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Initial Comprehensive Medical Evaluation

Date: 06/20/2022

RE: Abdus Choudhury DOB: 05/03/1975

Location: TS Chiropractic Wellness, Richmond Hill

Case Type: WC 1st Evaluation

Work Status: Not working-temporarily totally disabled.

Defers injection to right shoulder. RKIAI performed. Continue PT. Follow-up in 1 month.

HISTORY:

On 06/20/2022, Mr. Abdus Choudhury, a right-handed 47-year-old male presents for the evaluation of the injuries sustained in a work-related incident which occurred on the date of 11/29/2021. The patient states that an EMS team arrived. The patient was the driver when rearended by a truck. The patient reports no injury to the head and no loss of consciousness. During the accident, the patient reports injuries to right shoulder and right knee.

CHIEF COMPLAINTS:

The patient complains of right shoulder pain that is 1/10, with 10 being the worst.

The patient complains of right knee pain that is 7/10, with 10 being the worst, which is dull and achy in nature. Right knee pain is worsened with climbing stairs, squatting and activities. Right knee pain is improved with therapy.

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: Noncontributory.

PAST SURGICAL/HOSPITALIZATION HISTORY: Noncontributory.

MEDICATIONS: None.

ALLERGIES: No known drug allergies.

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.

Right shoulder Examination: Reveals tenderness upon palpation of the right AC joint and scapular region with muscle spasm present at trapezius muscle. Neer's test is positive and Hawkins test is positive. ROM is as follows: Abduction is 150 degrees, normal is 180 degrees; flexion is 140 degrees, normal is 180 degrees; external rotation is 60 degrees, normal is 90 degrees and internal rotation is 70 degrees, normal is 90 degrees.

<u>Right Knee Examination:</u> Reveals tenderness upon palpation of the right medial and peripatellar region. ROM is as follows: Forward flexion is 110 degrees, normal is 130 degrees.

GAIT: Normal.

Diagnostic Studies:

02/04/2022 - MRI of the right knee reveals ACL sprain, patellar paratenonitis. 01/22/2022 - MRI of the right shoulder reveals impingement morphology, tendinopathy supraspinatus.

The above diagnostic studies were reviewed.

Diagnoses:

Right shoulder pain - (M25.511). Right shoulder sprain/strain - (S43.401A). Internal derangement, right knee - (M23.91). Right knee pain - (M25.561). Right knee sprain/strain - (S83.91).

Plan:

- 1. **Procedure Right knee intra-articular steroid injection:** I have performed a right knee intra-articular steroid injection under ultrasound guidance. The patient has been receiving physical therapy since the accident and had diagnostic studies of the right knee with the findings as noted above. The ultrasound will aid in assuring that the needle indeed enters the intra-articular space. In an effort to avoid surgery, this injection should decrease inflammation and pain which will aid the physical therapist in achieving and maintaining the conditioned increase in the range of motion and overall expedite recovery.
- 2. **Physical therapy:** The patient is to start physical therapy 3 times a week for 4-6 weeks.

Procedures: If the patient continues to have tender palpable taut bands/trigger points with referral patterns as noted in the future on examination, I will consider doing trigger point injections.

<u>Care:</u> Acupuncture, chiropractic and physical therapy. Avoid heavy lifting, carrying, excessive bending and prolonged sitting and standing.

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<u>Goals:</u> To increase range of motion, strength, flexibility, to decrease pain and to improve body biomechanics and activities of daily living and improve the functional status.

Precautions: Universal.

Follow-up: 1 month.

It is my opinion that the injuries and symptoms Mr. Abdus Choudhury sustained to right shoulder and right knee are causally related to the incident that occurred on 11/29/2021 as described by the patient.

Michael Murray, MD Kevin Ball, PA

Dictated but not proofread

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