

Ketan D Vora, DO, P.C.

INITIAL INTAKE SHEET

Patient Name: Nicaj, Peter **WC** **NF** **LIEN** **M** / **F** DOA: 5/11/2020
 DOB: 7/1/1971 Age: 49 Height: 6.0 Weight: 190 Handed: **R** / **L**
 Chief Complaint: **R/SH** **L/SH** **R/KN** **L/KN** **R/Elb** **L/Elb** **R/Hip** **L/Hip** **R/Ank** **L/Ank**
R/Wri **L/Wri** Neck Mid-back Low-back
 Type of Injury: MVA **Work-Related** Working: **Y** **N** Degree of Disability: 100 %
 Asymptomatic prior to accident: **Y** / **N** History of prior trauma: **Y** / **N**
 Pain in: _____
 Other: _____

Pedestrian **Bicyclist** **Motorcyclist** **Bus pass.** **Driver** **Front Pass.** **Rear Pass** **PT centers in St. Barnabas**
Vehicle hit: **Rear** **Front** **Driver-side front** **Driver side rear** **Passenger side front** **Passenger side rear** **T-Boned Driver side** **T-Bone Passenger side**
Airbags deployed: **Y** / **N** **EMS Arrived:** **Y** / **N** **Police at Scene:** **Y** / **N**
Went to Hospital: **Y** / **N** **Hospital name:** St. Barnabas **Amb.** **Car**
PMH: **None** **Diabetes** **HTN** **HLD** **Asthma** **Cardiac** **Thyroid** **CA**
PSH: **None** Three Arthroscopy 4 yrs ago
Meds: **None** / **Pain meds:** PRN Excedrin PRN Ibuprofen
Drug Allergy: **Y** / **N**
Soc. His: **Smoke** **Y** / **N** **ppd** **Alcohol** **Y** / **N** **Recreational Drugs** **Y** / **N**
PT/Chiro: **Y** / **N** **Duration:** 1 **Weeks** / **Months** / **Years** **Relief:** **Good** **Little** / **None**
Walk: **Y** / **N** 2 **blocks** **Stand:** **Y** / **N** mins **Sit** **Y** / **N** mins
Unable to: **Garden** **Play sports** **Drive** **Lift** **Childcare** **Carry** **Reach overhead**
Laundry **Shopping** **Errands** **Kneel** **Squat** **Stairs** **Jog** **Exercise**

PRESENT COMPLAINTS:

RSH Pain <u>8</u> / 10 Constant Intermittent Stiff Weak Pop Click Reach overhead Y / N Reach back Y / N Unable to sleep at night Imp w/ Rest Med PT Ice	LSH Pain <u>8</u> / 10 Constant Intermittent Stiff Weak Pop Click Reach overhead Y / N Reach back Y / N Unable to sleep at night Imp w/ Rest Med PT Ice	RKN Pain <u>8</u> / 10 Constant Intermittent Stiff Weak Diff rising from chair Y / N Diff w/ stairs Y / N Click Pop Buckle Lock Imp w/ Rest Med PT Ice	LKN Pain <u>7</u> / 10 Constant Intermittent Stiff Weak Diff rising from chair Y / N Diff w/ stairs Y / N Click Pop Buckle Lock Imp w/ Rest Med PT Ice
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RHIP Pain <u>8</u> / 10 Constant Intermittent Lock Pain w/ stand walk climb Standing from sitting Imp w/ Rest Med PT Ice	LHIP Pain <u>8</u> / 10 Constant Intermittent Lock Pain w/ stand walk climb Standing from sitting Imp w/ Rest Med PT Ice	RANK Pain <u>8</u> / 10 Constant Intermittent Pain w/ stand walk climb Imp w/ Rest Med PT Ice	LANK Pain <u>8</u> / 10 Constant Intermittent Pain w/ stand walk climb Imp w/ Rest Med PT Ice
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RWRI Pain <u>8</u> / 10 Constant Intermittent Weak Numb Tingle Pain w/ lift carry drive Imp w/ Rest Med PT Ice	LWRI Pain <u>8</u> / 10 Constant Intermittent Weak Numb Tingle Pain w/ lift carry drive Imp w/ Rest Med PT Ice	RELb Pain <u>8</u> / 10 Constant Intermittent Weak Numb Tingle Pain w/ lift carry drive Imp w/ Rest Med PT Ice	LElb Pain <u>9</u> / 10 Constant Intermittent Weak Numb Tingle Pain w/ lift carry drive Imp w/ Rest Med PT Ice
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Other Complaints: _____

