

KDV Medical, P.C.

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October 18, 2022

Re: Duncan, Reginald

DOB: 05/18/1978

DOA: 01/01/2017

Location: Cruz Banting Imelda MD PT

INITIAL ORTHOPEDIC CONSULTATION

CHIEF COMPLAINT: Right thumb pain

HISTORY OF PRESENT ILLNESS: This is an initial orthopedic evaluation for a 44-year-old right-hand dominant male, involved in a work-related accident on 01/01/2017. Patient works for Con-Ed, developed right wrist/thumb pain over time. The patient went to hospital and was treated and released the same day. The patient presents today complaining of pain sustained in the work-related accident. The patient has been treated with physical therapy for the last 2 years without adequate relief.

Right thumb pain is 7/10 described as achy and sore. Pain is worse with increased range of motion/activity.

PAST MEDICAL HISTORY: Noncontributory.

PAST SURGICAL HISTORY: Right ankle surgery with 2 screws in 1999.

DRUG ALLERGIES: NO KNOWN DRUG ALLERGIES.

MEDICATIONS: The patient is not taking any medication at this time.

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

IMPAIRMENT RATING: Patient is currently and temporarily 50% disabled and working full-time.

PHYSICAL EXAMINATION: The patient's height is 5 feet 8 inches, weight is 153 pounds.

Right thumb: No swelling, heat or erythema. No deformity is noted. There is tenderness to palpation over the CMC joint at the palmar aspect of the joint. Full range of motion. Pain with ROM. No trigger finger noted.

DIAGNOSTIC STUDIES: 09/16/2022 - MRI of the Right Thumb: Motion degraded examination. Fluid and intrasubstance signal within the dorsal radial ligament of the thumb at its

Re: Duncan, Reginald
Page 2

trapezial attachment consistent with partial tear/sprain. No fracture or dislocation of the Right Thumb is otherwise identified.

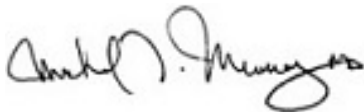
FINAL DIAGNOSES:

1. Right thumb internal derangement. -

PLAN:

2. Imaging studies and clinical examinations were reviewed with the patient.
3. All treatment options discussed with the patient.
4. Continue anti-inflammatory and muscle relaxant medications p.r.n.
5. Continue physical therapy for right thumb 3 days/week.
6. Use thumb spica brace with activity.
7. 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 diagnoses rendered are causally related to the injuries the patient incurred on the right thumb on January 01, 2017. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient.



Nadezhda Bababekova, NP-BC
Michael Murray, MD

NB/AEI