

Smith, John

DOB: January 20th, 1984

MRN: Unarmed c1

Date: June 15th, 2022

Follow-up: in 6 weeks.

Diagnosis: lateral epicondylitis, left elbow (m77.12)

Work Duty: Full duty

Chief Complaint: Left 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 frequent and sore, tender pain to his left elbow. He states the symptoms have been present since June 1st, 2022, at mild to severe level intensity and developed suddenly. He admits to injury: "dcdcd". He states symptoms are worse with lifting and grasping and get better with ice and rest. 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

Medications:

1. amLODIPine/Hydrochlorothiazide/Valsartan (Oral Pill) mg 1x Daily

Past Medical History:

1. Anxiety
2. Kidney disease
3. Seizure disorder

Past Surgical History:

- Tonsillectomy
- Intrauterine device (IUD)
- Aortic valve replacement
- ARTHROPLASTY TOTAL KNEE
- NEUROLYSIS CARPAL TUNNEL
- NEUROLYSIS CARPAL TUNNEL
- NEUROLYSIS CARPAL TUNNEL
- REPAIR EXTEN. MUSCLE/TEN.
- REPAIR EXTEN. MUSCLE/TEN.
- TOTAL HIP REPLACEMENT

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: yes - 1 per sitting/weekly

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:

General Examination: John Smith is a&o x 2 male. He appears greater than stated age. He has a pleasant demeanor. He is able to follow instructions. He is in no acute distress. Gait is antalgic.

Skin Exam positive for:

- Normal

Vascular Exam:

- Radial Pulse 2+
- Brachial Pulse 2+
- Capillary Refill 2+
- Radial Pulse 2+
- Brachial Pulse 2+
- Capillary Refill 2+

Neuro Exam:

- Normal sensation distally
- Normal sensation distally

The patient has tenderness to palpation at:

- Left Lateral Epicondyle

The patient has no tenderness at:

- Left Elbow Medial Epicondyle
- Left Elbow Olecranon
- Left Elbow Posterolateral Joint Line
- Left Elbow Radial Head/Neck

Range of motion:

- Right Elbow Flexion -5°-140°
- Left Elbow Flexion 10°-125°

Strength:

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Right	Name	Left
5/5	Elbow Flexion	5/5
5/5	Elbow Extension	5/5

The patient has a positive:

- Pain with Act Resisted Wrist Ext on the Left Elbow

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

1. Lateral epicondylitis, left elbow (M77.12)

Plan: John Smith presents signs and symptoms consistent with: lateral epicondylitis, left elbow (m77.12)

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

- Cortisone - After review of risks and benefits including hypopigmentation and fat atrophy, decision made to proceed with injection. Expectations from injection were reviewed including temporary anesthesia followed by possible flare response from steroid. This can be managed with ice and non-steroidal medications. Response to injection is typically 1-3 days after injection. After sterile prep, injection was performed to the right lateral epicondyle, with a combination of 1.5 cc of Celestone and 1.5 cc of 2% Lidocaine.
- Wrist brace

The patient will follow up in 6 weeks.

Work Duty:

Full duty