ROS: _____

PT centers in St. Barnabas
HO,
was transferring
at St. Barnabas
to an outside trailer
& trapped on road.
S/P Arthroscopy 4 yrs ago
Steroid inj 8 months ago
Steroid inj 6 months ago w/o Adequate relief
radiating down thigh & still slight

General: Fevers chills night sweats weight gain weight loss
HEENT: Double vision eye pain eye red. hearing loss earache ear ringing nose bleeds sore throat hoarseness
Endocrine: Cold intolerance appetite changes hair changes
Skin: Clear no rashes or lesions
Neuro: Headaches dizziness vertigo tremors
Respiratory: Wheezing coughing shortness of breath difficulty breathing
Cardiovascular: Chest pain murmurs irregular heart rate hypertension
GI: Nausea vomiting diarrhea constipation jaundice change in bowel habits
GU: Blood in urine painful urination loss of bladder control urinary retention
Hematology: Active bleeding bruising anemia blood clotting disorders
Psychiatric: Anxiety change in sleep pattern depression suicidal thoughts

PHYSICAL EXAMINATION:

C SPINE: Pain Sharp Shoot Burn Constant Intermittent Numb Tingling Radiates to R L

Pain w/ neck bend lift carry Improves w/ Rest Med PT Ice

ROM: Flex. ___/45 Ext. ___/45 R Lat Flex. ___/45 L Lat Ext. ___/45 Rot ___/60

L SPINE: Pain Sharp Shoot Burn Constant Intermittent Numb Tingling Radiates to R L

Pain w/ stand walk sit bend Improves w/ Rest Med PT Ice

ROM: Flex. ___/80 Ext. ___/25 R Lat Flex. ___/35 L Lat Ext. ___/45 Sac Hip Flex ___/45

R /SH: Swelling /Tender to palp → Supraspinatus AC joint Trap. Prox biceps Coracoid Deltoid Scapula

Heat Erythema Crepitus Deformity

Drop Arm Cross-Over Empty Can Yergason Deltoid Atrophy

O'Brien's Impingement Lift off test Hawkins

ROM: Abd. ___/180 Add. ___/45 For Flex. ___/180 Ext. ___/60 IR ___/90 ER ___/90

IR: sacrum mid back ___ no motor or sensory deficit

L /SH: Swelling/Tender to palp → Supraspinatus AC joint Trap. Prox biceps Coracoid Deltoid Scapula

Heat Erythema Crepitus Deformity

Drop Arm Cross-Over Empty Can Yergason Deltoid Atrophy

O'Brien's Impingement Lift off test Hawkins

ROM: Abd. ___/180 Add. ___/45 For Flex. ___/180 Ext. ___/60 IR ___/90 ER ___/90

IR: sacrum mid back ___ no motor or sensory deficit

R /KN: Swelling / Tender along → Med joint line Lat joint line Sup. patella Inf. Patella Pop. fossa

Heat Swelling Erythema Crepitus Deformity

McMurray Lachmans Pat. fem. grind Ant. draw Post. draw

ROM: Flexion 120/130 Extension ___/5 Stable varus/valgus ✓ no motor or sensory deficit

L /KN: Swelling / Tender along → Med joint line Lat joint line Sup. patella Inf. Patella Pop. fossa

Heat Swelling Erythema Crepitus Deformity

McMurray Lachmans Pat. fem. grind Ant. draw Post. draw

ROM: Flexion 120/130 Extension ___/5 Stable varus/valgus ✓ no motor or sensory deficit

R /HIP: Swelling /Hematoma / Effusion / bruise Trendelenburg +ve -ve

Tenderness to palpation → Great Troch Groin Medial thigh. ROM: Full Limited and painful.

