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

Tel #: 1-877-SPINE-DR Fax: (347) 708-8499

## **Initial Comprehensive Medical Evaluation**

Date: 06/30/2022

RE: Davis Clement DOB: 02/16/1955

Location: Woodside-Ortho

Case Type: NF 1<sup>st</sup> Evaluation

The patient is doing chiro x4 weeks with little relief. Follow-up in 4 weeks to review MRI.

#### **HISTORY:**

On 06/30/2022, Mr. Davis Clement, a right-handed 67-year-old male presents for the evaluation of the injuries sustained in a motor vehicle accident which occurred on the date of 06/15/2022. The patient was seen at the Woodside-Ortho. The patient states he was the restrained driver of a vehicle which was involved in a rear-end collision. The patient states that an EMS team arrived. The patient was the driver when parked a sanitation truck rear-ended him, police arrived, no airbags deployed. The patient reports no injury to the head and no loss of consciousness. During the accident, the patient reports injuries to left shoulder.

#### **CHIEF COMPLAINTS:**

The patient complains of left shoulder pain that is 10/10, with 10 being the worst, which is sharp in nature. Left shoulder pain is worsened with movement, raising the arm, lifting objects and overhead activities. Left shoulder pain is improved with resting.

**REVIEW OF SYSTEMS:** The patient denies seizures, chest pain, shortness of breath, jaw pain, abdominal pain, fevers, night sweats, diarrhea, blood in urine, bowel/bladder incontinence, double vision, hearing loss, recent weight loss, episodic lightheadedness and rashes.

**PAST MEDICAL HISTORY:** Hypertension.

PAST SURGICAL/HOSPITALIZATION HISTORY: Noncontributory.

MEDICATIONS: Lisinopril, amlodipine, Flomax, ASA 81 mg.

**ALLERGIES:** Seasonal.

**SOCIAL HISTORY:** Unknown.

### PHYSICAL EXAM:

**General:** The patient presents in an uncomfortable state.

<u>Neurological Examination:</u> The patient is alert and cooperative and responding appropriately. Cranial nerves II-XII grossly intact.

**Deep Tendon Reflexes:** Are 2+ and equal.

**Sensory Examination:** It is intact.

**Manual Muscle Strength Testing:** Testing is 5/5 normal.

<u>Left Shoulder Examination:</u> Reveals tenderness and swelling upon palpation of the posterior left glenohumeral joint with muscle spasm present at deltoid muscle and trapezius muscle. Neer's test is positive and Hawkins test is positive. ROM is as follows: Abduction is 160 degrees, normal is 180 degrees; flexion is 160 degrees, normal is 180 degrees; external rotation is 80 degrees, normal is 90 degrees and internal rotation is 70 degrees, normal is 90 degrees.

**GAIT:** Normal.

**<u>Diagnostic Studies:</u>** None reviewed.

## **Diagnoses:**

Internal derangement of left shoulder - M24. 812. Left shoulder pain - (M25.512). Left shoulder sprain/strain (S43.402A).

## Plan:

- 1. **Request MRI of the left shoulder:** I have advised the patient that this study should be performed immediately because if any ligamentous tears are present, then we need to address the injury immediately with an orthopedic surgery consult.
- 2. **Physical therapy:** The patient is to continue physical therapy.

<u>CAUSALITY</u>: It is within a certain degree of medical certainty, that the history presented by the patient, the objective physical findings as well as the diagnosis rendered is causally related to the injury the patient incurred on the specified date. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient.

Rehan Khan, FNP-BC

RK/AEI

Michael Murray, MD

Woodside-Ortho Davis Clement 02/16/1955 06/30/2022 Page 2 of 2