging the thecal sac with decreased size of the lumbar canal with no stenosis.
5. The L1-2 disc shows a normal canal with normal concave disc margin. The lower three thoracic discs are unremarkable.
6. There are bilateral renal cysts as indicated.

Thank you for your kind referral of this patient.

Sincerely,



Howard C. Hutt, MD, PhD  
HCH/KT/sg Date of Transcription: 8/3/2012  
TID#: 68974118  
Tech Name: Richard D Moss RT (R) (MR)

**PRE-PROCEDURE PATIENT INSTRUCTIONS**  
for  
**Outpatients or AM Admit patients having surgery at HUP**

You are scheduled to have a medical/surgical procedure on 1-29-13

The doctor performing this procedure is Dr. Paul Marcotte

One working day prior to your surgery, you will receive an automated telephone message from the Operating Room sometime between 3:00pm and 5:00pm. (Patients having surgery on Monday will receive a call on Friday afternoon.) If you do not receive a call by 5:00pm, you may call us at (215) 615-5599. During this pre-operative telephone call, you will be given information regarding what time to arrive on the day of surgery.

Please take a few minutes to familiarize yourself with the following information prior to receiving this pre-operative telephone call.

**PLEASE BE AWARE THAT FAILURE TO FOLLOW THESE INSTRUCTIONS MAY CAUSE YOUR SURGERY TO BE CANCELLED**

**TIME TO ARRIVE:** Some patients are asked to arrive for their surgery as early as 5:45am while others may not be asked to arrive until the early or late afternoon. Arrival times are not scheduled until the afternoon before your surgery. The Operating Room schedule is not complete until the late afternoon one working day before surgery. Therefore arrival times are not available until this time. Please make arrangements to accommodate both an early and late arrival.

**WHERE TO ARRIVE:** On the morning of your procedure, all patients scheduled for surgery or a procedure in Radiology must first report to The Admission Center located on Silverstein 1.

**WHAT TO EAT/DRINK:** You should have nothing to eat or drink after midnight the day before your surgery. This restriction includes gum, mints, candy, and smoking. You may brush your teeth, but do not swallow any water. If you have been instructed to take any medications, you may do so with just a sip of water.

**MEDICATIONS:**

If you are diabetic and take either insulin or a pill to control your diabetes, please contact your primary doctor prior to your surgery date to determine if you should continue these medications the morning of surgery.

If you have asthma and you carry an inhaler, please bring it with you on the day of surgery.

There are a number of medications which may be responsible for excess bleeding during your surgical procedure. Some of the most common of these medications are listed below. If you are taking any of these on a daily basis for long-term prevention or treatment of a medical condition, please talk with your surgeon about whether or not you should stop taking them prior to your procedure.

Aspirin (Anacin, Bufferin, Excedrin, Bayer, etc)

Drugs that contain Aspirin (Alka Seltzer, Allopurinol, Anaprox, Ascriptin, Coricidin, Darvon, Dristan, Duragesic, Ecotrin, Fiorinal, Midol, Percodan, Sine-off, Triaminicin, Vanquish)



University Dynamic MRI

**Weight Bearing MRI**

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- 3160 Tremont Ave., Trevese, PA 19053 | Phone: 215-322-3220 | Fax: 215-322-4733

**High Field MRI**

- 7632 City Ave., Philadelphia, PA 19151 | Phone: 215-473-1500 | Fax: 215-473-5293

**PATIENT:** GLABERSON, ARNOLD  
**FILE#:** NE15566  
**DOB:** 4/21/1940

**EXAM DATE:** 8/2/2012  
**REPORT DATE:** 8/3/2012

Adrian Popescu, M.D  
1800 Lombard St  
Philadelphia, PA 19146

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THE REGION'S LEADING MULTI-DIAGNOSTIC FACILITIES. MRI'S, EMG'S AND FCE'S.

**Advanced Diagnostics**

PAGE 2

PATIENT: GLABERSON, ARNOLD  
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EXAM DATE: 8/2/2012  
REPORT DATE: 8/3/2012

**IMPRESSION:**

1. Mild narrowing and disc desiccation of the L4-5 disc with anterior positioning of L4 vertebral body with respect to L5 which is a grade I anterior spondylolisthesis with a broad L4-5 disc herniation and prominent facet hypertrophy with prominent thecal sac compression and prominent secondary canal stenosis.
2. The L5-S1 disc has normal height with a central herniation with normal canal.
3. The L3-4 disc shows a broad disc bulge with canal of adequate dimensions.
4. There are degenerative changes and disc desiccation of the L2-3 disc with a central herniation impinging the thecal sac with decreased size of the lumbar canal with no stenosis.
5. The L1-2 disc shows a normal canal with normal concave disc margin. The lower three thoracic discs are unremarkable.
6. There are bilateral renal cysts as indicated.

Thank you for your kind referral of this patient.