ROM: Abd. ___/45 Add. ___/35 Flex. ___/120 Ext. ___/30 IR ___/45 ER ___/45

L /HIP: Swelling /Hematoma / Effusion / bruise Trendelenburg +ve -ve

Tenderness to palpation → Great Troch Groin Medial thigh. ROM: Full Limited and painful.

ROM: Abd. ___/45 Add. ___/35 Flex. ___/120 Ext. ___/30 IR ___/45 ER ___/45

* Muscle strength
Patella 4/5

Patella 4/5

muscle strength
4-5

Scars noted

R/ANK: Swell /Hemato/ bruise → Ant. Post. Lat. Malleo Ant Draw +ve -ve Inv Stress +ve -ve
Tenderness to palpation → Med. aspect Lat. aspect. ROM: Full Limited and painful.
ROM: Dorsi flexion ____/20 Plantar flex. ____/50 Inversion ____/15 Eversion ____/15

L/ANK: Swell /Hemato/ bruise → Ant. Post. Lat. Malleo Ant Draw +ve -ve Inv Stress +ve -ve
Tenderness to palpation → Med. aspect Lat. aspect. ROM: Full Limited and painful.
ROM: Dorsi flexion ____/20 Plantar flex. ____/50 Inversion ____/15 Eversion ____/15

R/WRI: Pain to palp. → Ulnar styl. Distal rad. Scaphoid ____/5 grip strength Swell Erythema Bruise
Tinel +ve -ve Phalen +ve -ve
ROM: Flexion ____/80 Extension ____/70 Radial dev. ____/20 Ulnar dev. ____/30

L/WRI: Pain to palp. → Ulnar styl. Distal rad. Scaphoid ____/5 grip strength Swell Erythema Bruise
Tinel +ve -ve Phalen +ve -ve
ROM: Flexion ____/80 Extension ____/70 Radial dev. ____/20 Ulnar dev. ____/30

R/ELB: Swell Erythema Bruise Deltoid atrophy ____/5 musc stren Tender → Med Epi Lat Epi Ole Pro
Varus +ve -ve Valgus +ve -ve Tinel +ve -ve
ROM: Flexion ____/150 Extension ____/150 Supin. ____/90 Pron. ____/90

L/ELB: Swell Erythema Bruise Deltoid atrophy ____/5 musc stren Tender → Med Epi Lat Epi Ole Pro
Varus +ve ve Valgus +ve -ve Tinel +ve -ve
ROM: Flexion 120/150 Extension 150/150 Supin. 80/90 Pron. 70/90

