

KDV Medical, P.C.

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October 17, 2022

Re: Colina Torres, Patricia

DOB: 10/19/1981

DOA: 08/27/2022

Location: 82nd Street - Ortho

INITIAL ORTHOPEDIC CONSULTATION

CHIEF COMPLAINT: Right shoulder and right knee pain.

HISTORY OF PRESENT ILLNESS: This is an initial orthopedic evaluation for a 40-year-old right-hand dominant female, involved in a motor vehicle accident on 08/27/2022. The patient was a driver and was wearing a seatbelt. The vehicle was struck on the passenger side. The airbags did not deploy. The EMS arrived on the scene. The police were called to the scene of the accident. The patient went via ambulance to Elmhurst Hospital and was treated and released the same day. X-rays were negative. The patient has been treated with physical therapy. The patient presents today complaining of right shoulder and right knee pain sustained in the motor vehicle accident.

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

Right knee pain is 7/10, described as constant. The patient complains of weakness and buckling. The patient has difficulty raising from a chair and walking up and downstairs. Patient reports pain worse with ambulation.

PAST MEDICAL HISTORY: Thyroid disorder.

PAST SURGICAL HISTORY: Appendectomy.

DRUG ALLERGIES: ASPIRIN, THROAT CLOSING.

MEDICATIONS: The patient is taking levothyroxine.

SOCIAL HISTORY: The patient is a nonsmoker. The patient does not drink alcohol.

ADL CAPABILITIES: The patient states that she can walk for 1/2 block. She can stand for 5 minutes before she has to sit. She 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 she has difficulty doing the following activities: driving, lifting heavy objects, carrying

heavy objects, reaching overhead, laundry, shopping, running errands, kneeling, squatting, negotiating stairs, jogging 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 6 inches, weight is 210 pounds.

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. Range of motion, abduction is 150 degrees, normal is 180 degrees; forward flexion is 160 degrees, normal is 180 degrees; internal rotation to L4; 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 swelling, heat, erythema noted. Reveals tenderness to palpation over medial and lateral joint line. Range of motion, flexion is 120 degrees, normal is 135 degrees and full extension. Positive McMurray test. Positive patellofemoral grinding test. Right knee is stable with varus and valgus stress test. Muscle strength is 4-/5

DIAGNOSTIC STUDIES: Right shoulder MRI, done on 09/24/2022, Partial-thickness bursal surface tear of the supraspinatus tendon. Bone contusion of the humeral head at the supraspinatus tendon insertion. Joint effusion.

Right knee MRI, done on 09/24/2022, Edema surrounding the patellar tendon consistent with Para tenonitis. Horizontal tear of the posterior horn of the medial meniscus.

FINAL DIAGNOSES:

1. Pain, right shoulder - M25.511
2. Partial rotator cuff tear, right shoulder - S46.011A
3. Joint effusion, right knee - M25.461
4. Medial Meniscus tear, right knee - S83.241A
5. Pain, right knee - M25.561
6. Contusion.

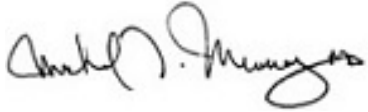
PLAN:

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, right knee 3 days/week.
5. Discussed right knee arthroscopy versus conservative management with the patient. The patient states that due to continual pain and lack of relief with physical therapy and the inability to perform day-to-day activities due to pain, the patient wants to think about surgery.
6. The patient will follow up 4-6 weeks.

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 right knee on August 27, 2022. These

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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