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Patient Name: John Sanchez Date of Birth: 05/02/1975

Date of Accident: 06/02/2025

Date of Treatment: 06/09/2025

#### **CHIEF COMPLAINT:**

1. Neck pain with radiation down arm 6/10

- 3. Low back pain 4/10
- 4. Right knee sprain 5/10
- 5. Left ankle sprain 7/10

#### **HISTORY OF PRESENT ILLNESS:**

The patient was involved in a recent motor vehicle accident as a pedestrian. While walking across the street, the patient looked over their right shoulder and was struck by a car on the right shoulder, causing them to fall. The patient immediately experienced pain around the neck extending towards the thoracic region. Later that day, the pain began radiating down the arm. The patient sought treatment at urgent care where neck X-rays were obtained and medication was prescribed. Initially, the pain subsided for a few days, but after approximately three days, symptoms worsened significantly. The patient reports additional symptoms including intermittent blurry vision, insomnia, and difficulty reading and focusing since the accident. No mention of hospital transport or ambulance was discussed.

### **PAST MEDICAL HISTORY:**

The patient has a history of type 2 diabetes mellitus.

# **PREVIOUS ACCIDENTS / TRAUMA:**

- 1994: Work compensation injury to low back, treated with chiropractic sessions with complete resolution

#### **CURRENT MEDICATIONS:**

- Metformin for type 2 diabetes

## **PAST SURGICAL HISTORY:**

Appendectomy approximately twenty years ago.

## **FAMILY HISTORY:**

No family history of medical conditions reported.

### **ALLERGIES:**

None disclosed.

#### **SOCIAL HISTORY:**

The patient denies tobacco use, alcohol consumption, and recreational drug use. Marital status is single with no children. The patient works as a truck driver and reports that pain is affecting their ability to perform job duties.

#### **REVIEW OF OTHER SYSTEMS:**

The patient reports intermittent blurry vision, insomnia, and difficulty with reading and focusing since the accident.

## **Duties under Duress / Complicating Factors:**

The patient experiences pain while performing duties as a truck driver.

## **PHYSICAL EXAMINATION:**

The patient presented for examination following recent motor vehicle trauma with multiple complaints affecting cervical, lumbar, and extremity regions.

### **CERVICO-THORACIC:**

Neck examination revealed restriction in right rotation and extension, both movements producing pain. There is tenderness noted in bilateral paraspinal muscles of the upper cervical spine. Bilateral acromioclavicular joint tenderness is present along with bilateral cervical and trapezius muscle spasm, with the spasm being worse on the left compared to the right. Spurling's test was normal, Halstead's maneuver was normal, and radial pulses were normal bilaterally.

### **LUMBOPELVIC:**

Lumbar spine examination demonstrated decreased extension with pain and decreased flexion without pain. There is tenderness along the bilateral sacroiliac joints with muscle spasm noted along the left piriformis. Kemp's test was normal and straight leg raise test was normal.

### **EXTREMITY:**

Bilateral medial elbow joint tenderness is present. ACL test of the right knee is negative. Tinel's test of the right elbow is positive.

## **NEUROLOGIC ASSESSMENT: MOTOR EXAMINATION**

Motor Strength Scale: 0/5 = No contraction, 1/5 = Trace contraction, 2/5 = Active movement without gravity, 3/5 = Active movement against gravity, 4/5 = Active movement against some resistance, 4+/5 perform a full range of motion against gravity and moderate resistance but with slight weakness 5/5 = Normal strength

Upper Extremity

MUSCLE GROUP	RIGHT	LEFT
DELTOID	5/5	5/5
BICEPS	5/5	4+/5
TRICEPS	5/5	5/5
WRIST EXT	5/5	5/5
FINGER FLEX	5/5	5/5
FINGER EXT	5/5	5/5
THUMB EXT	5/5	5/5
HAND INTRINSICS	5/5	5/5

# Lower Extremity

MUSCLE GROUP	RIGHT	LEFT
ILIOPSOAS	5/5	5/5
QUAD	5/5	5/5
HAMSTRINGS	5/5	5/5
GLUTEUS	5/5	5/5
ANTERIOR TIBIALIS	5/5	5/5
EXT HALLUCIS LONGUS	5/5	5/5

# **NEUROLOGIC ASSESSMENT: DEEP TENDON REFLEXES**

Reflex Scale: 0 = Absent, 1+ = Hypoactive, 2+ = Normal, 3+ = Hyperactive, 4+ = Hyperactive with clonus

REFLEX	RIGHT	LEFT
BICEPS	2+	2+
TRICEPS	2+	2+
BRACHIORADIALIS	2+	2+
PATELLAR	2+	2+
ACHILLES	2+	2+

# Additional Reflexes (if assessed):

REFLEX	RIGHT	LEFT
BABINSKI	Negative	Negative
CLONUS (ANKLE)	Negative	Negative

# **ASSESSMENT/DIAGNOSIS:**

- 1. Muscle spasm of back M62.830
- 2. Cervical disc disorder with radiculopathy M50.10
- 3. Lumbar disc disorder M51.9
- 4. Acute pain due to trauma R52
- **5.** Insomnia G47.00
- 6. Right knee sprain S83.91XA
- 7. Left ankle sprain S93.402A

### **PLAN:**

The patient is advised to take NSAID medication four times daily for the next three weeks. Chiropractic care is recommended for targeted therapy of both the cervical spine and lumbar spine to address the post-traumatic musculoskeletal injuries sustained in the motor vehicle accident.