**Patient Name:** CANALES, NORMA

**Date of Birth:** 03/09/1973

**Date of Service:** 03/28/2022

**History of Present Illness:**  
This is a 49 year-old female who was involved in a motor vehicle accident on 08/01/21. The patient states that she was the restrained driver of a vehicle, which was involved in a rear end collision at red light. Patient injured Left Hip in the accident. The patient is here today for orthopedic evaluation. Patient has tried PT.

The patient complains of Left Hip pain that is 7/10 with 10 being the worst. Pain increases with \_\_\_\_\_random, stairs, and squatting and improves with physical therapy.

**Past Medical History:**  
Arthritis, high blood pressure.

**Past Surgical History:**  
Hip surgery in 1980 and hysterectomy in 2019

**Past Accident/Injuries:**

**Daily Medications:**  
Ibuprofen, hydro, losartan.

**Allergies:**  
No known drug allergies

**Social History:**  
Patient is a medical assistant and is still working.

**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:** Patient was born with a defect, one leg is longer than the other.

**Left Hip:**  
Examination observation and palpation of the hip is positive for pain-limited range of motion, tenderness with muscle spasm and atrophy noted at lower extremity. Range of motion reveals flexion 80 (100 degrees normal); extension 10 (30 degrees normal); abduction 25 (40 degrees normal); internal rotation 15 (50 degrees normal); external rotation 30 (40 degrees normal). Left leg is 7 cm shorter.

**Diagnostic Imaging:**  
11/13/2021 - MRI of the right hip reveals right-sided gluteal tendinitis at the greater trochanteric insertions.  
11/13/2021 - MRI of the left hip reveals congenital hip dysplasia involving the left hip. 5 cm superior displacement of the left femoral head with respect to the right femoral head. Severe joint space narrowing involving the left hip joint. Diffuse reactive bone marrow edema throughout the left proximal femur.

**Assessment and Plan:**  
Diagnosis: Left hip congenital dysplasia.  
Plan: Continue with PT.

The patient’s Left Hip was examined   
MRI of the Left Hip and right hip was reviewed.   
Patient is to return to the office PRN.

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. Patient is considered 100% temporarily disabled.  
  
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.**