

Smith, John

DOB: January 20th, 1984

MRN: Unarmed

Date: May 29th, 2022

Follow-up: in 6 weeks

Diagnosis: lateral epicondylitis, right elbow (m77.11), and lesion of radial nerve, right upper limb (g56.31)

Work Duty: Full duty

Chief Complaint: Right elbow 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 sharp, sore, tender pain to his right elbow. He states the symptoms have been present since May 1st, 2022, at moderate to severe level intensity and developed suddenly. He admits to injury: "felt pop while lifting.". He states symptoms are worse with grasping, writing, and driving and get better with ice, rest, and medication. He admits to the radiation of symptoms down right arm . He has received previous treatment including cortisone. He has taken the following medications to help with this condition: ALEVE (Oral Pill) 220 mg TID

Allergies:

1. Acetaminophen/Codeine (Oral Pill) - Hallucinations
2. Sulfamethoxazole/Trimethoprim (Oral Pill) - Hives
3. Penicillin V potassium (Oral Pill) - Hives

Medications:

1. Levothyroxine (Oral Pill) - 100 mcg 4x Daily
2. LEVOXYL (Oral Pill) - 200 mcg 2x Daily
3. Simvastatin (Oral Pill) - 200 mcg 4x Daily
4. LEVO-T (Oral Pill) - 1 mcg 2x 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

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 pleasant demeanor. He is able to follow instructions. He is in no acute distress.

Vitals:

Ht: 5' 11"

Wt: 184 lbs

BMI: 25.659988

Pulse: 71

RR: 14

Skin Exam positive for:

- Normal

The Patient has tenderness to palpation at:

- Radial Tunnel Elbow right
- Right Lateral Epicondyle

Range of motion:

- Right Elbow Flexion/Extension 15°-125° Left Elbow Flexion/Extension 0°-140°
- Right Elbow Pronation 70°-° Left Elbow Pronation 70°-°
- Right Wrist Flexion 70°-80° Left Wrist Flexion 55°-35°

Strength:

Right	Name	Left
-------	------	------

5/5	Elbow Flexion	5/5
5/5	Elbow Extension	5/5
5/5	Elbow Supination	5/5
5/5	Elbow Pronation	5/5
5/5	Wrist Flexion	5/5
4/5	Wrist Extension	5/5
5/5	Wrist Pronation	5/5
5/5	Wrist Supination	5/5

The patient has a positive:

- Pain with Act Resisted Wrist Ext on the Right Elbow

Diagnostic Studies:

Three view x-rays of the right elbow ordered performed and interpreted today by me, demonstrate no fractures or dislocations, no lytic or blastic changes, no significant degenerative joint changes.

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

1. Lateral epicondylitis, right elbow (M77.11)
2. Lesion of radial nerve, right upper limb (G56.31)

Plan: John Smith presents signs and symptoms consistent with: lateral epicondylitis, right elbow (m77.11), and lesion of radial nerve, right upper limb (g56.31)

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

- NSAIDS
- Tylenol
- Home Exercise Program - Strengthening, ROM, Modalities
- Wrist brace

The patient will follow up in 6 weeks.

Work Duty:

Full duty

Dr. Ryan, Doctor

A handwritten signature in black ink, appearing to be 'm' followed by a horizontal line.

5/13/2022, 8:37:16 PM