**Douglas Unis, M.D.**

| FELLOW OF THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS  DIPLOMATE AMERICAN BOARD OF ORTHOPAEDIC SURGERY |
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April 26, 2024

Re: Juan Lopez Jr.

Claim #: SLU75209

Case #: 22283216

Date of Accident: 2-28-23

Specialty: Orthopedics

To Whom It May Concern:

As you requested, I performed an orthopedic re-evaluation regarding Mr. Juan Lopez Jr. on April 26, 2024 in my Brooklyn office. Photo identification was presented prior to examination. Nardia, a staff member, was present at the time of this examination.

**HISTORY:**

On 2-28-23, he was the seat-belted driver of a car involved in a motor vehicle accident. He reports he was rendered unconscious for few minutes. He reports he did sustain lacerations to the hand and knees for which he did not receive any stitches. An ambulance transported the claimant to Methodist Hospital. No x-rays were taken. No medications were taken. He was given neck collar. Mr. Lopez states initially he had complaints of headaches and pain in the neck, mid back, low back, left shoulder, left elbow, bilateral hands, right hip and right knee. Mr. Lopez started a course of physical therapy, acupuncture and chiropractic treatment at a frequency of three times a week. Additional tests were performed which included MRIs of the neck, back, left shoulder and knee. He states that treatments have not been beneficial, and he is continuing the recommended treatments two times a week. No surgery was performed as a result of this accident.

**CURRENT COMPLAINTS:**

At the time of this examination, Mr. Lopez states he has complaints of headaches and pain in the neck, mid back, low back, left shoulder, left elbow, right wrist, right hip, right knee and bilateral feet. No other complaints are reported at the time of this examination.

**PAST MEDICAL HISTORY:**

Mr. Lopez has no history of injury and he has not been involved in a prior motor vehicle accident or work-related accident. He reports no history of any prior surgery. He is not allergic to medication. He reports he does not take medication.

**WORK HISTORY:**

The claimant was employed as a personal trailer at the time of the accident. He was out of work for one day. He is currently working part time at the same job on light duty.

**REVIEW OF RECORDS**:

* Physical therapy progress notes dated 12/05/2023 through 03/11/2024 from VLI Medical, PC.
* Chiropractic progress notes dated 10/12/2023 through 02/15/2024 from VLI Medical, PC.
* Chiropractic and Acupuncture medical re-examination report dated 02/09/2024 by John Johnson, DC, LAc.
* Orthopedic medical re-examination report dated 02/02/2024 by Douglas Unis, MD.
* Follow-up examination reports dated 12/14/2023 through 02/29/2024 from VLI Medical, PC.
* Outcome assessment testing summary note dated 12/14/2023 from VLI Medical, PC.
* Follow-up outcome assessment testing summary note dated 01/30/2024 from VLI Medical, PC.

**PHYSICAL EXAMINATION:**

He is a 32-year-old right-handed male who ambulates with a normal gait. He is 5 feet, 11 inches tall, weight is 196 pounds, and has black hair and brown eyes. He is in no acute distress and was able to understand and cooperate during the examination.

Normal ranges of motion are as per the A.M.A “Guides To The Evaluation Of Permanent Impairment”, fifth edition, and are performed with the assistance of a goniometer.

###### **ORTHOPEDIC EXAMINATION**

**Cervical Spine:** There is no tenderness to palpation of the cervical paraspinal musculature. There is no tenderness to palpation of the trapezii. No muscle spasm is noted. Range of motion of the cervical spine reveals flexion 50 degrees (50 degrees being normal), extension 60 degrees (60 degrees being normal), right rotation 80 degrees (80 degrees being normal), left rotation 80 degrees (80 degrees being normal), right lateral flexion 45 degrees (45 degrees being normal), and left lateral flexion 45 degrees (45 degrees being normal).

On neurological examination, there are no sensory deficits in the upper extremities. Deep tendon reflexes of the biceps and triceps are present and equal bilaterally. Muscle strength in each range is 5/5. No atrophy of intrinsic muscles is noted.

**Thoracic Spine:** There is no spasm. There is no tenderness to palpation over the paraspinal musculature. Range of motion of the thoracic spine reveals right lateral bending 45 degrees (45 degrees being normal), left lateral bending 45 degrees (45 degrees being normal), right rotation 30 degrees (30 degrees being normal) and left rotation 30 degrees (30 degrees being normal).

**Lumbar Spine:** There is no spasm. There is no tenderness noted over the paraspinal musculature on palpation. Range of motion of the lumbar spine reveals flexion 60 degrees (60 degrees being normal), extension 25 degrees (25 degrees being normal), and right and left lateral bending 25 degrees (25 degrees being normal).

