



6001 Shellmound St. Suite 115
Emeryville, CA 94608 - 1924
PH: 510-653-5200
FAX: 510 956-8192

PROGRESS NOTE

Patient First Name:	Patient Last Name:	Date of Birth:	Sex:
Alexander	Aponte	09-24-1971	Male
Attending Provider:	Referring Provider:	Visit Date:	Chart No.:
Dennis James, PA		09-19-2023	SCL59201
Insurance:	Employer:	Claim Number:	Date of Injury:
Sentry Insurance	Treasury Wine Estates Americas	55C625175-537	06-14-2021
Appointment Location:		Appointment Location Address:	
Agile Occupational Medicine, Emeryville		6001 Shellmound St., Suite 115, Emeryville CA 94608 - 1924	

History of Present Illness

Patient is a 51 year old male.

Past Medical History

No Known Past Medical History

Surgical History

Apendisitis . Fractura femur derecho .

Allergy

No Known Drug Allergies.

Current Medication

Has Hydrocodone but does not take.

Social History

Work History: He is on disability. He has been in the current profession for 30. Prior occupation: Electricista toda la vida.

Use of Drugs/Alcohol/Tobacco: Never drinks any alcohol. Reports drinking No. Smoking Status (MU) never smoker. Reports consuming caffeine/cafeinated drinks 1-2 cup a day. He has never used any illicit drugs. He denies using street drugs with a needle.

Review of Systems

Constitutional Symptoms: Normal Appearance. Reports **Any kind of disability, for any reason.** Denies fever, weight loss or fatigue.

Eyes: Denies blurred vision, double vision, glaucoma, discharge, itching, lacrimation, pain or redness of eyes.

Ears/Nose/Throat/Mouth: Denies poor hearing, dry mouth or sore throat.

Cardiovascular: Denies chest pain, chest tightness, tightness/pressure/squeezing, palpitations, prior heart attack, heart murmur or fainting.

Respiratory: Denies shortness of breath with exertion, shortness of breath with lying flat, chest tightness, asthma, COPD or Pneumonia.

Gastrointestinal: Denies blood in stool, ulcers, diarrhea or constipation.

Genitourinary: Denies kidney stones, frequent urination or bladder infection.

Skin: Denies cancer, bruising, rash, infection/ulcer or discoloration in legs.

Musculoskeletal: Denies arthritis or gout. Reports **sore muscles.**

Comments: Knee strain, swelling.

Hematologic/Lymphatic: Denies anemia, swelling or leukemia.

Endocrine: Denies diabetes, thyroid disease or Cushing disease.

Neurologic: Denies dizziness, strokes, headaches or difficulty walking.

Psychiatric: Denies anxiety or depression.

Allergic / Immunologic: Denies hay fever, sinusitis or immune deficiency.

Molestia

en rodilla por accidente

Vitals

Pain scale was 0 out of 10.

Weight: 200.00 lbs.

Height: 68.00 inches.

Temperature: 98.50 F.

Pulse: 87 per min.

Pulse rhythm regular: Yes

BMI: 30.

BP Systolic: 124 mm Hg.

BP Diastolic: 94 mmHg.

Height (in): 68.

Weight: 200.

Blood Pressure - Systolic: 124.

Blood Pressure - Diastolic: 94.

Heart Rate: 87.

Temp: 98.5.

Physical Examination

Pre-employment Physical: Normal Head / Face, PERRLA, EOMI, Fundoscopic, Ears External and Canal, Tympanic Membrane, Nose, Mouth (Oral Mucosa, Palate), Throat, Skin (include scars), Neck, Thyroid, HEART Rhythm, Auscultation, Vascular (Bruits, Varicosities, Cyanosis), Lungs, Abdomen, Shoulders, Elbows, Wrists/Hands, Hips/Thighs, Ankles/Feet, Cervical Spine, Thoracic Spine, Lumbar Spine, Neuro and Romberg. Abnormal **Knees** R knee decreased ROM and pain medially and laterally. Right biceps reflex 2 +/4, Left biceps reflex 2 +/4, Right patellar reflex 2 +/4, Left patellar reflex 2 +/4, Right Achilles reflex 2 +/4, Left Achilles reflex 2 +/4.

General Preop: Normal

Heart: Normal

Vascular/Bruits: Normal

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Lungs-Preop: Upon inspection, chest wall was normal.

Abdomen - Preop: Normal

Extremities: Normal

Orders:

***EKG**

TESTS:

EKG Done: Yes.

Labs Ordered

Order No: LAB0005347 **Dated:** 09-19-2023 **Lab:** Any Lab

In House: *Urine Dip Stick

CPT Codes:

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

EKG (ANEKG93000)

Follow up: No Follow Up



Dennis James PA

This has been electronically signed by Dennis James PA for visit dated 09-19-2023.

Clinic Address: 6001 Shellmound St., Suite 115, Emeryville CA 94608 - 1924



Minh Nguyen DO, MPH, FACOEM
Supervising Provider

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



Minh Nguyen DO, MPH, FACOEM
Rendering Provider

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

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