**Medical Re-Evaluation**

Patient Name: Natasha Berk

Dt. of Exam: 07/22/2019

1st Exam Dt.: 06/24/2019

Dt. of Injury: 06/09/2017

**Procedures performed:**

7/22/19 - LKOv#1

**Chief Complaint:**

The patient complains of neck pain that is 7/10, with 10 being the worst, which is sharp and shooting in nature. Neck pain is associated with numbness and tingling. Neck pain is worsened with sitting, standing and lying down.

The patient complains of mid back pain that is 7/10, with 10 being the worst, which is dull and achy in nature. Mid-back pain is worsened with lying down, movement activities and bending.

The patient complains of lower back pain that is 8/10, with 10 being the worst, which is sharp in nature. Lower back pain is associated with numbness and tingling Lower back pain is worsened with sitting, standing, lying down, movement activities and climbing stairs.

The patient complains of left shoulder pain that is 7/10, with 10 being the worst, which is sharp and shooting in nature. Left shoulder pain is worsened with raising the arm and lifting objects.

The patient complains of right shoulder pain that is 7/10, with 10 being the worst, which is sharp and shooting in nature. Right shoulder pain is worsened with raising the arm and lifting objects.

The patient complains of left knee pain that is 7/10, with 10 being the worst, which is sharp and shooting in nature. Left knee pain is worsened with walking, climbing stairs and squatting.

The patient complains of right knee pain that is 7/10, with 10 being the worst, which is sharp and shooting in nature. Right knee pain is worsened with walking, climbing stairs and squatting.

The patient complains of left hip pain.

The patient complains of right hip pain.

**REVIEW OF SYSTEMS:**  The patient admits to chest pain and abdominal pain. The patient denies seizures, shortness of breath, jaw 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:**  Weight loss, thyroid disease.

**PAST SURGICAL / HOSPITALIZATION HISTORY:**  Gallbladder removal.

**MEDICATIONS:**  Vitamin D, skin hair nails w/Biotin, Probiotic, Moringa.

**ALLERGIES:**  No known drug allergies.

**Physical Examination:**

**Neurological Exam:** 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.

**Cervical Spine exam:** Cervical spine examination reveals tenderness upon palpation at C2-8 levels bilaterally with muscle spasm present. ROM is as follows: extension was 10 and is 10 degrees; forward flexion was 30 and is 30 degrees; right rotation was 10 and is 10 degrees; left rotation was 10 and is 10 degrees; right lateral flexion was 10 and is 10 degrees and left lateral flexion was 10 and is 10 degrees.

**Thoracic Spine Examination:** Reveals tenderness upon palpation at T1-T12 levels bilaterally with muscle spasm present.

**Lumbar Spine Examination:** Lumbar spine examination reveals tenderness upon palpation atL1-S1 levels bilaterally with muscle spasm present. ROM is as follows: extension was 10 and is 10 degrees; forward flexion was 30 and is 30 degrees; right rotation was 10 and is 10 degrees; left rotation was 10 and is 10 degrees; right lateral flexion was 10 and is 10 degrees and left lateral flexion was 10 and is 10 degrees.

**Left Shoulder Examination:** Reveals tenderness upon palpation of the left AC joint region with muscle spasm present at deltoid muscle and trapezius muscle. Neer's test is positive and Hawkins's test is positive.

**Right Shoulder Examination:** Reveals tenderness upon palpation of the right AC joint region with muscle spasm present at deltoid muscle and trapezius muscle. Neer's test is positive and Hawkins's test is positive.

**Left Knee Examination:** Reveals tenderness upon palpation of the left peripatellar region. ROM is as follows: extension was -5 and is -5 degrees and forward flexion was 110 and is 110 degrees.

**Right Knee Examination:** Reveals tenderness upon palpation of the right peripatellar region. ROM is as follows: extension was -5 and is -5 degrees and forward flexion was 110 and is 110 degrees.

**Left Hip Examination:** ROM is as follows: flexion was 30 and is 30 degrees; internal rotation was 10 and is 10 degrees and external rotation was 10 and is 10 degrees.

**Right Hip Examination:** ROM is as follows: flexion was 30 and is 30 degrees; internal rotation was 10 and is 10 degrees and external rotation was 10 and is 10 degrees.

**GAIT:** Normal.

**Diagnostic Studies:**

9/11/2017 - MRI of the Cervical spine reveals bulge at C4-5 annular and HNP at C2-3 and C5-6 central subligamentous

9/11/2017 - MRI of the Lumbar spine reveals bulge at L1-2, L3-4 annular , HNP at L2-3, L3-4, L4-5, L5-S1 and Schmorl's nodes involving T12, L1, L2, L3, and S1 vertebral bodies

11/10/2017 - MRI of the left shoulder reveals Partial tear of the supraspinatus tendon. Tear of the superior labrum. Hypertrophy of the AC joint resulting in level 2 impingement syndrome.

11/10/2017 - MRI of the left knee reveals Complex tear of the posterior horn of the lateral meniscus. Knee effusion. Edema anterior to the patella, lateral to the knee..

10/19/2017 - UE NCV/EMG Bilateral C5 radiculopathy. Bilateral carpal tunnel syndrome affecting sensory components..

The above diagnostic studies were reviewed.

**Diagnosis:**

Cervical disc bulge at C4-5 annular.

Cervical disc herniation at C2-3 and C5-6 central subligamentous.

Lumbar disc bulge at L1-2, L3-4 annular.

Lumbar disc herniation at L2-3, L3-4, L4-5, L5-S1.

Lumbar Schmorl's nodes involving T12, L1, L2, L3, and S1 vertebral bodies.

Thoracic Muscle Sprain/Strain.

Bilateral shoulder sprain/strain.

Bilateral knee sprain/strain.

Bilateral hip sprain/strain.

**Plan:**

of the Lumbar spine to rule out herniated nucleus pulposus/soft tissue injury.

Procedure - left knee Intra-articular Orthovisc injection.

**Follow-up:** 4 weeks



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