**Medical Re-Evaluation**

Patient Name: Vidal Mysia

Dt. of Exam: 06/03/2019

1st Exam Dt.: 05/14/2018

Others^ Medications were reviewed.

**Procedures performed:**

6/4/18 - CTPI#1

8/20/18 - CESI#1(C7-T1)

9/24/18 - CESI#2(C7-T1)

10/26/18 - CTPI#2

11/19/18 - CESI#2(C7-T1)

5/6/19 - CTPI #3

5/16/19 - EMG UE

**Chief Complaint:**

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

**REVIEW OF SYSTEMS:**  The patient denies seizures, chest pain, shortness of breath, jaw pain, abdominal 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:**  Noncontributory.

**PAST SURGICAL / HOSPITALIZATION HISTORY:**  Toe surgery in 2013.

**MEDICATIONS:**  Cyclobenzaprine 5 mg as needed.

**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 with the exception of right triceps 1/2 and left triceps 1/2.

**Sensory Examination:** Is checked by pinprick. It is intact. Hoffman's exam is negative.

**Manual Muscle Strength Testing:** Testing is 5/5 normal with the exception of right shoulder abduction 5-/5, left shoulder abduction 5-/5, right shoulder flexion 5-/5, left shoulder flexion 5-/5, right hip flexion 5-/5 and left hip flexion 5-/5.

**Cervical Spine exam:** Cervical spine examination reveals tenderness upon palpation at C2-8 levels. The Spurling's test is positive. The Cervical Distraction test is positive. There are palpable taut bands / trigger points at bilateral levator scapulae, bilateral trapezius and bilateral posterior scalenes. 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.

**GAIT:** Normal.

**Diagnostic Studies:**

2/23/2016 - MRI of the Cervical spine reveals bulge at C5-6 , HNP at C3-4, C4-5, C5-6, C6-7, C7-T1 and Mild spondylosis at C5-6.

5/16/2019 - UE NCV/EMG Evidence of moderate bilateral carpal tunnel syndrome..

7/13/2015 - X-rays of the thoracic spine: Normal..

The above diagnostic studies were reviewed.

**Diagnosis:**

Cervical disc bulge at C5-6.

Cervical disc herniation at C3-4, C4-5, C5-6, C6-7, C7-T1.

Cervical Mild spondylosis at C5-6..

Cervicalgia (Neck pain): M54.2

**Plan:**

**Follow-up:** 4 weeks.