**Patient Name:** CARSON, FATIMA

**Date of Birth:** 12/05/1990

**Date of Service:** 01/24/2022

**History of Present Illness:**  
The patient is seen here for orthopedic postop follow-up evaluation. Patient had right knee surgery on 11/15/21. Patient did not undergo PT.

The patient complains of right knee pain that is 3-4/10, with 10 being the worst. Right knee pain increases with walking, standing and improves with resting.

The patient complains of right knee pain that is 5-6/10, with 10 being the worst. Right knee pain increases with walking, standing and improves with resting.

**Past Medical History:**  
Noncontributory

**Past Surgical History:**  
Right knee surgery on 11/15/21.

**Past Accident/Injuries:**

**Daily Medications:**  
Tramadol p.r.n.

**Allergies:**  
No known drug allergies

**Social History:**

**Physical Examination:**  
**Vitals:** On physical examination, the patient is 5 feet 2 inches tall   
**General Appearance:** Patient is a well-developed, well-nourished male in no acute distress. Awake, alert,   
and oriented x 3. Mood and affect are normal.  
**Gait and Station:** Gait is normal

**Left and Right Knee:**  
Examination of the right knee revealed tenderness on palpation at the patellofemoral region and lateral joint line. McMurray’s test is positive at lateral right knee. Range of motion Flexion 130degrees(150 degrees normal), Extension 0degrees(0 degrees normal).  
  
Left Knee: Examination of the left knee revealed tenderness on palpation at the lateral and medial joint line. McMurray’s test is positive at medial left knee. Range of motion Flexion 125degrees(150 degrees normal), Extension 0degrees(0 degrees normal)

**Diagnostic Imaging:**  
08/17/2019: MRI of the left knee reveals tear of the posterior horn of the medial meniscus with associated 1.1 cm parameniscal cyst. A 1.5 cm paramedical cyst also seen anterior to the anterior horn of the medial meniscus without visualized associated tear.  
08/18/2021: MRI of the right knee reveals lateral meniscal tear with an associated parameniscal cyst.

**Assessment and Plan:**  
Recommend left 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 Left and 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 Left Knee, Right Knee were examined   
MRI of the Left Knee, Right Knee were reviewed.   
The patient at the present time is advised to began PT, undergo medical clearance within 30 days of scheduled period. Patient is to return to the office in 2 months.

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.**