

KDV Medical P.C.

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August 31, 2022

Re: Youmans, Franklin

DOB: 03/23/1952

DOA: 07/24/2021

Location: TS Chiropractic Wellness

ORTHOPEDIC RE-EVALUATION

CHIEF COMPLAINT: Left shoulder pain.

HISTORY OF PRESENT ILLNESS: This patient is a 70-year-old right-hand dominant male presenting today for a follow-up visit who sustained injuries in a motor-vehicle related incident on 07/24/2021.

Left shoulder pain is 6/10, described as intermittent pain. Pain is temporarily improved with therapy. Patient is unable to sleep at night due to pain.

PHYSICAL EXAMINATION:

Left Shoulder: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the trapezius. Positive Hawkins test. Positive Impingement test. The patient has no motor or sensory deficit of the right upper extremity. Range of motion, abduction is 150 degrees, normal is 180 degrees; flexion is 160 degrees, normal is 180 degrees; internal rotation is 60 degrees to LR, external rotation is 80 degrees, normal is 90 degrees.

DIAGNOSTIC STUDIES:

Left shoulder MRI, done on 08/21/2020, revealed os acromiale. Hypertrophic changes of the acromioclavicular joint with type III acromion, resulting in narrowing of supraspinatus outlet. Tendinopathy / tendinitis of the supraspinatus tendon with partial articular surface tear.

FINAL DIAGNOSES:

1. Impingement, left shoulder - M75.42
2. Pain, left shoulder - M25.512
3. Partial rotator cuff tear, left shoulder - S46.012A
4. Tendinitis, left shoulder - M75.82

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 shoulder 3 days/week.
5. Discussed left shoulder arthroscopy versus conservative management with the patient.
The patient states that due to continual pain and lack of relief with physical therapy and

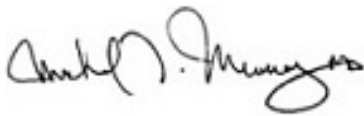
Re: Youmans, Franklin

Page 2

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 is causally related to the injury the patient incurred on the left shoulder on July 24, 2021. These 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