*pain w/
Resisted
wrist
flexion*

<u>Dxt</u>	<u>Left Shoulder</u>	<u>Right Knee</u>	<u>Left Knee</u>
<u>S46.01A Partial rot cuff tear</u>	S46.012A Partial rot cuff tear	<u>S83.241A Med. Men. tear</u>	<u>S83.242A Med. Men. tear</u>
<u>M75.121 Complete rot cuff tear</u>	M75.122 Complete rot cuff tear	S83.281A Lat. Men. tear	S83.282A Lat. Men. tear
<u>M24.811 Internal derangement</u>	M24.812 Internal derangement	M23.91 Internal derangement	M23.92 Internal derangement
<u>M75.01 Adhesive Capsulitis</u>	M75.02 Adhesive Capsulitis	S83.519A ACL tear	S83.519A ACL tear
<u>M75.82 Shoulder tendinitis</u>	M75.82 Shoulder tendinitis	S83.511A ACL sprain	S83.512A ACL sprain
<u>S43.431A Labral tear</u>	S43.432A Labral tear	S83.411 MCL sprain	S83.412A MCL sprain
<u>S43.431A SLAP tear</u>	S43.432A SLAP tear	M94.261 Chondromalacia	M94.262 Chondromalacia
<u>M75.41 Impingement</u>	M75.42 Impingement	S83.31XA Tear artic. cartilage	S83.32XA Tear artic. cartilage
<u>M65.811 Tenosynovitis</u>	M 65.812 Tenosynovitis	<u>M22.2X1 PF chondral injury</u>	M22.2X2 PF chondral injury
<u>M75.51 Bursitis</u>	M75.52 Bursitis	<u>M25.461 Joint effusion</u>	<u>M25.462 Joint effusion</u>
M75.21 Bicipital tendinitis	M 75.22 Bicipital Tendinitis	M12.569 Trauma. arthropathy	M12.569 Trauma. arthropathy y
M25.511 Pain	M25.512 Pain	S80.911A Injury	S80.912A Injury
S49.91XA Injury	S49.92XA Injury	M25.561 Pain	M25.562 Pain
S46.101A Biceps tendon tear	S46.102A Biceps tendon tear	M65.161 Synovitis	M65.162 Synovitis
M24.10 Glenoid chondr defect	M24.10 Glenoid chondr defect	M23.40 Loose body in knee	M23.40 Loose body in knee
M94.211 Chondromal, glen/HH	M94.212 Chondromal, glen/HH	M24.10 Chondral lesion	M24.10 Chondral lesion
M67.211 Hypertroph. synovitis	M67.212 Hypertroph. synovitis	M93.261 Osteochondral lesion	M93.262 Osteochondral lesion
M89.311 AC joint hypertrophy	M89.312 AC joint hypertrophy	M17.11 Osteoarthritis	M17.12 Osteoarthritis
M24.011 Loose Bodies	M24.012 Loose Bodies	M24.661 Adhesions	M24.662 Adhesions
M25.311 Shoulder instability	M25.312 Shoulder instability	M67.51 Medial plica	M67.52 Medial plica
M19.011 Primary osteoarthritis	M19.012 Primary osteoarthritis	M25.761 Osteophyte	M25.762 Osteophyte
M25.411 Joint Effusion	M25.412 Joint Effusion	M70.41 Prepatellar bursitis	M70.42 Prepatellar bursitis

*popliteal
cyst*

Right Hip	Left Hip	Right Ankle	Left Ankle
Right Wrist	Left Wrist	Right Elbow	Left Elbow
C Spine	L Spine	internal Derangement Bicep / tricep tendinosis	

Plan:

☒ Imaging studies and clinical examinations were reviewed with the patient.

☒ All treatment options discussed with the patient.

☒ continue anti-inflammatory and muscle relaxant medications PRN

☒ Start or continue Physical Therapy _____.

☐ Recommend steroid inj. for pain mgmt. R/SH L/SH R/KN L/KN R/HIP L/HIP R/ANK L/ANK
R/WRI L/WRI R/ELB L/ELB C Spine L Spine

Patient ☒ Accepts ☐ Refuses.

☐ MRI ordered R/SH L/SH R/KN L/KN R/HIP L/HIP R/ANK L/ANK R/WRI L/WRI
R/ELB L/ELB C Spine L Spine

☐ Follow up in 4 Weeks / Months / PRN.

☐ Discussed R/SH L/SH R/KN L/KN R/HIP L/HIP R/ANK L/ANK R/WRI L/WRI
R/ELB L/ELB C Spine L Spine

☒ Proceed w/ Sx ☐ Wants to think about it ☐ Proceed with ☒ Sx after rehab on _____

☐ Med Clearance needed prior to Sx. ☒ W/C authorization needed prior to Sx

☒ Patient consents to B/L knee Sx.

☒ Patient scheduled for R/SH L/SH R/KN L/KN Surgery on * Submit B/L knee