



445 E Anaheim Street Suite L
Wilmington, CA 90744 - 4600
PH: 562 267-3798
FAX: 562-222-3883

PROGRESS NOTE

Patient First Name:	Patient Last Name:	Date of Birth:	Sex:
Ronald	Cruz	10-25-1962	Male
Attending Provider:	Referring Provider:	Visit Date:	Chart No.:
Shayla Matthews, FNP-C		09-19-2023	SCL42399
Insurance:	Employer:	Claim Number:	Date of Injury:
Gallagher Bassett	Hyatt Regency Long Beach	011202-079054-WC01	04-27-2023
Appointment Location:		Appointment Location Address:	
Agile Occupational Medicine, Wilmington		445 E Anaheim Street, Suite L, Wilmington CA 90744 - 4600	

History of Present Illness

Patient is a 60 year old male.

Patient returns for left knee pain. Patient states it is getting harder to get in and out of the car. He reports constant, 6 out 10 pain with movement. Physical therapy is helping but patient says he still experiencing a lot of pain. Patient says he is at 60% baseline.

Past Medical History

Diabetic . Nerve pain .

Surgical History

No Known Surgical History

Allergy

No Known Drug Allergies.

Current Medication

lidocaine 5 % topical patch 1 Every 12 Hours PRN

cyclobenzaprine 10 mg tablet 1 Tablet Every 8 Hours PRN

NA

Social History

Work History: He is employed - full time. He has been in the current profession for 9years.

Use of Drugs/Alcohol/Tobacco: Drinks alcohol rarely. He denies his alcohol consumption as being problem to self or family or others. Does not drink caffeinated beverages. He has never used any illicit drugs. He denies using street drugs with a needle.

Vitals

Pain scale was 6 out of 10.

Weight: 150.00 lbs.

Height: 67.00 inches.

Temperature: 98.50 F.

Pulse: 88 per min.

Pulse rhythm regular: Yes

Respiration: 16 breaths per min.

BMI: 23.

BP Systolic: 151 mm Hg.

BP Diastolic: 74 mmHg.

Pulse Oximetry: 97

Physical Examination

LUMBAR EXAM

A. VISUAL INSPECTION: Normal gait and posture. No gross deformity. No swelling. No ecchymosis, no open wounds or skin lesions.

B. PALPATION: No tenderness to palpation.

C. ACTIVE RANGE OF MOTION:

FLEXION 0 to 60 degrees

EXTENSION 0 to 25 degrees

RIGHT ROTATION 0 to 18 degrees

LEFT ROTATION 0 to 18 degrees

RIGHT FLEXION 0 to 25 degrees

LEFT FLEXION 0 to 25 degrees

D. NEUROVASCULAR: Normal 2/4 reflexes at the Patella and Achilles tendons bilaterally. 5/5 motor strength in the back and lower extremities. No sensory deficit to light touch. Capillary refill less than 2 seconds.

E. SPECIALTY TESTS: Straight leg testing is negative bilaterally.

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KNEE EXAM

A. LATERALITY: Left

B. VISUAL INSPECTION: No gross deformity, no swelling, no ecchymosis, or any open wounds.

C. PALPATION: Mild tenderness to palpation.

D. ACTIVE RANGE OF MOTION:

FLEXION 0 to 135 degrees

EXTENSION 0 degrees

VARUS 0 to 2 degrees

VALGUS 0 to 6 degrees

E. NEUROVASCULAR: Capillary refill less than 2 seconds.

F. SPECIALTY TESTS: Negative Varus and Valgus maneuvers for lateral and medial collateral ligament stability. Negative Anterior and Posterior Drawer tests. Negative McMurray's test.

G. CONTRALATERAL SIDE: Exam is normal.

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Orders:

Assessment and Plan

ICD: Lumbar strain (S39.012A)

Assessment: Patient evaluated today for follow up visit for left knee pain. Patient reports minimal improvement.

Plan: Continue Physical Therapy sessions for strengthening and mobility. Ibuprofen as needed for pain. Ice twice daily as needed for pain. Activity as tolerated. Will reassess in 1 week to re-evaluate injury progression

ICD: Posterior left knee pain (M25.562)

CPT Codes:

Office O/p Est Low 20-29 Min (99213)

E and M Time Factor/ Medical Decision Making Notes:

Number and Complexity of Problems Addressed

1 acute, uncomplicated illness or injury

Risk of Complications and/or Morbidity or Mortality of Patient Management

Low risk of morbidity from additional diagnostic testing or treatment

Follow up: -

Handwritten signature of Shayla Matthews in black ink. The signature is cursive and includes the letters 'FNP-C' written in small capital letters above the end of the signature.

Shayla Matthews FNP-C

This has been electronically signed by Shayla Matthews FNP-C for visit dated 09-19-2023.

Clinic Address: 445 E Anaheim Street, Suite L, Wilmington CA 90744 - 4600

Handwritten signature of Minh Nguyen in black ink. The signature is cursive and stylized.

Minh Nguyen DO, MPH, FACOEM

Supervising Provider

This has been electronically signed by Minh Nguyen DO, MPH, FACOEM for visit dated 09-19-2023.

Handwritten signature of Minh Nguyen in black ink. The signature is cursive and stylized, identical to the one above.

Minh Nguyen DO, MPH, FACOEM

Rendering Provider

Cruz, Ronald DOB:10-25-1962

This has been electronically signed by Minh Nguyen DO, MPH, FACOEM for visit dated 09-19-2023.