Neurological examination reveals patellar and Achilles reflexes to be 2+. Muscle strength of the lower extremities is graded at 5/5 bilaterally. Sensory examination of the lower extremities including the medial and lateral thighs, calves and feet are normal. There is no atrophy noted in the intrinsic muscles of the lower extremities. Straight leg raising is negative. The claimant is able to tiptoe and heel walk.

**Right Shoulder:** There is no tenderness on palpation of the shoulder. There is no crepitus at the joints. Range of motion of the right shoulder reveals abduction 180 degrees (180 degrees being normal), forward flexion 180 degrees (180 degrees being normal), internal rotation 80 degrees (80 degrees being normal) and external rotation 90 degrees (90 degrees being normal). Impingement sign is negative. Neer’s sign is negative. O’Brien’s, Yergason, Speed’s, Hawkins and Drop Arm tests are all negative.

**Left Shoulder:** There is no tenderness on palpation of the shoulder. There is no crepitus at the joints. Range of motion of the left shoulder reveals abduction 180 degrees (180 degrees being normal), forward flexion 180 degrees (180 degrees being normal), internal rotation 80 degrees (80 degrees being normal) and external rotation 90 degrees (90 degrees being normal). Impingement sign is negative. Neer’s sign is negative. O’Brien’s, Yergason, Speed’s, Hawkins and Drop Arm tests are all negative.

**Right Elbow:** There is no tenderness on palpation of the elbow. Range of motion of the elbow reveals flexion 150 degrees (150 degrees being normal). Extension is 0 degrees (0 degrees being normal).

**Left Elbow:** There is no tenderness on palpation of the elbow. Range of motion of the elbow reveals flexion 150 degrees (150 degrees being normal). Extension is 0 degrees (0 degrees being normal).

**Right Wrist/Hand:** Range of motion of the wrist/hand reveals pronation 80 degrees (80 degrees being normal), supination 80 degrees (80 degrees being normal), dorsiflexion 60 degrees (60 degrees being normal), volar flexion 60 degrees (60 degrees being normal), radial deviation 20 degrees (20 degrees being normal) and ulnar deviation 30 degrees (30 degrees being normal). Tinel’s sign is negative. There is no atrophy of the thenar muscles of the hand noted. Motion of the digits of the hand is full. Phalen’s sign was negative.

**Left Wrist/Hand:** Range of motion of the wrist/hand reveals pronation 80 degrees (80 degrees being normal), supination 80 degrees (80 degrees being normal), dorsiflexion 60 degrees (60 degrees being normal), volar flexion 60 degrees (60 degrees being normal), radial deviation 20 degrees (20 degrees being normal) and ulnar deviation 30 degrees (30 degrees being normal). Tinel’s sign is negative. There is no atrophy of the thenar muscles of the hand noted. Motion of the digits of the hand is full. Phalen’s sign was negative.

**Right Hip:** There is no tenderness on palpation of the hip. Range of motion reveals forward flexion 100 degrees (100 degrees being normal), extension 30 degrees (30 degrees being normal), abduction 40 degrees (40 degrees being normal), adduction 20 degrees (20 degrees being normal), external rotation to 50 degrees (50 degrees being normal) and internal rotation 40 degrees (40 degrees being normal).

**Left Hip:** There is no tenderness on palpation of the hip. Range of motion reveals forward flexion 100 degrees (100 degrees being normal), extension 30 degrees (30 degrees being normal), abduction 40 degrees (40 degrees being normal), adduction 20 degrees (20 degrees being normal), external rotation to 50 degrees (50 degrees being normal) and internal rotation 40 degrees (40 degrees being normal).

**Right Knee:** There is no tenderness noted. There is no evidence of atrophy of the quadriceps noted on inspection. Range of motion is to 150 degrees’ flexion (150 degrees being normal). Extension is to 0 degrees (0 degrees being normal). McMurray Test, Lachman, anterior drawer, pivot shift and posterior drawer tests are all negative. There is no evidence of patello-femoral crepitus. The knee is stable on valgus and varus stressing.

**Left Knee:** There is no tenderness noted. There is no evidence of atrophy of the quadriceps noted on inspection. Range of motion is to 150 degrees’ flexion (150 degrees being normal). Extension is to 0 degrees (0 degrees being normal). McMurray Test, Lachman, anterior drawer, pivot shift and posterior drawer tests are all negative. There is no evidence of patello-femoral crepitus. The knee is stable on valgus and varus stressing.

**Right Ankle & Foot:** There is no soft tissue swelling. There is no tenderness on palpation of the ankle and foot. Range of motion shows dorsiflexion 20 degrees (20 degrees being normal), plantar flexion 40 degrees (40 degrees being normal), inversion 30 degrees (30 degrees being normal) and eversion 20 degrees (20 degrees being normal). There is no sensory loss to light touch or pinprick.

