Smith, John

DOB: January 20th, 1984

MRN: Unarmed **Date:** May 30th, 2022

Follow-up: in 1 month

Diagnosis: other meniscus derangements, unspecified medial meniscus, right knee (m23.303)

Work Duty: Full duty

Chief Complaint: Left knee pain

History Of Presenting Illness:

John Smith is a very pleasant 38 year old, left hand dominant, male who works as an engineer. He comes in today complaining of constant dull, achy, sharp pain to his left knee. He states the symptoms have been present since May 1st, 2022, at mild to severe level intensity and developed suddenly. He admits to injury: "twisted knee". He states symptoms are worse with pivoting and get better with ice, rest, bracing, and medication. He denies any radiating symptoms. He has not received treatment for this issue in the past. He has not taken any medications to help with this issue.

Allergies:

- 1. Sulfamethoxazole/Trimethoprim (Oral Pill) Hives
- 2. SYNTHROID (Oral Pill) Sun reaction
- 3. Levothyroxine (Oral Pill) Testing reaction
- 4. LEVO-T (Oral Pill) Levi reaction

Medications:

- 1. amLODIPine/Hydrochlorothiazide/Valsartan (Oral Pill) mg 1x Daily
- 2. AMLACTIN (Topical) mg 1x Daily

Past Medical History:

- 1. Anxiety
- 2. COPD/Emphysema
- 3. Hypertension
- 4. Seizure disorder

Past Surgical History:

- REPAIR EXTEN. MUSCLE/TEN.
- Knee replacement
- Carpal tunnel release
- REPAIR EXTENSOR TENDON LE
- REPAIR EXTENSOR TENDON LE
- NEEDLE ASPIRATION-ABS/HEMATOMA
- I&D ABSCESS-COMPLICATED
- I&D ABSCESS-COMPLICATED

Family History:

Mother's Conditions: blood clots

Fathers's Conditions: heart disease, and stroke Grand Parents Conditions: cancer, and stroke

Siblings Conditions: heart disease

Social History:

Occupation: Engineer Martial Status: single

Smokes: No Drinks: No

Hand Dominance: left

Review of Systems:

General: fever or chills, and trouble sleeping

Neurological: tingling

Skin: none

Hematologic: none

Musculoskeletal: muscle or joint pain, and back pain

Endocrine: none Psychiatric: none

Physical Examination: John Smith is awake, alert and oriented male that appears equal to the stated age. He has a pleasent demeanor. He is able to follow instructions. He is in no acute distress. Gait is antalgic.

Vitals:

Ht: 5' 6" Wt: 130 lbs BMI: 20.980257

BP: 120 / 80 Pulse: 70 RR: 14

CV: Regular rate and rhythm

Pulm: CTAB

Skin Exam positive for:

• Edema



The Patient has tenderness to palpation at:

• Plane

Range of motion:

• Right Knee Flexion/Extension 15°-115° Left Knee Flexion/Extension 0°-140°

Strength:

Right	Name	Left
5/5	Knee Flexion	5/5
4/5	Knee Extension	5/5
5/5	Hip Flexion	5/5
5/5	Hip Extension	5/5
5/5	Hip Abduction	5/5

The patient has a positive:

- Anterior Drawer on the Right Knee
- McMurray on the Right Knee

Assessment: John Smith is a 38 year old male with:

1. Other meniscus derangements, unspecified medial meniscus, right knee (M23.303)

Plan: John Smith presents signs and symptoms consistent with: other meniscus derangements, unspecified medial meniscus, right knee (m23.303)

Diagnosis and treatment plan was reviewed with the patient at today's visit. Treatment plan includes:

- NSAIDS
- Tylenol
- Cortisone Right knee
- Crutches
- Hinged knee brace

The patient will follow up in 1 month.

Work Duty:

Full duty