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August 18, 2022

Re: Lima, Olberto
DOB: 06/05/1976
DOA: 08/20/2021
Location: 82nd Street-Ortho

INITIAL ORTHOPEDIC CONSULTATION

CHIEF COMPLAINT: Right knee pain.

HISTORY OF PRESENT ILLNESS: This is an initial orthopedic evaluation for a 46-year-old right-handed dominant male, involved in a work related accident on 08/20/2022. Patient was cutting block on a machine when he cut his shin on it. The EMS did not arrive on the scene. The patient presents today complaining of right knee pain sustained in the work related accident. The patient has been treated with physical therapy for the last week without adequate relief.

PRESENT COMPLAINTS: Right knee pain is 8/10, described as intermittent, stiff pain. The patient has difficulty raising from a chair and walking up and down stairs. The patient also notes, clicking, popping, clicking, intermittent locking. Pain is temporarily improved with therapy.

PAST MEDICAL HISTORY: Noncontributory.

PAST SURGICAL HISTORY: Noncontributory.

DRUG ALLERGIES: NO KNOWN DRUG ALLERGIES.

MEDICATIONS: The patient is not taking any medication at this time.

SOCIAL HISTORY: The patient is a nonsmoker. The patient does not drink alcohol.

WORK HISTORY: The patient is currently working.

IMPAIRMENT RATING: Patient is currently and temporarily 50% disabled.

ADL CAPABILITIES: The patient states that he can walk for 1/2 block. He can stand for 5 minutes before he has to sit. He can sit for 5 minutes before needing to change positions secondary to pain. As a direct result of the injuries sustained in this accident, the patient states that he is unable to do the following activities: carrying heavy objects, laundry, shopping, running errands, kneeling, squatting, negotiating stairs, jogging, and exercising.

REVIEW OF SYSTEMS: General: No fever, chills, night sweats, weight gain, or weight loss.

PHYSICAL EXAMINATION: The patient's height is 5 feet 1 inch, weight is 140 pounds.

Patient is alert, oriented and cooperative.

Right Knee: No heat or erythema noted. Reveals swelling and tenderness upon palpation of the inferior patella. Positive anterior and posterior drawer test. Range of motion reveals flexion is 110 degrees, normal is 135 degrees; extension is 0 degrees, normal is 0 degrees. Knee is stable with varus and valgus stress test. The patient has no motor or sensory deficit of the right lower extremity.

DIAGNOSTIC STUDIES: Right knee MRI, done on 03/15/2022, Subcortical cystic changes in the proximal tibia. Medial head of the gastrocnemius muscle strain. Significant edema in the prepatellar region compatible with trauma sequelae.

FINAL DIAGNOSES:

1. Joint effusion, right knee - M25.461
2. Pain, right knee - M25.561

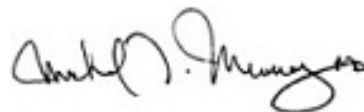
PLAN:

1. Imaging studies and clinical examinations were reviewed with the patient.
2. All treatment options discussed with the patient.
3. Continue physical therapy for right knee 3 days/week.
4. Discussed right knee arthroscopy versus conservative management with the patient. The patient states that due to continual pain and lack of relief with physical therapy and the inability to perform day-to-day activities due to pain, the patient would like to proceed with right knee surgery.
5. The patient needs Workers' Compensation Board authorization prior to surgery.
6. The patient verbally consents for the arthroscopy of right knee and the patient will be scheduled for right knee surgery. On the day of the surgery, before the procedure, the surgeon will explain all related questions of the procedure. The patient will sign a written consent and be witnessed by the surgeon.

CAUSALITY: It is within a certain degree of medical certainty, that the history presented by the patient, the objective physical findings as well as the diagnosis rendered is causally related to the injury the patient incurred on August 20, 2021. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient.



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RK/AEI



Michael Murray, MD