

KDV Medical, P.C.

Tel #: 1-877-SPINE-DR

Fax: (347) 708-8499

September 28, 2022

Re: De Jesus, Sandra

DOB: 01/13/1964

DOA: 08/24/2022

Location: Cruz Banting Imelda MD PT

INITIAL ORTHOPEDIC CONSULTATION

CHIEF COMPLAINT: Right shoulder and left shoulder pain.

HISTORY OF PRESENT ILLNESS: This is an initial orthopedic evaluation for a 58-year-old right-hand dominant female, involved in a work related accident on 08/24/2022. Patient works with adults with special needs, a patient came into her room and attacked her, slamming her left shoulder into the wall. The patient went via ambulance to St. Barnabas Hospital and was treated and released the same day. X-rays were negative. The patient presents today complaining of right shoulder and left shoulder pain sustained in the work related accident. The patient has been treated with physical therapy for the last 1 month without adequate relief.

Right shoulder pain is 7/10, described as constant, achy. The patient complains of weakness and stiffness. The patient reports pain with reaching overhead and behind and is frequently woken up at night due to pain.

Left shoulder pain is 8/10, described as constant. The patient complains of weakness and stiffness. The patient reports pain with reaching overhead and behind and is frequently woken up at night due to pain.

PAST MEDICAL HISTORY: Hypertension.

PAST SURGICAL HISTORY: C-section x3, radical hysterectomy, left knee arthroscopy 5 years ago.

DRUG ALLERGIES: NO KNOWN DRUG ALLERGIES.

MEDICATIONS: The patient is taking hydrochlorothiazide.

SOCIAL HISTORY: The patient is a smoker less than one pack per day x 40 years. The patient does not drink alcohol.

WORK HISTORY: The patient is currently not working.

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

ADL CAPABILITIES: As a direct result of the injuries sustained in this accident, the patient states that she is unable to do the following activities: driving, lifting heavy objects, carrying, reaching overhead, laundry, shopping, running errands, 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 4 inches, weight is 190 pounds. Patient is alert, oriented and cooperative.

Right Shoulder: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the supraspinatus, AC joint. Positive Empty Can test. Positive Hawkins test. Positive Impingement test. Positive Obrein test. Range of motion, abduction is 150 degrees, normal is 180 degrees; forward flexion is 156 degrees, normal is 180 degrees; internal rotation to L5; external rotation is 70 degrees, normal is 90 degrees. The patient has no motor or sensory deficit of the right upper extremity.

Left Shoulder: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the supraspinatus, AC joint. Positive Empty Can test. Positive Hawkins test. Positive Obrein test. Positive Drop arm test. Range of motion, abduction is 140 degrees, normal is 180 degrees; forward flexion is 150 degrees, normal is 180 degrees; internal rotation to L5; external rotation is 60 degrees, normal is 90 degrees. The patient has no motor or sensory deficit of the left upper extremity.

DIAGNOSTIC STUDIES: Left shoulder MRI, done on 09/14/2022, Full-thickness tear of the supraspinatus tendon as well as partial-thickness tearing in the infraspinatus tendon. Tear within the intra-articular biceps tendon. Tear of the superior labrum. AC joint arthrosis and cystic change in the humeral head. Fluid is noted in the subacromial, subdeltoid and subcoracoid bursa as well as within tm: glenohumeral joint.

FINAL DIAGNOSES:

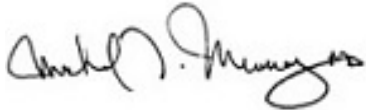
1. Internal derangement, right shoulder - M24.811
2. Pain, right shoulder - M25.511
3. Partial rotator cuff tear, left shoulder - S46.012A
4. Complete rotator cuff tear, left shoulder - M75.122
5. Labral tear, left shoulder. - S43.432A
6. Pain, left shoulder - M25.512

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/left shoulder 3 days/week.
5. MRI ordered of Right Shoulder to rule out ligament tear and/or synovial injury.
6. Follow up in 4 weeks p.r.n.

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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 injuries the patient incurred on the right shoulder and left shoulder on August 24, 2022. 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