ANJANI SINHA MEDICALP.C.

Orthopedic Surgery

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ANJANI SINHA, M.D., M.S. (Ortho)

December 27, 2019

DOA: 10/24/2019

Dr. Clarke Nara Rehabilitation & Physical Therapy 164-10 Crocheron Avenue Flushing, NY 11358

Re: Joong Hun Jung DOB: 07/12/1962

Dear Dr. Clarke:

HISTORY:

The patient is a 57-year-old gentleman right-hand dominant MTA inspection agent who was involved in a work related accident on 10/24/2019. The patient was trying to turn a wheel and was grabbing the wheel with both arms when the wheel ended up turning and dragging him. This caused him to fall to the ground striking his left arm against the ground and causing immediate pain to the right shoulder as well. The patient has been doing physical therapy for his neck and back. He sees pain management for this as well as does physical therapy for his bilateral shoulders for the past 2 months. The patient states that his shoulders are somewhat improving; however, the patient is still having persistent pain in the neck. He is awaiting authorization for pain injection to the neck. The patient is currently not working.

PAST MEDICAL HISTORY:

Noncontributory.

PAST SURGICAL HISTORY:

Colonoscopy.

CURRENT MEDICATIONS:

None.

ALLERGIES:

NO KNOWN DRUG ALLERGIES.

SOCIAL HISTORY:

The patient is a nonsmoker and nondrinker. He is an MTA inspection agent.

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REVIEW OF SYSTEMS:

Noncontributory.

PHYSICAL EXAMINATION:

The patient's height is 5 feet 7 inches. He weighs 150pounds. Examination of the head, neck, chest, and abdomen is benign. He is an alert, oriented, and cooperative gentleman.

GAIT: He has a normal gait pattern.

RIGHT SHOULDER: Examination reveals swelling and tenderness to palpation on the AC joint of the right shoulder. Hawkins test, O'Brien test, and impingement sign are positive. Range of motion reveals abduction 160 degrees, forward flexion 160 degrees, internal rotation 60 degrees, and external rotation 70 degrees. He has pain with extreme range of motion and some crepitus, clicking, and popping noted in the right shoulder. The patient has no motor or sensory deficit of the right upper extremity. Skin is intact grossly. He is neurovascularly intact.

MRI of the Right Shoulder: Positive for a posterosuperior labral tear/SLAP tear. There is interstitial supraspinatus and subscapularis tendon tear. There is focal subcortical edema in the humeral head which may relate to the injury. There is bicipital tenosynovitis and periarticular bursitis noted.

LEFT SHOULDER: Examination reveals tenderness to palpation on the AC joint of the left shoulder. Hawkins test, O'Brien test, and impingement sign are positive. Range of motion reveals abduction 160 degrees, forward flexion 170 degrees, internal rotation 50 degrees, and external rotation 60 degrees. The patient has no motor or sensory deficit of the left upper extremity. The patient has some clicking, popping, and locking in the left shoulder as well.

<u>MRI</u> of the Left Shoulder: Positive for posterosuperior labral tear/SLAP tear and partial tear of the infraspinatus. There is focal subcortical edema in the humeral head which may be related to the injury. There is periarticular bursitis noted.

If the given history is correct, the injury to his right and left shoulder is related to the accident of 10/24/2019.

FINAL DIAGNOSES:

1. Bilateral shoulder superior labrum anterior and posterior tear and partial cuff tears with mild persistent pain.

TREATMENT/PLAN:

I explained the diagnoses to the patient. The patient has been undergoing physical therapy for the past 2 months and has positive findings on MRI. The patient was offered left shoulder arthroscopic surgery. The patient states that he is not interested in doing the surgery at this time. In the meantime, the patient will do physical therapy working on the active and passive range of motions and general strengthening. The patient will follow up if he has worsening pain. The patient understands.

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CAUSALITY: If the history provided is correct, the signs and symptoms are felt to be causally related to the incident occurring on the above-mentioned date.

All findings and images were reviewed with Dr. Sinha, who agrees with the plan.

I, Anjani Sinha, M.D., being duly licensed to practice medicine in the state of New York hereby affirm under the penalty of perjury that the statements contained herein are true and accurate to the best of my knowledge.

Sincerely yours,

ANJANI SINHA, M.D., M.S. JOSEPH HAN, PA-C