**Left Ankle & Foot:** There is no soft tissue swelling. There is no tenderness on palpation of the ankle and foot. Range of motion shows dorsiflexion 20 degrees (20 degrees being normal), plantar flexion 40 degrees (40 degrees being normal), inversion 30 degrees (30 degrees being normal) and eversion 20 degrees (20 degrees being normal). There is no sensory loss to light touch or pinprick.

**DIAGNOSIS:**

* Cervical spine, thoracic spine and lumbar sprains/strains, resolved.
* Left shoulder sprain/strain, resolved.
* Left elbow sprain/strain, resolved.
* Right wrist and bilateral hand sprains/strains, resolved.
* Right hip sprain/strain, resolved.
* Right knee sprain/strain, resolved.
* Bilateral foot sprain/strain, resolved.
* There were no other injuries alleged/all other areas examined were within normal limits.

**DISABILITY:**

Based on my examination and lack of objective findings, there is no evidence of an orthopedic disability. He can perform all activities of daily living and work without restrictions or limitations.

**TREATMENT:**

Treatment to date has been reasonable and necessary. Treatment was casually related to the accident. Based on my examination and clinical experience, orthopedic treatment is not medically necessary from an orthopedic viewpoint to any of the examined areas. There is no medical necessity for physical therapy, prescription medication, office visits, pain management, extracorporeal shockwave therapy, surgery or injections to any of the examined areas. It is my opinion that there is no medical necessity for massage therapy, diagnostic testing, household help, durable medical equipment or special medical transportation to any of the examined areas. The claimant’s subjective complaints were not correlated by objective findings.

I, Douglas Unis, M.D., duly licensed to practice medicine in the State Of New York, pursuant to Civil Practice Law and Rules Sec 2106, hereby affirm under penalties of perjury, that the statements contained herein are true and accurate.

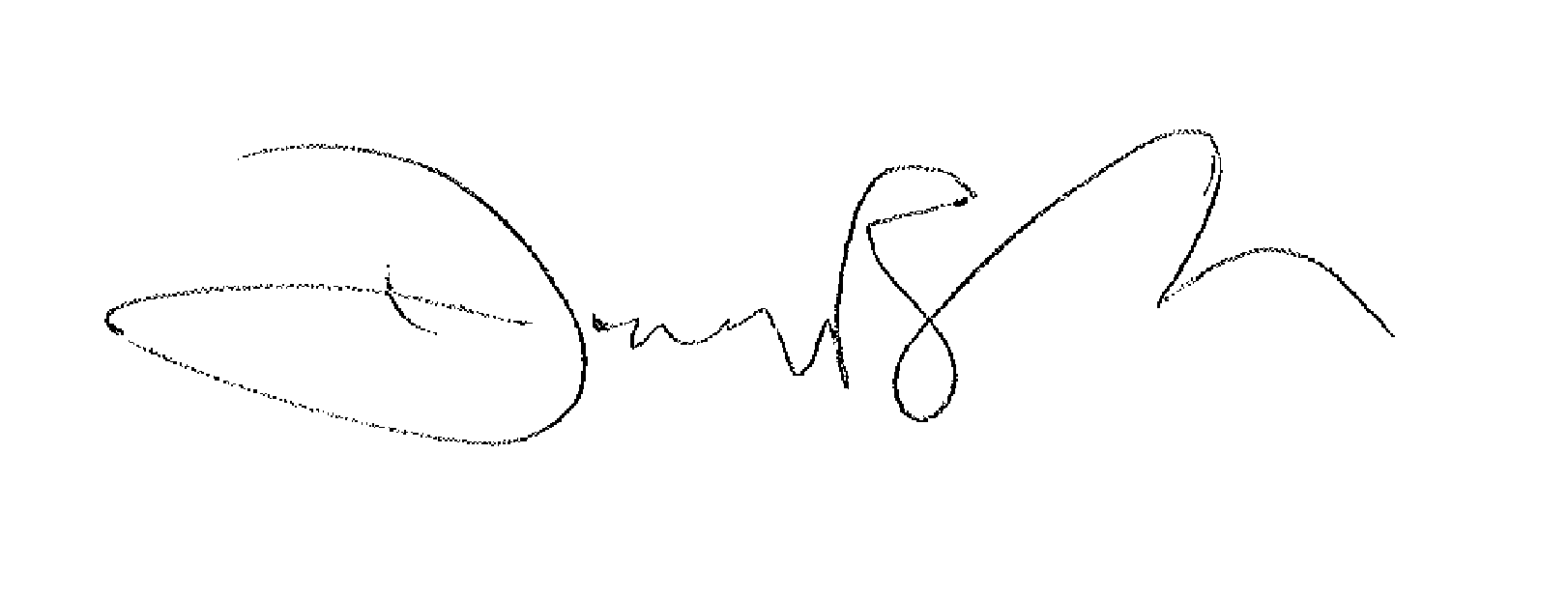
The claimant was examined with specific complaints emanating from the original injury. Any other medical conditions, which are either unreported or felt to be unrelated to the original injury are considered to be beyond the scope of this examination.

