## Ketan D Vora, DO, P.C.

## INITIAL INTAKE SHEET

	( WC) NF	LIEN	<i>i</i> ,
Potiont Name: Anthox	n kectino	M (F) D9A:_	8 28 2070
DOB: 6/22 lia60 Ag	<del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </del>		nded: R
	SH R/KN L/KN R/EI	lb L/Elb Ř/Hìp L/Hip	R/Ank) L/Ank
R/Wri	₩ri Neck Mid-back	Low-back	60
Type of Injury: MVA Work-Rel	ated Working (Y)	) <sub>N</sub> Degree of Disability	:_ <u>&amp;</u>
Asymptomatic prior to accident:	N History of prior	trauma: Y / N	78100
Pain in:		Pt is a mental	Herepist wing an
Other:		monkstate. Psu	
PedestrianBicyclist	Motorouglist Rus nass	Driver Front Pass	Bear Pass Of Locs
PedestrianBicyclist Vehicle hit: Rear	Front Driver-side from	nt Driver side rear	
	T D 1 D	T Dono Pagganger eig	la Acondian
	and the second of	V / M Police at Scr	ene: Y / N (with the
Went to Hospital: Y N Hos	spital name:	H COLD BOOK	- Amb. Car Huere
Went to Hospital: Y N Hos PMH None Diabetes HTN HLI	D Asthma Cardiac Thyroid (	CA	acy tues 9
PSH:None )			iealrack
	Jap roxon	Pain on	onte
Drug Allergy: Y/N Soc. His: Smoke Y/N	ppd Alcohol Y N Rec	creational Drugs Y ((N	Sloor;
PT/Chiro: Y Duration:	Weeks / Months/Years	Relief: Good Littl	
Walk: Y / Nblocks	Stand: Y / Nmins	Sit Y / N	
Unable to: Garden	Play sports Drive Lift	Childcare Carry	Reach overhead
Laundry Shopping		uat Stairs Jog Exercise	1 ( ) EB
PRESENT COMPLAINTS:	erad in xa	who would	overeight of
Ret   Rain 10/10	<b>LSH</b> Pain/10	( RKN ) Pain 6 /10	<u>L KN</u> Pain/10
Constant Intermittent	Constant Intermittent	Constant Intermittent	Constant Intermittent
Stiff Weak Pop Click	Stiff Weak Pop Click	Stiff Weak	Stiff Weak
Reach overhead N	Reach overhead Y / N	Diff rising from chair	Diff rising from chair Y / N
Reach back (Y) N	Reach back Y / N	Diff w stairs Y N	Diff w/ stairs Y/N
Unable to sleep at night	Unable to sleep at night	Click Pop Buckl Lock	Click Pop Buckl Lock
Imp w/ Rest Med PT Ice	Imp w/ Rest Med PT Ice	Imp w Rest Med PT Ice	Imp w/ Rest Med PT Ice
- Mo Improv	<del>e</del> ren		
R HIP Pain/10	LHIP Pain/10	RANK Pain 6 /10	<u>L ANK</u> Pain/10
Constant Intermit Lock	Constant Intermit Lock	Constant Intermittent	Constant Intermittent
Pain w/ stand walk climb	Pain w/ stand walk climb	Pain w/ stand camb	Pain w/ stand walk climb
Standing from sitting	Standing from sitting	Imp w/ Rest Med PT Ice	Imp w/ Rest Med PT Ice
Imp w/ Rest Med PT Ice	Imp w/ Rest Med PT Ice		
	1 MDI D-i- /10	<b>RELB</b> Pain/10	<b>L ELB</b> Pain/10
<u><b>R WRI</b></u> Pain/10	<u>L WRI</u> Pain/10 Constant Intermittent	RELB Pain/10 Constant Intermittent	Constant Intermittent
Constant Intermittent	T =	Weak Numb Tingle	Weak Numb Tingle
Weak Numb Tingle	Weak Numb Tingle	Pain w/ lift carry drive	Pain w/ lift carry drive
Pain w/ lift carry drive	Pain w/ lift carry drive Imp w/ Rest Med PT Ice	Imp w/ Rest Med PT Ice	Imp w/ Rest Med PT Ice
Imp w/ Rest Med PT Ice	mup w/ nest wied FT ice	mip w/ nost with the	
Other Complaints:			

