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July 26, 2022

Re: Zaidan, Heba

DOB: 11/03/1989

DOA: 05/19/2022

Location: Cruz Banting Imelda MD PT

INITIAL ORTHOPEDIC CONSULT EXAMINATION

CHIEF COMPLAINT: Left wrist pain.

HISTORY OF PRESENT ILLNESS: This is an initial orthopedic evaluation for a 32-year-old right-handed dominant female, involved in a motor vehicle accident on 05/19/2022. Patient was the driver when another car struck her on the front passenger side, no airbags deployed. The patient was wearing a seatbelt. The EMS arrived on the scene. The police were called to the scene of the accident. The patient was transported via ambulance to Jacobi Hospital and was treated and released the same day. The patient presents today complaining of left wrist pain. The patient has been treated with physical therapy for the last months without adequate relief.

Left wrist pain is 6 out of 10, described as intermittent pain with tingling. Patient has pain with lifting, carrying, and driving.

PAST MEDICAL HISTORY: Noncontributory.

PAST SURGICAL HISTORY: Noncontributory.

DRUG ALLERGIES: NO KNOWN DRUG ALLERGIES.

MEDICATIONS: The patient is taking Motrin prn.

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

REVIEW OF SYSTEMS: General: No fever, chills, night sweats, weight gain, or weight loss.

PHYSICAL EXAMINATION:

Left Wrist: There is tenderness to palpation on the anterior aspect of the wrist. Range of Motion: Flexion 60 degrees, normal is 80 degrees, extension is 60 degrees, normal is 70 degrees, radial deviation is 10 degrees, normal is 20 degrees, and ulnar deviation is 10 degrees, normal is 30 degrees. Pain with flexion and radial deviation of the wrist. Grip strength is 4+/5. Tinel's sign is negative. Phalen's sign is negative. Neurovascularly intact distally.

DIAGNOSTIC STUDIES: 07/15/2022 - MRI of the Left Wrist: Subluxation of the pisiform in relation to the triquetrum with fluid in the joint space between the triquetrum and pisiform. No Other acute fracture or dislocation is identified.

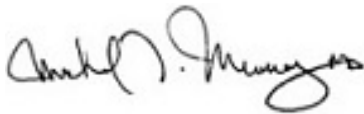
FINAL DIAGNOSES:

1. Internal derangement, left wrist.
2. M25.532 Left wrist pain.

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 left wrist 3 days/week.
5. Prescription for wrist brace given; to be worn with activity of left wrist.
6. Follow up in 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 diagnosis rendered is causally related to the injury the patient incurred on 05/19/2022. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient.



Nadezhda Bababekova, NP-BC
Michael Murray, MD

NB/AEI