

Ketan D.Vora, DO, P.C.

Location: Dr. Cruz PT (WC) / NF / LIEN

Patient Name:

Date of Visit: 7/15/22

DOB: 5/19/1961

(M) / F

Handed: (R) / L

DOA: 08/18/21

Age: 60

Height: 5'6"

Weight: 180

Chief complaint: right/left shoulder right/left knee Left Hip/Right Elbow/Left Ankle

Work Hx: not working

Handedness: right / left

Type of Injury: Auto Accident restrained/unrestrained Work-Accident Other: _____

Pedestrian Bicyclist Driver Front Passenger behind the driver rear set mid back passenger

Part of your vehicle involved: Rear end Front End Driver's side front Driver's side rear
Passenger side front Passenger side rear T-bone driver's side T-bone passenger side
Air bags deployed Air bags not deployed seat belt no seat belt

Police: were / were not at the scene of the accident.

Hospital: Yes / No Hospital name: _____ via ambulance / car _____

PMH: Diabetes HBP, Asthma, Cardiac disease, None _____

PSH: None _____

Current Meds: None Meloxicam

Drug Allergies: Yes / No _____

Social Hx: Smoker Non-Smoker Alcohol

Doing PT/Chiro: _____ weeks/months In states good/no/little relief/in the states pain is interfering with day-to-day activities

PRESENT COMPLAINTS:

Right shoulder: pain 6/10, constant intermittent sharp stabbing dull achy pain.
Worse with range of motion slightly improved with rest unable to reach overhead or behind back is frequently woken up at night due to pain.

Left shoulder: pain /10, constant intermittent sharp stabbing dull achy pain.
Worse with range of motion slightly improved with rest unable to reach overhead or behind back is frequently woken up at night due to pain.

Right knee: pain 6/10, constant intermittent sharp stabbing dull achy pain.
Worse with Ambulation slightly improved with rest unable / Difficulty with raising for my chair or walking up and down stairs. Patient also notes clicking popping buckling and intermittent locking .

Left knee: pain 6/10, constant intermittent sharp stabbing dull achy pain.
Worse with Ambulation slightly improved with rest unable / Difficulty with raising for my chair or walking up and down stairs. Patient also notes clicking popping buckling and intermittent locking .

ROS:

no fevers chills or night sweats temperature taking at the time of Exam was _____. eyes: no blurry vision double vision and vision changes _____. skin: clear no rashes _____. Nuro: no headaches or dizziness _____. vision: no blurry vision double vision of vision changes _____. respiratory: no wheezing coughing shortness of breath or difficulty breathing _____. Cardiovascular: no chest pain murmurs irregular heart rate or hypertension _____. gastrointestinal: no nausea vomiting diarrhea constipation jaundice so changes in bowel _____. histological: no active bleeding bruising anemia blood clotting disorders _____.

PHYSICAL EXAMINATION:

Right Shoulder: swelling / tenderness to palpation on the _____
 positive/negative for Drop arm positive/ negative cross-over positive/negative empty can
 test positive/negative Hawkins positive/negative O'Brien's positive/negative impingement
 sign,
 ROM: active abduction 160 /180 passive abduction 160 /180 int. rotation 70 /90
 ext. rotation 90 /90 internal rotation to Sacrum/mid back
 ___ has no motor or sensory deficit of the left upper extremity.

Left Shoulder: swelling / tenderness to palpation on the _____
 positive/negative for Drop arm positive/ negative cross-over positive/negative empty can
 test positive/negative Hawkins positive/negative O'Brien's positive/negative impingement
 sign,
 ROM: active abduction ____ /180 passive abduction ____ /180 int. rotation ____ /90
 ext. rotation ____ /90 internal rotation to Sacrum/mid back
 ___ has no motor or sensory deficit of the left upper extremity.

Right Knee: Pain to palpation over _____
 Positive/Negative for McMurray, positive/negative Lachmans positive/negative
 Patellofemoral grinding test positive/negative Anterior posterior drawer
 ROM: flexion ____ /130 extension ____ /5 ___ Knee is stable with varus and valgus stress test.
 ___ has no motor or sensory deficit of the right lower extremity.

Left Knee: Pain to palpation over _____
Positive/Negative for McMurray, positive/negative Lachmans positive/negative
 Patellofemoral grinding test positive/negative Anterior posterior drawer
 ROM: flexion 90 /130 extension 0 /5 ___ Knee is stable with varus and valgus stress test.
 ___ has no motor or sensory deficit of the right lower extremity.

Dx:

| R Sh | L Sh | R Kn | L Kn |
|-------------------|-------------------|----------------------------|----------------------------|
| Rotator cuff tear | Rotator cuff tear | Medial meniscus tear | Medial meniscus tear ✓ |
| Labral tear ✓ | Labral tear | Lateral meniscus tear | Lateral meniscus tear |
| SLAP tear | SLAP tear | Medial & lat meniscus tear | Medial & lat meniscus tear |

| | | | |
|-------------|-------------|--------------------|--------------------|
| Impingement | Impingement | ACL tear | ACL tear |
| Bursitis | Bursitis | Strain MCL | Strain MCL |
| Tendinitis | Tendinitis | Strain ACL | Strain ACL |
| | | Joint effusion | Joint effusion |
| | | PF chondral injury | PF chondral injury |

Plan:

__ Informed in the use of over the counter NSAID's, and demonstrates a clear understanding of the indicated usage _____

__ Started on a course of anti-inflammatory and muscle relaxant medications _____ mg ____ PO

__ BID/TID/QID _____ mg ____ PO ____ BID/TID/QID _____

__ Start or continue Physical Therapy 2 / 3 / 4 times a week for _____

__ Start on a course of Therapeutics Injections _____

__ MRI of the C-Spine, T-Spine, L-Spine to R/O discogenic injury (If symptoms persist/mandatory)

__ MRI () Shoulder, () Elbow, () Wrist, () Knee to rule out ligament tear and/or Synovial injury, other _____

__ Continue physical therapy.

__ Follow up in ____ weeks / months.

__ discussed right/left shoulder right/left knee _____ Arthroscopy versus conservative management with the patient, the patient states that due to the continual pain and lack of Relief with physical therapy and the inability to perform day-to-day activities due to pain Patient will like to consider/move forward with surgery/ Surgery but first would like to discuss all options with family members and lawyer