Smith, John

DOB: January 20th, 1984

MRN: Unarmed c1 Date: June 15th, 2022

Follow-up: in 6 weeks.

Diagnosis: sprain of unspecified ligament of left ankle, initial encounter (s93.402a)

Work Duty: Full duty

Chief Complaint: Left ankle 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 and dull, achy pain to his left ankle. He states the symptoms have been present since June 1st, 2022, at moderate to severe level intensity and developed suddenly. He admits to injury: "rolled ankle". He states symptoms are worse with weightbearing and walking 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

aggitation. He is able to follow instructions. He is in 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
- Diminished sensation

The patient has tenderness to palpation at:

- Left Ankle Anterior Joint Line
- Left Ankle Posterior Tibial Tendon
- Left Ankle Peroneal Tendon
- Left Ankle Anterior Joint Line
- Left Ankle Posterior Tibial Tendon
- Left Ankle Peroneal Tendon
- Left Lateral Malleolus

The patient has no tenderness at:

- Left Ankle Distal Fibula
- Left Ankle Distal Tibia
- Left Ankle Distal Fibula
- Left Ankle Distal Tibia

Range of motion:

- Right Ankle Dorsiflexion 30.0°-50°
- Left Ankle Dorsiflexion 50°

Strength:

Right	Name	Left
5/5	Ankle Dorsiflexion	5/5
5/5	Ankle Plantarflexion	5/5

The patient has a positive:

- Tibia/Fibula Compression on the Left Ankle
- Anterior Drawer on the Left Ankle
- Talar Tilt on the Left Ankle

The patient has a negative:

- Tibia/Fibula Compression on the Right Ankle
- Anterior Drawer on the Right Ankle
- Talar Tilt on the Right Ankle

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

1. Sprain of unspecified ligament of left ankle, initial encounter (S93.402A)

Plan: John Smith presents signs and symptoms consistent with: sprain of unspecified ligament of left ankle, initial encounter (s93.402a)

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

- Physical Therapy -
- Crutches
- Aircast

The patient will follow up in 6 weeks.

Work Duty:

Full duty