

ANJANI SINHA MEDICAL P.C.

Orthopedic Surgery

164-10 Northern Blvd, Ste 204

Flushing, NY 11358

Phone: 718-886-2011 Fax: 929-333-7950

anjanisinhamedicalpc@gmail.com

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

August 14, 2020

DOA: 06/17/2020

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

Re: Sung Hyun Cho
DOB: 04/11/1966

Dear Dr. Clarke:

HISTORY:

The patient is a 54-year-old gentleman, who was the restrained driver of a vehicle that was involved in a motor vehicle accident on 06/17/2020. He sustained multiple skeletal injuries including injury to his left shoulder. He did not go to any hospital that same day. The patient has been undergoing physical therapy for the past 8 weeks.

PRESENT COMPLAINTS:

The patient is here for an orthopedic evaluation of his left shoulder. He complains of pain and stiffness in the left shoulder since the accident. The patient is unable to sleep comfortably. There has been no improvement with physical therapy.

PAST MEDICAL HISTORY:

Noncontributory.

PAST SURGICAL HISTORY:

Noncontributory.

CURRENT MEDICATIONS:

None.

ALLERGIES:

NO KNOWN DRUG ALLERGIES.

SOCIAL HISTORY:

The patient smokes 10 cigarettes per day.

PHYSICAL EXAMINATION:

The patient's height is 5 feet 6 inches and weight is 150 pounds. Examination of the head, neck, chest, and abdomen is benign. The patient is an alert, oriented, and cooperative gentleman.

GAIT: The patient has a normal gait pattern.

LEFT SHOULDER: Examination reveals tenderness to palpation on the anterior and superior aspects of the left shoulder. Hawkins test and impingement sign 2+ are positive. O'Brien test and drop sign are negative. Range of motion reveals abduction 110 degrees, forward flexion 110 degrees, internal rotation 5 degrees, and external rotation 10 degrees. The patient has no motor or sensory deficit of the left upper extremity.

MRI of the Left Shoulder: Positive for subscapularis tendinopathy and sprain of the superior glenohumeral ligament. Low-lying acromion which may constitute impingement syndrome in the proper clinical context. Supraspinous tendinosis and mild subacromial bursitis.

If the given history is correct, the injury to the patient's left shoulder is related to the accident of 06/17/2020.

FINAL DIAGNOSES:

1. Traumatic rotator cuff tear, left shoulder.
2. Traumatic impingement syndrome, left shoulder.
3. Traumatic bursitis, left shoulder.
4. Traumatic tendinitis, left shoulder.

TREATMENT/PLAN:

The patient has not improved despite 8 weeks of physical therapy. He continues to have pain in his left shoulder. The left shoulder MRI is positive for rotator cuff tear. I reviewed the results of the left shoulder MRI with the patient. Today, the details of left shoulder arthroscopic surgery were discussed with him. All the pros and cons were discussed with him including the remote possibility of an infection requiring further surgery and the remote possibility of clotting, for which I will be giving him aspirin in the postoperative period. He will also be on a CPM machine (4 to 6 weeks for the shoulder) with ice packs on the shoulder in the postoperative period. All postoperative management was discussed with him. There is no guarantee that he will recover fully after the surgery.

The patient wants to proceed with left shoulder arthroscopic surgery. A tentative date for left shoulder arthroscopic surgery has been set on 09/04/2020.

The patient was also advised to discuss with his family members and reach out to our office in case there is any change in plan.

In the meantime, the patient was advised to continue with physical therapy.

Re: Sung Hyun Cho

Page 3

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.

Note: I hereby certify that all stipulated COVID-19 CDC guidelines for patient care including but not limited to sanitizing, social distancing, and PPE were strictly followed.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Anjani Sinha', written over a horizontal line.

ANJANI SINHA, M.D., M.S.

Transcribed but not proofread