## **KDV** Medical P.C.

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August 31, 2022

Re: Rosario, Roberto DOB: 04/07/1992 DOA: 08/04/2022

Location: TS Chiropractic Wellness

## INITIAL ORTHOPEDIC CONSULTATION

**CHIEF COMPLAINT:** Right shoulder and right knee pain.

HISTORY OF PRESENT ILLNESS: This is an initial orthopedic evaluation for a 30-year-old right-hand dominant male, involved in a motor vehicle accident on 08/04/2022. Patient was a front seat passenger when another car hit them on the front passenger side. No airbags deployed. The patient went to New York Presbyterian Hospital and was treated and released the same day. The patient presents today complaining of right shoulder and right knee pain sustained in the motor related accident. The patient has been treated with physical therapy for the last 3 weeks without adequate relief.

Right shoulder pain is 8-9/10, described as constant pain. The patient reports pain with reaching overhead and behind and is frequently woken up at night due to pain.

Right knee pain is 8-9/10, described as constant with weakness and pain. The patient has difficulty raising from a chair and walking up and down stairs. The patient also notes clicking. There is crepitus noted.

PAST MEDICAL HISTORY: Noncontributory.

PAST SURGICAL HISTORY: Noncontributory.

DRUG ALLERGIES: NO KNOWN DRUG ALLERGIES.

**MEDICATIONS:** The patient is taking ibuprofen prn pain.

**SOCIAL HISTORY:** The patient is a nonsmoker. The patient drinks alcohol occasionally.

**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 has difficulty with the following activities: driving, lifting heavy objects, carrying heavy objects, reaching overhead, laundry, shopping, running errands, kneeling, squatting, negotiating stairs, jogging and exercising.

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

**PHYSICAL EXAMINATION:** The patient's height is 6 feet, weight is 195 pounds. Patient is alert, oriented and cooperative.

Right Shoulder: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the supraspinatus AC joint and subacromial space. Positive Empty Can test. Positive Hawkins test. Positive O'Brien test. Positive Impingement test. Positive Lift-Off test. Range of motion, abduction is 100 degrees, normal is 180 degrees; forward flexion is 120 degrees, normal is 180 degrees; internal rotation is to PSIS; external rotation is 70 degrees, normal is 90 degrees. The patient has no motor or sensory deficit of the right upper extremity.

Right Knee: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the medial and lateral joint line and patella. Positive McMurray test. Positive patellofemoral grinding test. Range of motion reveals flexion is 100 degrees, normal is 135 degrees. Knee is stable with varus and valgus stress test. The patient has no motor or sensory deficit of the right lower extremity.

**<u>DIAGNOSTIC STUDIES</u>**: Right shoulder MRI, done on 08/25/2022 revealed impingement. Tendinosis/tendonitis with intrasubstance tearing of the subscapularis, infraspinatus and supraspinatus portions of the cuff. Anterior and posterior labral tearing. The biceps tendon is hypo plastic. AC narrowing and acromion spurring. Synovitis of the patulous axillary pouch of the inferior glenohumeral ligament. Supra and infrapatellar plica. Quadriceps and patellar tendinosis/tendonitis.

Right knee MRI, done on 08/25/2022 revealed partial ACL tear with thickening and heterogeneity. Joint effusion. Tearing of both media] and lateral menisci. Supra and infrapatellar plica. Quadriceps and patellar tendinosis/tendonitis.

## FINAL DIAGNOSES:

- 1. Impingement, right shoulder. M75.41
- 2. Labral tear, right shoulder. S43.431A
- 3. Pain, right shoulder M25.511
- 4. Partial rotator cuff tear, right shoulder S46.011A
- 5. ACL tear, right knee S83.519A
- 6. Lateral Meniscus tear, right knee S83.281A
- 7. Medial Meniscus tear, right knee S83.241A
- 8. 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 anti-inflammatory and muscle relaxant medications p.r.n.
- 4. Continue physical therapy for right shoulder and right knee 3 days/week.
- 5. Follow up in 4-6 weeks

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<u>CAUSALITY:</u> It is within a certain degree of medical certainty, that the history presented by the patient, the objective physical findings as well as the diagnoses rendered is causally related to the injury the patient incurred on the right shoulder and right knee on August 04, 2022. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient.

Nadezhda Bababekova, NP-BC Michael Murray, MD

NB/AEI