

KDV Medical, P.C.

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September 28, 2022

Re: Munoz, Maria

DOB: 01/30/1968

DOA: 12/29/2021

Location: Cruz Banting Imelda MD PT

ORTHOPEDIC RE-EVALUATION

CHIEF COMPLAINT: Right shoulder pain.

HISTORY OF PRESENT ILLNESS: This is a 54-year-old right-hand dominant female who presents for follow-up evaluation of injuries sustained in a work related incident on 12/29/2021.

Right shoulder pain is 3/10, described as intermittent pain. The patient reports pain with reaching overhead and behind. Patient has been doing physical therapy with moderate relief of pain.

PHYSICAL EXAMINATION:

Right Shoulder: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the AC joint. Positive Empty Can test. Positive Hawkins test. Range of motion, abduction is 160 degrees, normal is 180 degrees; forward flexion is 170 degrees, normal is 180 degrees; internal rotation to L3; external rotation is 80 degrees, normal is 90 degrees. The patient has no motor or sensory deficit of the left upper extremity.

DIAGNOSTIC STUDIES:

Right shoulder MRI, done on 04/12/2022, Disruption of the supraspinatus tendon with retraction of tendon fibers to the mid humeral head. There is full-thickness tear of the infraspinatus tendon with partial retraction of some fibers. Intrastance tear of the proximal intra articular biceps tendon at the biceps anchor. Fluid in the subacromial, subdeltoid and subcorocoid bursa as well as within the glenohumeral joint.

FINAL DIAGNOSES:

1. Bursitis, right shoulder - M75.51
2. Joint Effusion, right shoulder - M25.411
3. Pain, right shoulder - M25.511
4. Partial rotator cuff tear, right shoulder - S46.011A

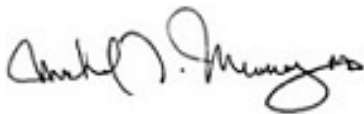
PLAN:

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 3 days/week.
5. Follow up in 4-6 weeks prn.

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IMPAIRMENT RATING: Patient is currently and temporarily 100% disabled and is currently not working.

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 diagnoses rendered are causally related to the injury the patient incurred on the right shoulder on December 29, 2021. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient.

A handwritten signature in black ink, appearing to read "Michael Murray", is positioned above a horizontal line.

Nadezhda Bababekova, NP-BC
Michael Murray, MD

NB/AEI