I affirm to the best of my knowledge that I am unaware of a conflict of interest between me, the “examiner,” the claimant “examinee” or the claimant’s healthcare provider (s). It is understood that no doctor/patient relationship exists or is implied by this examination.

I further certify that the signature appearing in this report is my electronic signature, as that term is defined by New York State Technology Law § 302(3), and that the electronic signature on this report and on any facsimiles and copies of this report shall be deemed originals.

I attest to having the scope of licensure or certification that typically manages the medical condition, procedure, treatment, or issue in this case.  I have current, relevant, knowledge and experience to render an opinion for this case, and my opinions and conclusions are based solely upon the review of the records submitted as well as the results of my examination, if applicable.  There is no conflict of interest known to me regarding this specific case.  I have received no financial incentive or compensation that is dependent in any way on the opinion I have rendered.  No delegation of this examination and/or review was rendered.

Sincerely,



Douglas Unis, M.D.

NYS Lic# 232089-01

DU:jp

A close-up of a driver license

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| * Physical therapy progress notes dated 12/05/2023 through 03/11/2024 from VLI Medical, PC. * Chiropractic progress notes dated 10/12/2023 through 02/15/2024 from VLI Medical, PC. * Chiropractic and Acupuncture medical re-examination report dated 02/09/2024 by John Johnson, DC, LAc. * Orthopedic medical re-examination report dated 02/02/2024 by Douglas Unis, MD. * Follow-up examination reports dated 12/14/2023 through 02/29/2024 from VLI Medical, PC. * Outcome assessment testing summary note dated 12/14/2023 from VLI Medical, PC. * Follow-up outcome assessment testing summary note dated 01/30/2024 from VLI Medical, PC. | * IME report, dated 02/09/2024, John E. Johnson Jr., D.C., L.Ac. * IME report, dated 02/02/2024, Douglas Unis, MD. * Follow-up examination reports, dated 10/05/2023 - 12/14/2023, VLI Medical, PC. * Pain management outcome assessment testing summary report, dated 12/14/2023, VLI Medical, PC. * Pain management outcome assessment testing summary report, dated 01/30/2024, VLI Medical, PC. * Follow-up examination report, dated 02/24/2024, VLI Medical, PC. * Physical therapy progress notes, dated 12/05/2023 - 03/11/2024. * Chiropractic progress notes, dated 10/12/2023 - 02/15/2024, VLI Medical, PC. * Physical therapy re-examination report, dated 11/25/2023 from Kinetic Approach Physical Therapy, PC. * Physical therapy progress notes, dated 07/18/2023 through 12/11/2023 from Kinetic Approach Physical Therapy, PC. * Chiropractic progress notes, dated 06/13/2023 through 11/22/2023 from JP Wellness Chiropractic, PC. * Acupuncture progress notes, dated 10/16/2023 and 10/23/2023 from Ji Acupuncture, PC. * MSK Ultrasound of the Lumbar vertebrae, Facet joints & soft tissues of the spine dated 10/11/2023 by David Gamburg, MD. * Follow-up examination report dated 10/24/2023 by David Gamburg, MD. * Chiropractic and Acupuncture medical examination report dated 10/13/2023 by John Johnson, DC, LAc. * Pharmacy prescription note dated 08/03/2023 by Venecia Marie, NP. * Orthopedic medical examination report dated 10/13/2023 by Douglas Unis, MD. * Electrodiagnostic and pain fiber sensory nerve conduction study lower extremities report dated 08/28/2023 from Youssefi Diagnostic Chiropractic Care of Queens, PC. * Outcome assessment testing summary note dated 08/24/2023 from VLI Medical, PC. * Follow-up outcome assessment testing summary notes dated 10/05/2023 through 12/14/2023 from VLI Medical, PC. * Electrodiagnostic and pain fiber sensory nerve conduction study upper extremities report dated 08/16/2023 from Youssefi Diagnostic Chiropractic Care of Queens, PC. | * IME report, dated 02/09/2024, John E. Johnson Jr., D.C., L.Ac. * IME report, dated 02/02/2024, Douglas Unis, MD. * Follow-up examination reports, dated 10/05/2023 - 12/14/2023, VLI Medical, PC. * Pain management outcome assessment testing summary report, dated 12/14/2023, VLI Medical, PC. * Pain management outcome assessment testing summary report, dated 01/30/2024, VLI Medical, PC. * Follow-up examination report, dated 02/24/2024, VLI Medical, PC. * Physical therapy progress notes, dated 12/05/2023 - 03/11/2024. * Chiropractic progress notes, dated 10/12/2023 - 02/15/2024, VLI Medical, PC. |