



September 19, 2022

Office seen at:  
Kinetic Approach Physical Therapy Office PC  
82-25 Queens Blvd, Suite 1A  
Elmhurst, NY 11373  
Phone# (718) 255-1603

Re: Mazza, Melissa  
DOB: 06/21/1985  
DOA: 06/14/2022

### **INITIAL ORTHOPEDIC CONSULT EXAMINATION**

**CHIEF COMPLAINT:** Right hip and left hip pain.

**HISTORY OF PRESENT ILLNESS:** A 37-year-old left-hand dominant female involved in a motor vehicle accident on 06/14/2022. The patient was a pedestrian. The patient was struck on left side and fell on left side. The EMS arrived on the scene. The police were called to the scene of the accident. The patient did not go to any hospital that same day. The patient presents today complaining of right hip and left hip pain sustained in the motor vehicle accident. The patient was attending physical therapy for the last 2 months with little relief.

**WORK HISTORY:** The patient is currently working as a yoga teacher.

**PAST MEDICAL HISTORY:** Noncontributory.

**PAST SURGICAL HISTORY:** Noncontributory.

**DRUG ALLERGIES:** NO KNOWN DRUG ALLERGIES.

**MEDICATIONS:** The patient is taking Lexapro.

**SOCIAL HISTORY:** The patient smokes one-third pack of cigarettes and marijuana every day. The patient drinks alcohol occasionally.

**ADL CAPABILITIES:** The patient states that she can walk for 1/2 block. She can stand for 5 minutes before she has to sit. She can sit for 5 minutes before needing to change positions secondary to pain. As a direct result of the injuries sustained in this accident, the patient states

that she is unable to do the following activities: carrying heavy objects, laundry, shopping, running errands, kneeling, squatting, negotiating stairs, jogging, and exercising.

**PRESENT COMPLAINTS:** Right hip: Right hip pain is 7/10, described as intermittent, sharp, stabbing, dull, achy pain. Worse with range of motion and improves with rest.

Left hip: Left hip pain is 7/10, described as intermittent, sharp, stabbing, dull, achy pain. Worse with range of motion and improves with rest.

**REVIEW OF SYSTEMS:** Temperature taken at the time of exam was 98.6 degrees Fahrenheit.

**General:** No fever, chills, night sweats, weight gain, or weight loss.

**HEENT:** No double vision, eye pain, eye redness, decreased hearing, earache, ear ringing, nosebleeds, sore throat or hoarseness.

**Endocrine:** No cold intolerance, appetite changes or hair changes.

**Skin:** Clear, no rashes or lesions.

**Neuro:** No headaches, dizziness, vertigo or tremor.

**Respiratory:** No wheezing, coughing, shortness of breath or difficulty breathing.

**Cardiovascular:** No chest pain, murmurs, irregular heart rate or hypertension.

**GI:** No nausea, vomiting, diarrhea, constipation, jaundice or changes in bowel habits.

**GU:** No blood in urine, painful urination, loss of bladder control or urinary retention.

**Hematology:** No active bleeding, bruising, anemia or blood clotting disorders.

**Psychiatric:** No anxiety, change in sleep pattern, depression or suicidal thoughts.

**PHYSICAL EXAMINATION:** The patient's height is 5 feet 6 inches, weight is 118 pounds, and BMI is 19. The right hip reveals no swelling, tenderness, erythema or deformity. Range of motion: Flexion 125/125 degrees, extension 15/15 degrees, abduction 45/45 degrees, adduction 30/30 degrees, external rotation 45/45 degrees, internal rotation 35/35 degrees.

The left hip reveals no swelling, tenderness, erythema or deformity. Range of motion: Flexion 125/125 degrees, extension 15/15 degrees, abduction 45/45 degrees, adduction 30/30 degrees, external rotation 45/45 degrees, internal rotation 35/35 degrees.

**DIAGNOSTIC TESTING:** MRI of the pelvis, done on 07/27/2022, shows bilateral acetabular labral tears with otherwise unremarkable hips. No acute bony pathology. Levorotated uterus with prominent endometrial complex. Right ovarian cyst. As clinically warranted sonographic followup may be obtained. MRI of the right hip, done on 06/29/2022, shows negative study. MRI of the left hip, done on 06/29/2022, shows negative study. A 2 cm left adnexal cystic lesion is seen. Recommend pelvic ultrasound study.

**ASSESSMENT:**

1. Labral tear, right hip.
2. Labral tear, left hip.

**PLAN:**

1. Imaging studies and clinical examinations were reviewed with the patient.

2. All treatment options discussed with the patient.
3. Cold compresses for right hip and left hip.
4. Continue anti-inflammatory and muscle relaxant medications p.r.n.
5. Continue physical therapy for right hip and left hip 3 days/week.
6. Recommend steroid injections with pain management for right hip and left hip.
7. The patient referred to GYN for further management of left adnexal cyst.
8. The patient referred to hip specialist for further management.
9. Follow up p.r.n.

**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 the specified date. These current symptoms were nonexistent prior to the accident. Findings were discussed with the patient.

**AFFIRMATION:** Being duly licensed to practice medicine in the state of New York, pursuant to the applicable provisions of the Civil Practice Laws and Rules, I hereby affirm under penalty of perjury that the statements contained herein are true and accurate.



Anastasia Platonova, FNP-BC  
AP/AEI



Christopher S. Durant, MD