<u>ROS</u>:

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 Intermit Numb Tingling Radiates to R L
Pain w/ neck bend lift carry Impoves w/ Rest Med PT Ice  ROM: Flex/45 Ext/45 R Lat Flex/45 L Lat Ext/45 Rot/60
LSPINE: Pain Sharp Shoot Burn Constant Intermit Numb Tingling Radiates to R L
Pain w/ stand walk sit bend Impoves 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. 130180 Add. 20/45 For Flex. 140/180 Ext/60 IR/90 ER 60/90
Drop Arm Cross-Over Empty Can Yergason Deltold Atrophy
O'Brien's Impingement Lift on test nawkins (60 IR 60 /90 FR 60 /90
IR: sacrum mid backno 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 backno 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 Nusek Street
ROM: Flexion 120130 Extension/5Stable varus/valgusno 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/130 Extension/5Stable varus/valgusno motor or sensory deficit
Daub. Condition / Homotomo / Effucion / bruico Trendelenhura +ve - ve
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
I /HIP Swelling /Hematoma / Effusion / bruise Trendelenburg +ve - ve
Tenderness to palpation -> Great Troch Groin Medial thigh. KUM: Full Limited and paintul.
ROM: Abd/45 Add/35 Flex/120 Ext/30 IR/45 ER/45

M17.12 Osteoarthritis

M24.662 Adhesions

M67.52 Medial plica

M25.762 Osteophyte

M70.42 Prepatellar bursitis

			3
R /ANK Swell Hemato/ bruis	se → Ant. Post Lat. Mal	leo Ant Draw +ve ve	Inv Stress +ve -ve
			at∽6l∽orn+ul \
ROM: Darei flavion 157/20	Plantar flex. ネレ/bU	Inversion / U / Ib Evers	1011 <u>// 3</u> /10 3,10 3,
<b>L/ANK</b> : Swell/Hemato/ bruis	Not Don't Lot Mol	loo Ant Draw IVA - VA	ny Stress +ve -ve 4+
L/ANK: Swell/Hemato/ bruis	e → Ant. Post. Lat. Mai	DOM: Full Limited	and nainful
Tenderness to palpation $\rightarrow$	Med. aspect Lat. aspect.	KUM: Full Limiteu	anu pannui.
ROM: Dorsi flexion/20	Plantar flex/50	Inversion/15 Evers	ion/15
<u>R /WRI</u> : Pain to palp. → Uln	ar styl. Distal rad. Scaphe	oid/5 grip strength S	well Erythema Bruise
Tinel +ve -ve Phalen -			
ROM: Flexion/80 Ex	etopoign /70 Radial de	y /20 Illnar dev	/30
RUIVI: Flexion/60 Ex	(terision//o Hadiai de	75 Ontar 450.	
L/WRI: Pain to palp. → Uln	ar styl Distal rad Scaphi	old/5 grip strength S	Well Erytheilia Diuise
Tinel +ve -ve Phalen -	+ve -ve		
ROM: Flexion/80 E	xtension/70 Radial de	ev/20       Ulnar dev	/30
	<u>———</u>		
R/ELB: Swell Erythema B	ruise Deltoid atrophy	/5 musc stren Tender → N	/led Epi Lat Epi Ole Pro
Various Lya va Valgue	+ve -ve Tinel +ve -v	re	•
Varus +ve -ve Valgus	TVE - VE TIME! TVE V	/00 Prop /90	
ROM: Flexion/150	Extension/150 Supin.	/90 F1011/90	
L/ELB: Swell Erythema Br	uise Deltoid atrophy	/5 musc stren Tender → M	ed Epi Lat Epi Ole Pro
Varus +ve -ve Valgus	+ve -ve Tinel +ve -v	re	
ROM: Flexion/150	Extension/150 Supin.	/90 Pron. /90	
NOW. HEXION7130			
Date			
Right Shoulder	Left Shoulder	Right Knee	Left Knee
S46.011A Partial rot cuff tear	S46.012A Partial rot cuff tear	S83.24TA Med. Men. tear	S83.242A Med. Men. tear
M75.121 Complete rot cuff tear	M75.122 Complete rot cuff tear	S83 281A Lat. Men. tear	S83.282A Lat. Men. tear
M24.811 Internal derangement	111211012	M23.91 Internal derangement	M23.92 Internal derangement
M75.01 Adhesive Capsulitis	M75.02 Adhesive Capsulitis	S83.519A ACL tear	S83.519A ACL tear
M75.81 Shoulder tendinits	M75.82 Shoulder tendinitis	S83.511A ACL sprain	S83.512A ACL sprain
\$48:431A Labrai tear>	010.10271222	883.411 MCL sprain	S83.412A MCL sprain
S43.431A SLAP tear	• ,•	M94 261 Chondromalacia	M94.262 Chondromalacia
M75.41 Impingement	M75.42 Impingement	S83.31XA Tear artic cartilage	S83.32XA Tear artic, cartilage
M65.811 Tenosynovitis	M 65.812 Tenosynovitis	M22.2X1 PF chondral injury	M22.2X2 PF chondral injury
M75.51 Bursitis	M75.52 Bursitis	M25.461 Joint effusion	M25.462 Joint effusion
M75.21 Bicipital tendinitis	M 75.22 Bicipital Tendinitis	M12.569 Trauma. arthropathy	M12.569 Trauma. arthropathy y
M25.511 Pain	M25.512 Pain	\$80.911A Injury	S80.912A Injury
S49.91XA Injury	S49.92XA Injury	M25.561 Pain	M25.562 Pain M65.162 Synovitis
S46.101A Biceps tendon tear	S46.102A Biceps tendon tear	M65.161 Synovitis	M23.40 Loose body in knee
M24.10 Glenoid chondr defect	M24.10 Glenoid chondr defect	M23.40 Loose body in knee	M24.10 Chondral lesion
M94.211 Chondromal, glen/HH	M94.212 Chondromal, glen/HH	M24.10 Chondral lesion	M93.262 Osteochondral lesion
M67.211 Hypertroph, synovitis	M67.212 Hypertroph. synovitis	M93.261 Osteochondral lesion	Miaarea nateonionnia lealon

