**Patient Name:** BETHEA, MARY FRANCES

**Date of Birth:** 07/24/1955

**Date of Service:** 09/30/2022

**History of Present Illness:**  
The patient is seen here for Orthopedic follow up evaluation of right knee pain. Patient has done PT in the past.

**Past Medical History:**  
Diabetes

**Past Surgical History:**

**Past Accident/Injuries:**

**Daily Medications:**

**Allergies:**

**Social History:**  
 Somking,

**Physical Examination:**  
**General Appearance:** Patient is a well-developed, well-nourished female in no acute distress. Awake, alert,   
and oriented x 3. Mood and affect are normal.  
**Gait and Station:** Gait is normal

**Right Knee:**  
Examination of the right knee revealed no tenderness on palpation. There was no effusion. There was no atrophy of the quadriceps noted. Medial McMurray's test was positive. Lachman’s test was negative. Anterior drawer sign and Posterior drawer sign were each negative. Patellofemoral crepitus was present. Valgus & Varus stress test was stable. Range of motion: Flexion 130 degrees (150 degrees normal) and extension 0 degrees (0 degrees normal).

**Diagnostic Imaging:**  
06/23/2022 – MRI of the right knee reveals tear of posterior horn of the medial meniscus. Partial tear of the proximal ACL. Complex tear of anterior horn, body and posterior horn of the lateral meniscus.Moderate osteoarthritic changes. Anterior subcutaneous soil tissue swelling and edema consistent with recent trauma, which may be seen in the setting of recent trauma, in an appropriate clinical setting. Moderate joint effusion consistent with trauma or synovitis.in an appropriate clinical setting.  
09/19/2022 - X=ray of the right knee reveals osteoarthritis.  
09/19/2022 - X=ray of the left knee reveals osteoarthritis.

**Assessment and Plan:**  
Diagnosis: Medial/lateral right knee meniscus tears.  
Plan: Right knee arthroscopy.

The patient has failed conservative management which has included physical therapy, oral medications. The MRI was reviewed with the patient as well as the clinical examination findings. I have gone over all treatment options with the patient. At this time, I have discussed the benefits and risks of Right knee arthroscopy, chondroplasty, synovectomy, partial vs total meniscectomy and all other related procedures with the patient. I answered all their questions in regards to the procedure. The patient verbally consents to the procedure.

The patient’s Right Knee was examined   
X-rays of the Bilateral Knees were reviewed.   
The patient at the present time is advised to obtain medical clearance.  
Patient is to return to the office postop.

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.  
  
In response to the required COVID-19 mandates the following precautions have been taken. Doctors and Medical Assistants wore masks and gloves; examination rooms are completely disinfected after each use. Patient was required to wear a mask. Temperature scan was administered prior to examination. No more than 10 people were permitted in the waiting room at any time as this is the max that can be achieved while still maintaining six (6) feet social distancing guidelines. Only the patient was permitted in the examination room.



**L Sean Thompson, M.D.**