

Patient Information

Name: John Doe

DOB: 07/15/1980

Age: 43

Gender: Male

Ethnicity: Caucasian

Height: 6'0"

Weight: 227 lbs

Occupation: Construction Worker

Initial Visit - Emergency Department

Date: 05/01/2023

Physician: Pedro Velez, MD

Nurse Practitioner: Mary Martin, NP

Chief Complaint:

Patient presents with severe pain, swelling, and inability to bear weight on the left ankle following a fall at a construction site.

History of Present Illness:

The patient reports falling off a ladder approximately 10 feet. Immediate pain and swelling were noted in the left ankle.

Physical Examination:

- **Vital Signs:** BP: 130/85, HR: 82 bpm, RR: 18, Temp: 98.6°F
- **Inspection:** Significant swelling and bruising around the left ankle.
- **Palpation:** Tenderness over the lateral malleolus, crepitus felt.
- **Range of Motion:** Severely limited due to pain.
- **Neurological:** Sensation intact distally.
- **Circulatory:** Pulses present and strong.

Imaging:

- **X-ray:** Comminuted fracture of the distal fibula with displacement.

Assessment:

- Comminuted fracture of the distal fibula (left ankle).

Plan:

- Reduction and immobilization in a posterior splint.

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- Pain management: Prescribed hydrocodone/acetaminophen 5/325 mg, 1-2 tablets every 6 hours as needed.
- Referral to orthopedic surgery for operative intervention.

Operative Report

Date: 05/02/2023

Surgeon: Pedro Velez, MD

Preoperative Diagnosis:

Comminuted fracture of the distal fibula (left ankle).

Postoperative Diagnosis:

Same.

Procedure:

Open reduction and internal fixation (ORIF) of the left distal fibula.

Anesthesia:

General anesthesia.

Findings:

The fracture was comminuted and displaced. Successful reduction and stabilization achieved with plate and screws.

Complications:

None.

Discharge Plan:

- Weight-bearing: Non-weight-bearing on the left leg.
- DVT prophylaxis: Prescribed enoxaparin 40 mg subcutaneously daily.
- Follow-up appointment in 1 week.

Follow-Up Visit 1

Date: 05/09/2023

Physician: Pedro Velez, MD

Nurse Practitioner: Mary Martin, NP

Subjective:

Patient reports significant pain improvement, slight swelling persists.

Objective:

- **Inspection:** Incision site clean, dry, and intact.

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- **Palpation:** Mild tenderness.
- **Range of Motion:** Limited but improving.

Assessment:

- Post-operative status is stable with no signs of infection.

Plan:

- Continue pain management as needed.
- Initiate physical therapy for range of motion exercises.
- Follow-up in 4 weeks.

Follow-Up Visit 2

Date: 06/06/2023

Physician: Pedro Velez, MD

Nurse Practitioner: Mary Martin, NP

Subjective:

Patient reports increased mobility and decreased pain.

Objective:

- **Inspection:** Incision healed.
- **Palpation:** No tenderness.
- **Range of Motion:** Improved significantly.
- **Strength:** 4/5 in left ankle.

Assessment:

- Healing progressing well.

Plan:

- Transition to weight-bearing as tolerated.
- Continue physical therapy.
- Follow-up in 6 weeks for evaluation and potential removal of hardware.

Final Follow-Up Visit

Date: 08/15/2023

Physician: Pedro Velez, MD

Nurse Practitioner: Mary Martin, NP

Subjective:

Patient reports full return to normal activities with minimal discomfort.

Objective:

- **Inspection:** No swelling or erythema.
- **Palpation:** No tenderness.
- **Range of Motion:** Full range of motion achieved.
- **Strength:** 5/5 in left ankle.

Assessment:

- Fully healed with no complications.

Plan:

- Discharge from regular follow-up.
- Advise patient on gradual return to full activity.
- Schedule hardware removal if symptomatic in the future.