KDV Medical P.C.

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September 12, 2022

Re: Nokaj, Astirt DOB: 07/08/1983 DOA: 07/01/2022

Location: Total Body Healthcare

INITIAL ORTHOPEDIC CONSULTATION

CHIEF COMPLAINT: Right shoulder and left shoulder pain.

HISTORY OF PRESENT ILLNESS: This is an initial orthopedic evaluation for a 39-year-old right-hand dominant male, involved in a work related accident on 07/01/2022. Patient is a supervisor for two buildings. The patient was a bicyclist. While traveling between two buildings he got struck by a vehicle. The patient went to Elmhurst Hospital and was treated and released the same day. X-rays were negative. The patient presents today complaining of right shoulder and left shoulder pain sustained in the work related accident. The patient has not yet been treated with conservative management including physical therapy.

Right shoulder pain is 7/10, described as sharp and aching. The patient reports pain with reaching overhead and behind and is frequently woken up at night due to pain.

Left shoulder pain is 7/10, described as sharp and achy. The patient reports pain with reaching overhead and behind and is frequently woken up at night due to pain.

PAST MEDICAL HISTORY: Noncontributory.

PAST SURGICAL HISTORY: Noncontributory.

DRUG ALLERGIES: NO KNOWN DRUG ALLERGIES.

MEDICATIONS: The patient is taking Tylenol and ibuprofen p.r.n.

WORK HISTORY: The patient is currently not working.

IMPAIRMENT RATING: Patient is currently and temporarily 100% disabled.

ADL CAPABILITIES: As a direct result of the injuries sustained in this accident, the patient states that he is unable to do the following activities: driving, lifting heavy objects, carrying, reaching overhead, laundry, shopping, running errands, and exercising.

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

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PHYSICAL EXAMINATION: The patient's height is 6 feet 5 inches, weight is 210 pounds. Patient is alert, oriented and cooperative.

Right Shoulder: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the supraspinatus, AC joint, and subacromial space. Positive Empty Can test. Positive Hawkins test. Positive O'Brien test. Positive Impingement test. Positive Lift-Off test. Range of motion, abduction is 140 degrees, normal is 180 degrees; forward flexion is 150 degrees, normal is 180 degrees; internal rotation to L5; external rotation is 60 degrees, normal is 90 degrees. The patient has no motor or sensory deficit of the right upper extremity.

Left Shoulder: No heat, erythema or swelling noted. Reveals tenderness upon palpation of the supraspinatus, AC joint, and subacromial space. Positive Empty Can test. Positive Hawkins test. Positive O'Brien test. Positive Impingement test. Positive Lift-Off test. Range of motion, abduction is 140 degrees, normal is 180 degrees; forward flexion is 150 degrees, normal is 180 degrees; internal rotation to L5; external rotation is 60 degrees, normal is 90 degrees. The patient has no motor or sensory deficit of the left upper extremity.

FINAL DIAGNOSES:

- 1. Internal derangement, right shoulder M24.811.
- 2. Pain, right shoulder M25.511.
- 3. Internal derangement, left shoulder M24.812.
- 4. Pain, left shoulder M25.512.

PLAN:

- 1. All treatment options discussed with the patient.
- 2. Continue anti-inflammatory and muscle relaxant medications p.r.n.
- 3. Start physical therapy for right/left shoulder 3 days/week; RX given to do so.
- 4. MRI ordered of the right and left shoulder to rule out RC and labral tears and/or synovial injury.
- 5. Follow up in 4-6 weeks.

<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 diagnoses rendered is causally related to the injuries the patient incurred on the right shoulder and left shoulder on July 01, 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