Smith, John

DOB: January 20th, 1984

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

Follow-up: in 1 month

Diagnosis: other spondylosis with radiculopathy, site unspecified (m47.20)

Work Duty: Full duty

Chief Complaint: Right side of neck

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 frequent to his right side of neck. He states the symptoms have been present since May 1st, 2022, at severe to mild level intensity and developed suddenly. He denies any injury. He states symptoms are worse with carrying and get better with heat. He admits to the radiation of symptoms . He has received previous treatment. 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:

Vitals:

Ht: 5' 10" Wt: 133 lbs BMI: 19.081429

BP: 120 / 80 Pulse: 70 RR: 14

CV: Regular rate and rhythm

Pulm: CTAB

Skin Exam positive for:

Normal

The Patient has tenderness to palpation at:

- Right Neck Trapezius
- Right Cervical Spine

Range of motion:

- Right Neck Cervical Lateral Flexion 0°-40° Left Neck Cervical Lateral Flexion 0°-40°
- Right Neck Cervical Rotation 0°-70° Left Neck Cervical Rotation 0°-70°
- Right Neck Cervical Flexion 0°- 50° Left Neck Cervical Flexion 0°-45°

Strength:

Right	Name	Left
5/5	Upper Spine Shoulder Abduction	5/5

5/5	Upper Spine Elbow Flexionn	5/5
4/5	Upper Spine Elbow Extension	5/5

Spine Strength:

Name	value
Cervical Spine Flexion	5/5
Cervical Spine Extension	5/5
Thoracic/Lumbar Flexion	5/5
Thoracic/Lumbar Extension	5/5
Cervical Spine Flexion	5/5
Cervical Spine Extension	5/5
Thoracic/Lumbar Flexion	5/5
Thoracic/Lumbar Extension	5/5
Cervical Spine Flexion	5/5
Cervical Spine Extension	5/5
Thoracic/Lumbar Flexion	5/5
Thoracic/Lumbar Extension	5/5

Reflexes:

Right	Name	Left
2+	Triceps	2+
2+	Brachioradialis	2+

The patient has a positive:

• Ihermitte on the Right Neck

Distribution Of Radiation:

• C6-Right

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

1. Other spondylosis with radiculopathy, site unspecified (M47.20)

Plan: John Smith presents signs and symptoms consistent with: other spondylosis with radiculopathy, site unspecified (m47.20)

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

- Physical Therapy Pt
- NSAIDS
- Tylenol
- Rest, ice, compress, elevate
- Miami collar

The patient will follow up in 1 month.

Work Duty:

Full duty