Sincerely,

*Howard C. Hutt, MD*

Howard C. Hutt, MD, PhD  
HCH/KT/sg Date of Transcription: 8/3/2012  
TID#: 68974118  
Tech Name: Richard D Moss RT (R) (MR)



Penn Medicine *at* Radnor

To: Whom it may concern

Re: Arnold Glaberson

Date: 5/17/16

Dear Sirs,

I am the PCP for Mr Glaberson. He is under my care for chronic lumbar disc disease. He is planning to put in a Car port to allow him to safely park and walk to his house in bad weather. This will enable him to avoid falls. I agree with the need for this carport.

A handwritten signature in cursive script that reads "Steven A. Feinstein MD".

Steven A. Feinstein, MD

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LEE  
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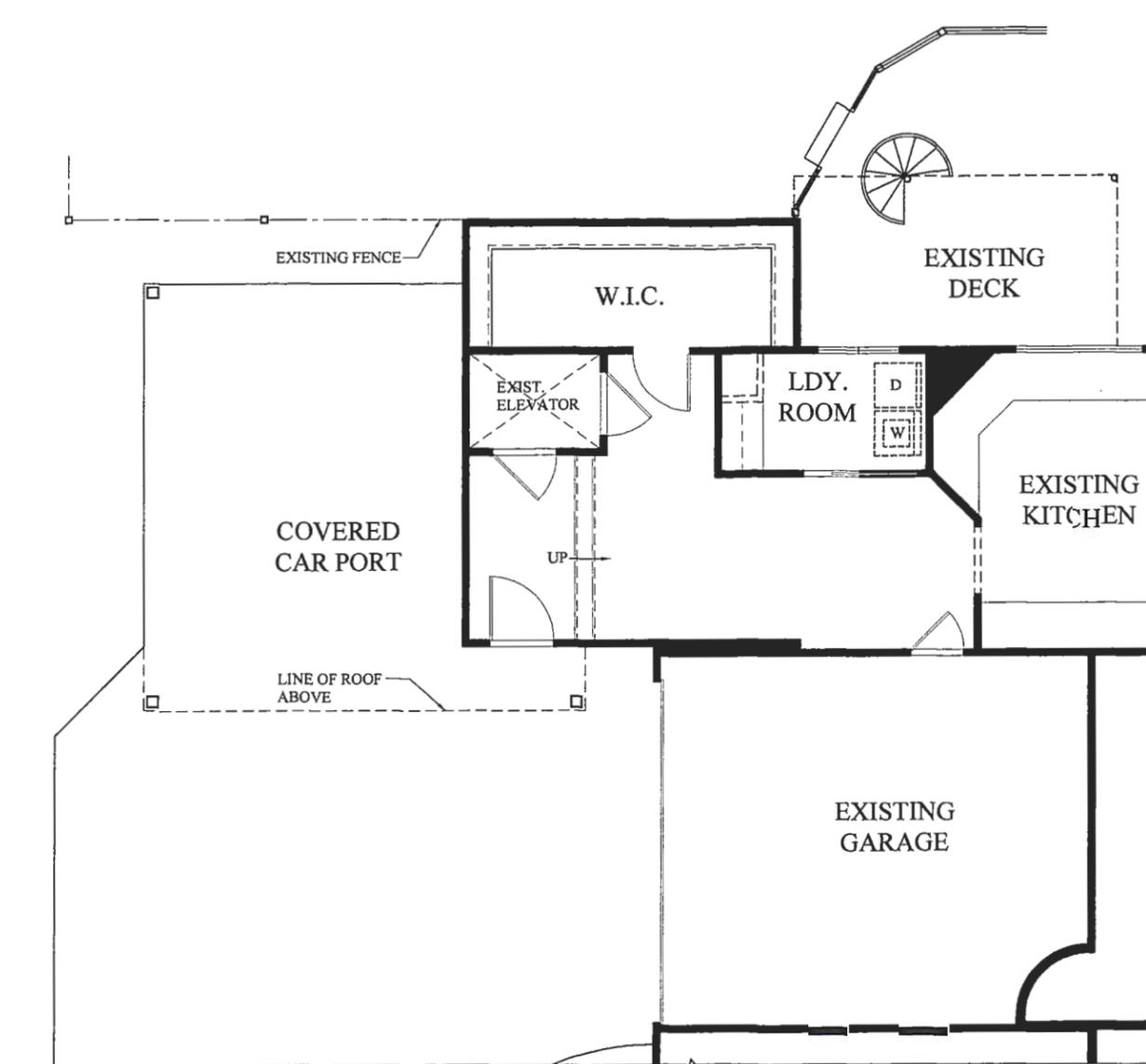


THE ARCHITECTURAL PLANS AND ELEVATIONS ARE ARCHITECTURAL CONCEPTS. DETAILS AND DIMENSIONS SHOWN MAY VARY FROM FINAL ARCHITECTS PLANS AND BUILDER FIELD CHANGES.

# *Glaberson Residence*



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2/7/14 (REV: 6/1/16)



FIRST FLOOR PLAN  
SCALE: 1/8"=1'-0"

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