M17.11 Osteoarthritis

M24.661 Adhesions

M67.51 Medial plica

M25.761 Osteophyte

M70.41 Prepatellar bursitis

M89.312 AC joint hypertrophy

M25.312 Shoulder instability

M19.012 Primary osteoarthritis

M24.012 Loose Bodies

M25.412 Joint Effusion

M67.211 Hypertroph. synovitis

M89.311 AC joint hypertrophy

M25.311 Shoulder instability

M19.011 Primary osteoarthritis

M24.011 Loose Bodies

M25.411 Joint Effusion

			4
Right Hip	Left Hip	(Right Ankle	Left Ankle
		Libial	
		7000	portu
		Libial rendi Aehilles	Los Characters
Right Wrist	Left Wrist	Right Elbow	Left Elbow
C Spine	L Spine		
Plan:			
		re reviewed with the patient.	
	s discussed with the patie		
	matory and muscle relax		
	ysical Therapy		HIP L/HIP R/ANK L/ANK
Recommend steroid			
PatientAccepts _		/WRI L/WRI R/ELB L/EL	D O Shue rohmo
		/KN R/HIP L/HIP R/ANK	L/ANK R/WRI L/WRI
	SH L/SH R/KN L. ELB <u>L/E</u> LB CSpine	L Spine	L/AIR II. III. L.
	6 Weeks / Months / PRI	•	
Discussed R/SH	L/SH R/KN L/KN	R/HIP L/HIP (R/ANK) L/	/ANK R/WRI L/WRI
R/ELI		L Spine	
Proceed w/ Sx	Wants to think abou	t itProceed with	Sx after rehab on
— — Med Clearance пее	ded prior to Sx. 🗎 🔽	W/C authorization needed prior to	Sx
Patient consents to	R showlder	-	
Patient scheduled for		(N L/KN Surgery on	